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| --- |
| Residual hypothyroid symptoms despite adequate LT4 or LT4/LT3 combination therapy: |
| Symptom |

|  |
| --- |
| Start date (month - year) |
| M | M | - | Y | Y | Y | Y |

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|  |  |
| Cold-intolerance | **[ ]** Yes [ ] No |

|  |  |  |  |  |  |  |
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|  |  | - |  |  |  |  |

 |
| Fatigue  | **[ ]** Yes [ ] No |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | - |  |  |  |  |

 |
| Cognitive disturbances | **[ ]** Yes [ ] No |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | - |  |  |  |  |

 |
| Emotional disturbances | **[ ]** Yes [ ] No |

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| --- | --- | --- | --- | --- | --- | --- |
|  |  | - |  |  |  |  |

 |
| Edemas | **[ ]** Yes [ ] No |

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|  |  | - |  |  |  |  |

 |
| Dry skin | **[ ]** Yes [ ] No |

|  |  |  |  |  |  |  |
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|  |  | - |  |  |  |  |

 |
| Menstrual disorders | **[ ]** Yes [ ] No |

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| Weight gain | **[ ]** Yes [ ] No |

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| --- | --- | --- | --- | --- | --- | --- |
|  |  | - |  |  |  |  |

 |
| Hair loss  | **[ ]** Yes [ ] No |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | - |  |  |  |  |

 |
| Obstipation | **[ ]** Yes [ ] No |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | - |  |  |  |  |

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