

PAIN INTENSITY MONITOR

Monthly Log

Name: _____

Month/Year: _____

DATE	INTENSITY (1-10)	TRIGGERS	RELIEF METHODS & NOTES
------	------------------	----------	------------------------

0: No Pain 1-3: Mild (Annoying) 4-6: Moderate (Interferes with tasks) 7-9: Severe (Disabling)
10: Emergency