

HCV Treatment Symptoms Inventory  
(Complete at Weeks 0, 2, 4, and monthly after that)

Are you experiencing any of the following symptoms? Check here if Yes

Feeling excessively tired/fatigued/exhausted	
Trouble Sleeping	
Headache	
Muscle Aches/Pains	
Joint Aches/Pains	
Back pain	
Weakness	
Flu-Like Illness	
Chills	
Fever	
Diarrhea	
Decreased Appetite	
Nausea	
Vomiting	
Weight loss	
Heartburn or upset/sour stomach	
Itching	
Rash/Skin Reactions Describe: _____	
Irritability	
Depression / Anxiety	
Changes in mood/Mood swings	
Feeling forgetful, problems concentrating	
Decreased or blurred vision	
Shortness of breath	
Cough	
Dizziness	
Dry Mouth	
Hair Loss	
Other, specify: _____	
<b>Nurse or Provider to check if yes this week:</b>	
Anemia (Hgb below 10 g/dL)	
Neutropenia (ANC $\leq 0.5 \times 10^9/L$ )	
Thrombocytopenia (Plt $< 50 \times 10^9/L$ )	
Hypothyroidism/Hyperthyroidism (Specify which)	

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

Chart #: \_\_\_\_\_

# Weeks of Treatment Completed: \_\_\_\_\_

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