Jennifer Lorber Lupus Symptoms Checklist



Communicating your symptoms to your care provider is an important part of identifying a medical issue. Remember to take this checklist with you to your next appointment.

| Symptoms | I have had this symptom since my last doctor visit | When did you first experience this symptom? | How often do you have this symptom? | How long does this symptom typically last? hr/days/weeks |
|----------------------------------|--|---|---|---|
| Skin | | | | |
| Rash across cheeks and nose | Yes | 5 - 10 Years ago | A few times a year | 6 Days |
| Skin rash of raised red patches | No | 5 - 10 Years ago | Every few months | 8 Days |
| Rash on skin exposed to sunlight | | | | |
| Sores in the mouth or nose | No | 1 - 3 Years ago | A few times a year | 4 Days |
| Hair Loss | | | | |

Pain and Swelling

| Swollen joints | Yes | 3 - 5 Years ago | Once a week | 2 Days |
|---|-----|-----------------|------------------|---------|
| Stiff joints | Yes | 3 - 5 Years ago | Once a month | 11 Days |
| Painful joints | Yes | 3 - 5 Years ago | Once a week | 2 Days |
| Fingers or toes that turn white, blue, or purple often with numbness | No | 3 - 5 Years ago | Every few months | 1 Days |
| Pain in the chest with deep breath, laugh or cough | | | | |
| Sharp chest pain behind the breastbone or in the left side of the chest | | | | |
| Pain and tenderness in the abdomen | | | | |
| Aching muscles | Yes | 3 - 5 Years ago | Every day | 9 Days |
| Swelling of legs and/or feet | | | | |

Fever

| Recurrent low grade fevers under 101° F | Yes | 1 - 3 Years ago | Once a month | 2 Days | |
|---|-----|-----------------|--------------|--------|--|
|---|-----|-----------------|--------------|--------|--|

Neurological/Cognitive

| Brain fog – lack of concentration, memory loss, headaches | No | 3 - 5 Years ago | Once a week | 1 Days |
|---|----|-----------------|-------------|--------|
| Seizures | | | | |

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Lupus Symptoms Checklist (continued)



| Symptoms | l have had this symptom since my last doctor visit | When did you first experience this symptom? | How often do you have this symptom? | How long does this symptom typically last? hr/days/weeks |
|---|--|---|---|---|
| Fatigue and Sleep | | | | |
| Fatigue | Yes | 3 - 5 Years ago | Every day | 12 Hours |
| General | | | | |
| Dry eyes or dry mouth | Yes | 3 - 5 Years ago | Once a week | 2 Days |
| Bruising easily | | | | |
| Weight change | | | | |
| Anemia – low red blood cell count | | | | |
| Urine that is an abnormal color or frothy | No | 3 - 5 Years ago | Once a week | 1 Days |

Additional Information

| Does anything make your symptoms better or worse? | The pain reliver that I started last year makes the pain manageable. I still live in pain almost everyday. |
|--|---|
| Are your symptoms constant or do they come and go? | Come and Go |
| Do your symptoms get worse at a certain time of the day? | Morning |
| Has any member of your family had lupus or another autoimmune disease? | My mother and aunt were both diagnosed with an autoimmune disease 20+ years ago. I dont remember the name of the disease but they had symptoms very similar to mine. |
| Have you had a positive anti-nuclear antibody (ANA) test? | Yes |
| Notes you would like your provider to know: | We have been working on a diagnosis for my symptoms for over 3 years now. I feel that we need to change our approach and use new testing to help determine what is causing my symptoms. |

This symptom checklist was developed by Exagen Inc., a CAP-accredited and CLIA certified rheumatology specialty laboratory. Exagen Inc. is the maker of the AVISE testing portfolio. Powered by proprietary CB-CAPs, AVISE delivers the most advanced autoimmune test available for lupus and other CTD patients and their providers.