

CAM use WORKSHEET

Additional copies available in the Sign-in section of the CAMEO website

We recommend recording in the **background information table below**:

- The name/brand of the therapy you want to use
- Your goal for using the therapy “Why I am I using this therapy”
- The expected initial dose (how much) and frequency of use (how often)
- Any known side effects to watch for.
- The outcome you hope to have and when you expect to experience the outcome (evaluation). What you should do if you were to experience a potentially harmful side effect

In the **main table** on the next page, you have room to fill out the following as you begin monitoring your CAM use:

- Date of use. Can be a scheduled appointment or regular interval of time at which you have decided to stop and evaluate.
- Effectiveness scale: *Is the therapy achieving your goal?* (1= not effective to 10 = very effective)
- Any changes to the dose and frequency (how much you are using and how often)
- Side effects experienced, if any. These can be positive or negative, both are important.
- Additional comments related to your therapy use.

Therapy name	
Why I am using this therapy	
How much and how often	
Possible side effects	
Evaluation plan	

This worksheet is intended to help you monitor your CAM use, not to replace the advice of a qualified health care provider.

To share this worksheet with others, please send them an e-vite from: www.cameoprogram.org/send-an-e-vite

Date	Effectiveness	How much and how often	Experienced Side Effects	Comments

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