

How to complete the Your Symptoms Matter questionnaire

Each time you have an appointment to see a doctor at the cancer centre you will need to complete the Your Symptoms Matter questionnaire.

You can complete the questionnaire the night before or the morning of your appointment in your MyChart account. If you have not registered for MyChart, ask a member of your healthcare team about it. You can also sign up at <https://mychart.ourepic.ca/>

You can also complete the questionnaire at one of the check-in computers in the cancer centre when you come for your appointment. Your answers on the questionnaire are seen in your electronic healthcare record (chart) for your healthcare team to review.

When you complete the questionnaire, your doctor and nurse can:

- Review your answers before they see you
- Understand the symptoms that are a problem for you
- Talk to you about your symptoms and how to manage them

What questions will you be asked on the Your Symptoms Matter questionnaire?

You will be asked about the cancer related symptoms you have at the time you do the questionnaire. Choose a number on a scale of 0 to 10 that best tells us how you are feeling. “0” means you do not have the symptom and “10” means the symptom is at its very worst for you. You will also be asked about your activity level in the last month. These questions are for you to answer, but someone may help you. It is how you feel, not how others think you feel.

No Pain	0 1 2 3 4 5 6 7 8 9 10	Worst Possible Pain
No Tiredness (Tiredness = lack of energy)	0 1 2 3 4 5 6 7 8 9 10	Worst Possible Tiredness
No Drowsiness	0 1 2 3 4 5 6 7 8 9 10	Worst Possible Drowsiness
No Nausea	0 1 2 3 4 5 6 7 8 9 10	Worst Possible Nausea
No Lack of Appetite	0 1 2 3 4 5 6 7 8 9 10	Worst Possible Lack of Appetite
No Shortness of Breath	0 1 2 3 4 5 6 7 8 9 10	Worst Possible Shortness of Breath
No Depression (Depression = feeling sad)	0 1 2 3 4 5 6 7 8 9 10	Worst Possible Depression
No Anxiety (Anxiety = feeling nervous)	0 1 2 3 4 5 6 7 8 9 10	Worst Possible Anxiety
Best Wellbeing (how you feel overall)	0 1 2 3 4 5 6 7 8 9 10	Worst Possible Wellbeing

Over the past month I would generally rate my activity as: (only check one)

- (0) normal with no limitations
- (1) not my normal self, but able to be up and about with fairly normal activities
- (2) not feeling up to most things, but in bed or chair less than half the day
- (3) able to do little activity and spend most of the day in bed or chair
- (4) pretty much bedridden, rarely out of bed

Please talk to us about any symptom you are having that is a problem for you!