Patient: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Study: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

Study ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Physician: \_\_\_\_\_\_\_\_\_\_\_\_\_ Time point: \_\_\_\_\_\_\_

[ ]  Performance Status: \_\_\_\_\_ [ ]  Vital Signs: Ht: \_\_\_\_\_\_ WT: \_\_\_\_

[ ]  Toxicity Note CTCAE v.\_\_\_ B/P: \_\_\_\_\_\_ RR: \_\_\_\_ P:\_\_\_\_\_Temp:\_\_\_

[ ]  Specimens: Time of blood draw: \_\_\_\_\_\_ Initials: \_\_\_\_

 [ ]  Kit provided

 [ ]  EDTA tube [ ]  Streck tube [ ]  Buccal SWAB

 [ ]  Green top/Heparin tube [ ]  Urine [ ]  Other: \_\_\_\_\_\_\_\_\_

[ ]  Laboratory Tests:

 [ ]  CBC/Diff [ ]  TSH/Free T3/Free T4 [ ]  LDH

 [ ]  CMP [ ]  Magnesium [ ]  URIC ACID

 [ ]  Other: \_\_\_\_\_\_\_\_\_\_\_\_

[ ]  Questionnaires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  Completed prior to seeing physician.

[ ]  Y [ ]  N Did patient need help?

[ ]  Pill Compliance:

 [ ]  Pill Count

 [ ]  Y [ ]  N Did patient miss any pills in the last cycle? How many doses missed: \_\_\_\_\_

 Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  Special Instructions:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DURING TREATMENT**

Patient Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_ Cycle/Day: \_\_\_\_\_\_\_

[ ]  Vital Signs Before Treatment: Time: \_\_\_\_\_

 B/P: \_\_\_\_\_\_ RR: \_\_\_\_ P:\_\_\_\_\_Temp:\_\_\_

[ ]  PK blood draw: Time drawn: \_\_\_\_\_\_\_

**Start time of treatment**: \_\_\_\_\_\_\_\_\_

[ ]  Vital Signs During Treatment: Time point: \_\_\_\_\_\_\_\_\_\_

 B/P: \_\_\_\_\_\_ RR: \_\_\_\_ P:\_\_\_\_\_Temp:\_\_\_

[ ]  Additional PK blood Draw: Time point: \_\_\_\_\_\_\_\_ Time Drawn: \_\_\_\_\_\_\_\_

**Stop Time of Treatment: \_\_\_\_\_\_\_\_\_\_**

[ ]  Vital Signs After Treatment: \_\_\_\_\_

 B/P: \_\_\_\_\_\_ RR: \_\_\_\_ P:\_\_\_\_\_Temp:\_\_\_

[ ]  PK blood draw After Treatment, due at: \_\_\_\_\_\_ Time Drawn: \_\_\_\_\_\_\_

[ ]  Patient was observed \_\_\_\_\_\_\_\_ After treatment. Discharged at: \_\_\_\_\_\_\_\_\_

Comments:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_