

Get prepared for your doctor visit

Share this completed guide at your next appointment to have a thorough discussion about HAE with your doctor.

Doctor Discussion Guide	This information can help your doctor determine your treatment needs.
1. Have you been diagnosed with HAE? Yes If your answer is "Yes," answer questions 2–9 to complete your guide.	No If your answer is "No," skip to question 10.
Diagnosed with HAE	
Background	
2. Do you know what type of HAE you have? Type I HAE with normal C1-INH (formerly known as type III) I'm not sure 3. How frequently do you experience symptoms of an attack? per week times per month per year 4. How many of these attacks do you treat? All of them Most of them Some of them I rarely, if ever, treat them	 6. Are you able to identify onset symptoms? Yes No Sometimes 7. Age at first symptom or attack: <8 25-30 8-12 >30 13-17 I'm not sure 18-24 Treatments 8. Are you currently on preventive (prophylaxis) or on-demand (acute) treatment? Preventive On-demand Multiple therapies
Symptoms	I'm not on any treatment
 5. Check the area(s) typically affected during an attack: Peripheral extremities (hand, feet, legs) Face Abdomen/stomach Throat/larynx Chest/airways 	 8a. If you are using a preventive (prophylaxis) therapy, do you find yourself taking it earlier than scheduled to prevent attacks? Yes, often Yes, but rarely Never
Genitals	Sur Loren CSI Rohring



Doctor Discussion Guide

Discussed with LIAE (and'd)

	lagnosed with HAE (cont a.)
8b.	If you use an on-demand (acute) therapy, how long does it take to find relief after treating an attack?
	I notice it immediately
	30-45 minutes
	About 1 hour
	2 hours or more
9. [Yes No
	patients should have an on-demand, acute, treatment plan, even if they are

breakthrough attacks may occur. If you answered "Yes" to question 1, your Doctor Discussion Guide is complete!

on preventive therapy. Current preventive therapies are not 100% effective and

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Not Diagnosed With HAE?

If you have not been diagnosed with HAE, complete the following questions.

Background

10. Have you been tested for HAE?
Yes No
11. Does HAE run in your family?
Yes
No
I don't know
Symptoms
12. Have you exhibited any of the following symptoms?
Swelling in the face
Swelling in the peripheral extremities (hands, feet, legs)
Swelling in abdomen/stomach
Swelling in abdomen/stomach Swelling in throat/larynx Swelling in chest/airways
Swelling in chest/airways
Swelling in genitals
I have not experienced these symptoms If you select this answer, skip questions 13 and 14.
13. How frequently do you experience these symptoms?
o per week
times per month
per year
14. How are you managing these symptoms?
Steroids
Antihistamines
I'm not on any treatment
Other
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If you answered "No" to question 1, your Doctor Discussion Guide is complete!

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