

Daily Pain Diary

Use this diary to record when you have pain, what type of pain it is and how you dealt with it. Tracking this information will help your doctor better understand your pain. Bring this diary to your next appointment.

Pain Scale

0	1	2	3	4	5	6	7	8	9	10
No Pain	Mild Pain			Moderate Pain			Severe Pain	Worst Pain Imaginable		

Sunday	Date:			
Time	Pain Scale Rating	Type of Pain	What did you do for relief?	How long did the pain last?

Monday	Date:			
Time	Pain Scale Rating	Type of Pain	What did you do for relief?	How long did the pain last?

Tuesday	Date:			
Time	Pain Scale Rating	Type of Pain	What did you do for relief?	How long did the pain last?

Wednesday	Date:			
Time	Pain Scale Rating	Type of Pain	What did you do for relief?	How long did the pain last?

Thursday	Date:			
Time	Pain Scale Rating	Type of Pain	What did you do for relief?	How long did the pain last?

Friday	Date:			
Time	Pain Scale Rating	Type of Pain	What did you do for relief?	How long did the pain last?

Saturday	Date:			
Time	Pain Scale Rating	Type of Pain	What did you do for relief?	How long did the pain last?