

Pain Level Chart

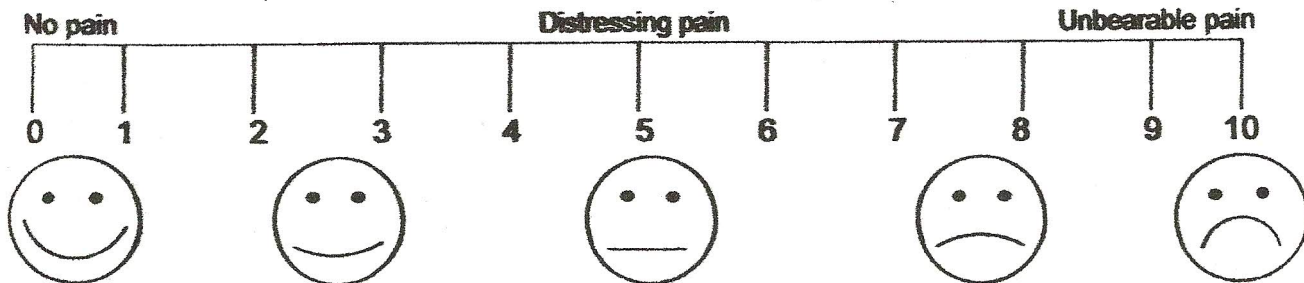
You can describe your pain to the healthcare provider using any of the choices given below:

Type of pain (Tick as applicable)

- Throbbing
- Stabbing
- Dull
- Aching
- Pinching
- Steady
- Localized
- Pervasive
- Chronic (persistent)
- Acute (in the moment)

Other comments / Notes: _____

Use the chart below to estimate your pain level.



Other comments / Notes:

(Include details on time when you felt the pain as well as activities that triggered the pain.)

Name: _____

Date: _____