



DAILY DIARY

For patients receiving

KEYTRUDA[®] and **LENVIMA**[®]

This is your personal diary to help you keep track of your **KEYTRUDA®** and **LENVIMA®** treatment. Right now, you may feel that you have been given a lot of information. Keeping a diary may help you keep your information organized; and keeping these records will help you remember details you may want to discuss with your healthcare team as you proceed with your treatment. We hope you will find this diary useful at all stages of your treatment and care.

Inside this kit, you will find a wallet card. Fill in the information and place the wallet card in your wallet or purse. This wallet card contains a summary of some possible side effects you may experience while on **KEYTRUDA®** and **LENVIMA®** treatment. Keep the wallet card with you at all times in case you have to meet with a healthcare professional who is not part of your **KEYTRUDA®** and **LENVIMA®** treatment team.

Patient information

Name: _____

Address: _____

Home phone: _____

Cell phone: _____

Important phone numbers

Person/ organization	Telephone Number	Notes
After hours contact		
Cancer clinic		
Medical oncologist		
Pharmacist		
Nurse		
Family doctor		

Medical history

(e.g., past illness, operations and when they occurred)

Allergies/intolerances

Food(s):

Drug(s):

Other(s):

List of medications

Medication Name	Dosage	What is this medication for?	Notes

Personal diary

You and your caregivers can use the next section of the diary to keep track of any side effects you may experience. The diary will help your healthcare team understand your response to treatment. Discuss the information with members of your healthcare team. **If you experience any side effects, contact your healthcare team right away — don't wait for your symptoms to get worse.**

When you get **KEYTRUDA®** and **LENVIMA®**, you can have some serious side effects. These side effects can sometimes become life-threatening and can lead to death. These side effects may happen anytime during treatment or even after your treatment has ended. You may experience more than one side effect at the same time. Your doctor may give you other medicines in order to prevent more severe complications and reduce your symptoms. Your doctor may withhold the next dose of **KEYTRUDA®** or **LENVIMA®**, or stop your treatment with **KEYTRUDA®** or **LENVIMA®**.

How do I use this diary?

With the help of the “*What to look out for*” flap at the end of the brochure, describe the specific symptoms and side effects you are experiencing. Use a scale of 1 to 10 (example provided on the right side of this page) to describe the level of distress a specific side effect is causing you. Then, record the specific details in the “*Notes*” section and the date when it occurred (see the example on the next page).

A 1-to-10 scale can be used to assist you in describing the level of distress a specific side effect is causing you. For example:

Pain
 No pain **1 2 3 4 5 6 7 8 9 10** Worst possible pain

Tiredness
 Not tired **1 2 3 4 5 6 7 8 9 10** Tired all the time for most of the day



Rash
 No rash **1 2 3 4 5 6 7 8 9 10** Large rash



You would choose the number that most appropriately describes the level of distress a specific side effect is causing you.

Weekly treatment diary (Week 1)

Week beginning 01 / 05 / 22
 dd / mm / yy

Describe the severity of your symptoms using the 1-to-10 scale described on page 8 of this booklet. When you are not experiencing any symptoms, leave the area blank or write “0”.

Your symptoms	Mon 1	Tues 2	Wed 3	Thu 4	Fri 5	Sat 6	Sun 7
 general					2 Fatigue/ more tired	2 Fatigue/ more tired	
 skin and hair	2 Rash left arm	2 Rash Left arm	5 Rash Left arm	5 Rash Left arm	3 Rash Left arm	3 Rash Left arm	2 Rash Left arm

Notes (always fill in details)	
 general	I was feeling pretty tired and had trouble getting out of bed. I called the cancer team and they said not to worry too much, but they will check in with me more often over the next few weeks.
 skin and hair	The small rash on my left forearm (size of a quarter) tripled in size and got itchier. I checked with my oncologist and he prescribed an ointment and it seems to be getting better.

Being aware

It is important to be aware of the side effects of **KEYTRUDA®** and **LENVIMA®** therapy. **Tell your doctor, nurse or pharmacist without delay, as soon as you notice any symptoms. Do not wait until your next appointment.**

How are you feeling right now?

First, let us know how you are feeling **before** you start your **KEYTRUDA®** and **LENVIMA®** treatment (this is known as your **personal baseline**). It's important that we know how you are feeling **before you start treatment** so that we can better track your symptoms.

**Record your personal baseline values
on the other side of this flap.**

Weekly treatment diary

WEEK 0

Date ____ / ____ / ____

Describe the severity of your symptoms using the 1-to-10 scale described on page 8 of this booklet. When you are not experiencing any symptoms, leave the area blank or write "0".

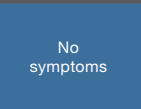






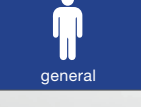
Your symptoms	Severity of your symptoms	Notes (always fill in details)
No symptoms		
 mouth and head		
 throat and chest		
 skin and hair		
 stomach and bowels		
 urine		
 muscles and joints		
 general		

Weekly treatment diary

WEEK 5

Week beginning ___ / ___ / ___

Use side effect chart on the back flap of this brochure to check your symptoms.

Your Symptoms	Mon	Tues	Wed	Thu	Fri	Sat	Sun
 No symptoms							
 mouth and head							
 throat and chest							
 skin and hair							
 stomach and bowels							
 urine							
 muscles and joints							
 general							

Being aware

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Notes (always fill in details)

Weekly treatment diary

WEEK 7

Week beginning ____ / ____ / ____

Use side effect chart on the back flap of this brochure to check your symptoms.

Your Symptoms	Mon	Tues	Wed	Thu	Fri	Sat	Sun
No symptoms							
 mouth and head							
 throat and chest							
 skin and hair							
 stomach and bowels							
 urine							
 muscles and joints							
 general							

Being aware

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Notes (always fill in details)

Weekly treatment diary

WEEK 8

Week beginning ___ / ___ / ___

Use side effect chart on the back flap of this brochure to check your symptoms.

Your Symptoms	Mon	Tues	Wed	Thu	Fri	Sat	Sun
No symptoms							
 mouth and head							
 throat and chest							
 skin and hair							
 stomach and bowels							
 urine							
 muscles and joints							
 general							

Being aware

It is important to be aware of the side effects of **KEYTRUDA®** and **LENVIMA®** therapy. **Tell your doctor, nurse or pharmacist without delay, as soon as you notice any symptoms. Do not wait until your next appointment.**








Notes (always fill in details)

Weekly treatment diary

WEEK 9

Week beginning ___ / ___ / ___

Use side effect chart on the back flap of this brochure to check your symptoms.

Your Symptoms	Mon	Tues	Wed	Thu	Fri	Sat	Sun
No symptoms							
 mouth and head							
 throat and chest							
 skin and hair							
 stomach and bowels							
 urine							
 muscles and joints							
 general							

Being aware

It is important to be aware of the side effects of **KEYTRUDA®** and **LENVIMA®** therapy. **Tell your doctor, nurse or pharmacist without delay, as soon as you notice any symptoms. Do not wait until your next appointment.**








Notes (always fill in details)

Weekly treatment diary

WEEK 10

Week beginning ___ / ___ / ___

Use side effect chart on the back flap of this brochure to check your symptoms.

Your Symptoms	Mon	Tues	Wed	Thu	Fri	Sat	Sun
No symptoms							
 mouth and head							
 throat and chest							
 skin and hair							
 stomach and bowels							
 urine							
 muscles and joints							
 general							

Being aware

It is important to be aware of the side effects of **KEYTRUDA®** and **LENVIMA®** therapy. **Tell your doctor, nurse or pharmacist without delay, as soon as you notice any symptoms. Do not wait until your next appointment.**








Notes (always fill in details)

Weekly treatment diary

WEEK 11

Week beginning ____ / ____ / ____

Use side effect chart on the back flap of this brochure to check your symptoms.

Your Symptoms	Mon	Tues	Wed	Thu	Fri	Sat	Sun
No symptoms							
 mouth and head							
 throat and chest							
 skin and hair							
 stomach and bowels							
 urine							
 muscles and joints							
 general							

Being aware

It is important to be aware of the side effects of **KEYTRUDA®** and **LENVIMA®** therapy. **Tell your doctor, nurse or pharmacist without delay, as soon as you notice any symptoms. Do not wait until your next appointment.**








Notes (always fill in details)

Weekly treatment diary

WEEK 12

Week beginning ___ / ___ / ___

Use side effect chart on the back flap of this brochure to check your symptoms.

Your Symptoms	Mon	Tues	Wed	Thu	Fri	Sat	Sun
No symptoms							
 mouth and head							
 throat and chest							
 skin and hair							
 stomach and bowels							
 urine							
 muscles and joints							
 general							

Being aware

It is important to be aware of the side effects of **KEYTRUDA®** and **LENVIMA®** therapy. **Tell your doctor, nurse or pharmacist without delay, as soon as you notice any symptoms. Do not wait until your next appointment.**

Notes (always fill in details)

Wallet card

The wallet card included in this kit contains a select list of side effects you may experience while on **KEYTRUDA®** and **LENVIMA®**.* Use the wallet card as a handy reference and keep it in your wallet to help you remember the symptoms of potential side effects.

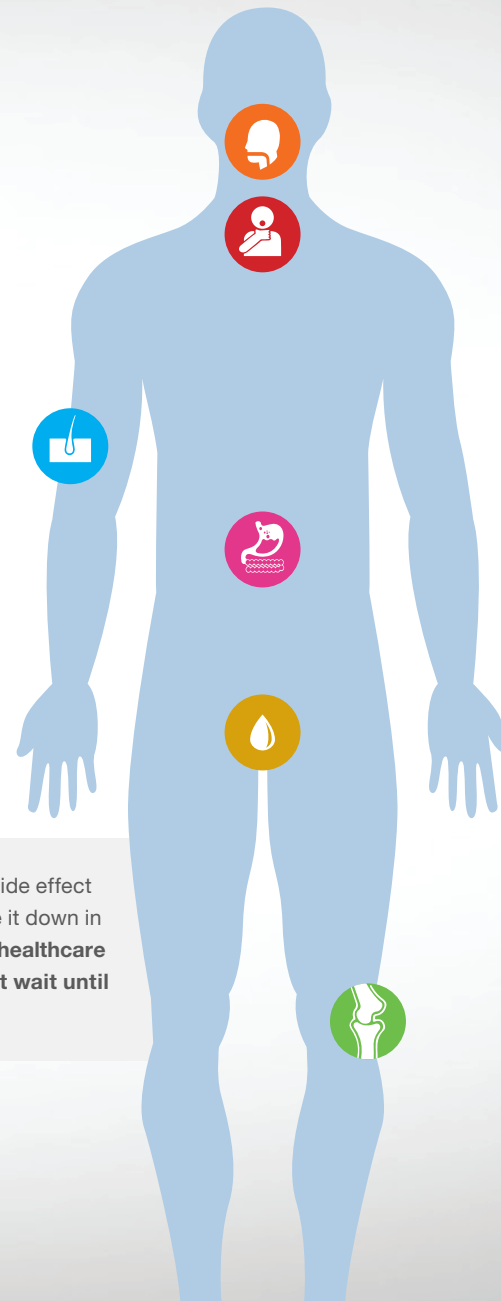
Your wallet card contains details of the treatment you're taking and contact details for your healthcare team (please fill in). **Keep the wallet card with you at all times in case you have to meet with a healthcare professional who is not part of your KEYTRUDA® and LENVIMA® treatment team.**

While on treatment, tell your healthcare team about any changes in how you feel or if you notice anything new or unusual. **If you have any of the symptoms listed in the wallet card, or any other symptom not listed in the wallet card, tell your healthcare team right away.** Do not wait until your next appointment. Do not try to treat any of these symptoms yourself. Your healthcare team will know how to appropriately manage your side effects.

**PLACEHOLDER
FOR WALLET CARD**

* The list of side effects highlights those that were reported in clinical trials and should not be regarded as an exhaustive list.

What to look out for



If you have a symptom or side effect that is not listed here, write it down in your diary and **talk to your healthcare team immediately. Do not wait until your next appointment.**



MOUTH AND HEAD

- Mouth sores
- Headache
- Change in your sense of taste
- Dry mouth
- Inflammation of the mucous membranes, including in the mouth
- Nosebleeds
- Runny nose, sneezing



THROAT AND CHEST

- Low or high levels of thyroid hormone
- Hoarseness
- Upper respiratory tract infection
- Trouble breathing or shortness of breath
- Cough
- Voice change
- Sore throat



SKIN AND HAIR

- Hair loss
- Bleeding
- Rash
- Itching
- Blisters or peeling of your skin on your hands and soles of your feet



STOMACH AND BOWELS

- Diarrhea
- Nausea
- Vomiting
- Stomach-area (abdominal) pain
- Constipation
- Liver problems/increase in liver enzyme levels
- Indigestion
- Loss of appetite
- Excess gas



URINE

- Urinary tract infection
- Protein in your urine
- Kidney problems



MUSCLES AND JOINTS

- Joint and muscle pain
- Back pain
- Swelling of hands, feet, legs or arms



GENERAL

- Feeling tired or weak
- Weakness
- High blood pressure
- Dizziness
- Weight loss
- Fever
- Low platelet levels
- Low magnesium levels
- Anemia
- High level of amylase or lipase in your blood
- Abnormal levels of thyroid stimulating hormone in the blood
- Trouble sleeping



Speak with your healthcare team if you have any concerns or questions about your **KEYTRUDA®** and **LENVIMA®** treatment.

Information about **KEYTRUDA®** is in the Product Monograph and Consumer Information, available at https://www.merck.ca/static/pdf/keytruda-ci_E.pdf.

Information about **LENVIMA®**, including the Patient Information, is in the Product Monograph, available at <https://ca.eisai.com/-/media/Files/CanadaEisai/LENVIMA-Product-Monograph-EN.pdf>.

LENVIMA® is part of a global strategic oncology collaboration between Eisai and Merck.

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