

## Hereditary Angioedema (HAE) Monthly Diary

Name:		Month/Year:								
Day	Morning Weight (lb)	Evening Weight (lb)	Pain (0-10)	Locations of swelling and severity (cm)	Any other associated symptoms?	Name of diuretic used, dose & time	Weight BEFORE diuretic (lb)	Weight AFTER diuretic (lb)	Triggers? (stress, infection, i.e.)	Name of abortive medications used (Ruconest, Berinert, Firazyr, Kalbitor, etc.) <b>and rate its effectiveness.</b>
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										

Baseline weight prior to HAE diagnosis:  
 Baseline measurement of locations prior to swelling (if applicable):

- Abdomen:
- Arms:
- Thigh:

