

Appendix
The Multinational Association of Supportive Care in Cancer (MASCC)
Antiemesis Tool (MAT) (excluding instructions and scoring sheet)

Please fill this out the day after chemotherapy on:

	□	□	
	Day	Month	Day of the Week

Nausea and Vomiting
during the first 24 hours after chemotherapy:
 (This page refers to the first 24 hours following chemotherapy):

1) In the 24 hours since chemotherapy, did you have any vomiting? Yes No
(Select one)

2) If you vomited in the 24 hours since chemotherapy, how many **times** did it happen?
 (Write the number of times in this box)

3) In the 24 hours since chemotherapy, did you have any **nausea**? Yes No
(Select one)

4) If you had nausea, please circle or enter the number that most closely resembles your experience.
 How much nausea did you have in the last 24 hours?

0 1 2 3 4 5 6 7 8 9 10
 None As much as possible

(Write the number in this box)

This page asks about the period from the day after to 4 days after chemotherapy.
 So it asks about the time after the first 24 hours.

	□	□	
	Day	Month	Day of the Week

Delayed Nausea and Vomiting

5) Did you vomit 24 hours or more after chemotherapy? Yes No
(Select one)

6) If you vomited during this period, on how many **days** did it happen?
 (Write the number of times in this box)

7) Did you have any **nausea** 24 hours or more after chemotherapy? Yes No
(Select one)

8) If you had nausea, please circle or enter the number that most closely resembles your experience.
 How much nausea did you have over this time period?

0 1 2 3 4 5 6 7 8 9 10
 None As much as possible

(Write the number in this box)

The questionnaire is derived from "Validation and psychometric assessment of a short clinical scale to measure chemotherapy-induced nausea and vomiting: the MASCC antiemesis tool"