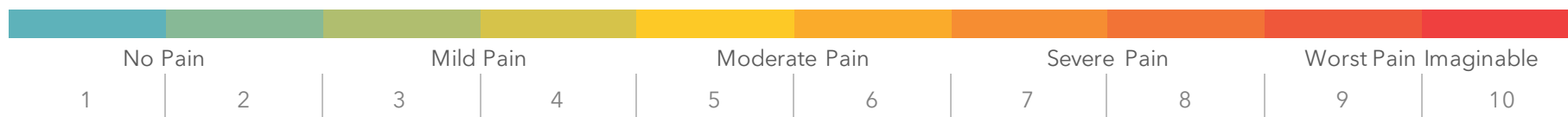


# Pain log

Use this scale to rate the severity of your pain.



|       | Time            | Scale | Type of Pain | Activities causing pain | Symptom | Medicine or supplements |
|-------|-----------------|-------|--------------|-------------------------|---------|-------------------------|
| Day 1 | Start:<br>Stop: |       |              |                         |         |                         |
| Day 2 |                 |       |              |                         |         |                         |
| Day 3 |                 |       |              |                         |         |                         |
| Day 4 |                 |       |              |                         |         |                         |
| Day 5 |                 |       |              |                         |         |                         |
| Day 6 |                 |       |              |                         |         |                         |
| Day 7 |                 |       |              |                         |         |                         |