

Pain diary

Keep this diary accurately each day, for at least 7 days.

Date and time when you experience pain	Location and duration of your pain	Rate the intensity of your pain on a scale from 0 to 10 (10 means 'worst you can imagine').	Rate how much your pain interferes with your daily life on a scale from 0 to 10 (10 means 'extreme interference').	What made your pain worse? (what were you doing when you had your pain).	What helped you get through the day? (medication and other strategies such as pacing, meditation, or exercise).	Notes Record other relevant information, such as: • Side effects of medications • Nature of pain, e.g., dull, sharp, burning or electric • How does the pain affect your daily life, including your mood, sleep, work or social life.