Pain and activity diary

A week of pain ratings and activities, to show what makes it better or worse.

Name _____ Date _____

Rate pain from 0 (none) to 10 (worst). Keep notes brief. One week is usually enough to see a pattern. Tracking for much longer can keep attention on the pain.

Day	Pain: am, pm, evening	What I did	Sleep last night (0 to 10)	Mood and stress	What helped
Mon					
Tue					
Wed					
Thu					
Fri					
Sat					
Sun					

What seems to turn my pain up?

What seems to turn it down?

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