

# RECOVERY SIDE EFFECT CHART

Cycle #: \_\_\_\_\_ Week: \_\_\_\_\_

Patient Name: \_\_\_\_\_

Date Range: \_\_\_\_\_

SIDE EFFECT	SEVERITY (1-5)	FREQUENCY	OBSERVATIONS & MANAGEMENT
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Fatigue		Daily / PM	
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Nausea			
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Appetite Loss			
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Neuropathy			
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Sleep Quality			
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Pain/Discomfort			
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Mental Clarity			
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## Additional Notes & Medications Taken:

Enter symptoms, temperature, or specific triggers here...

Contact oncology team immediately if fever exceeds 100.4F (38C) or for uncontrollable symptoms.