

Body Pain Chart

Patient's name:

Date:

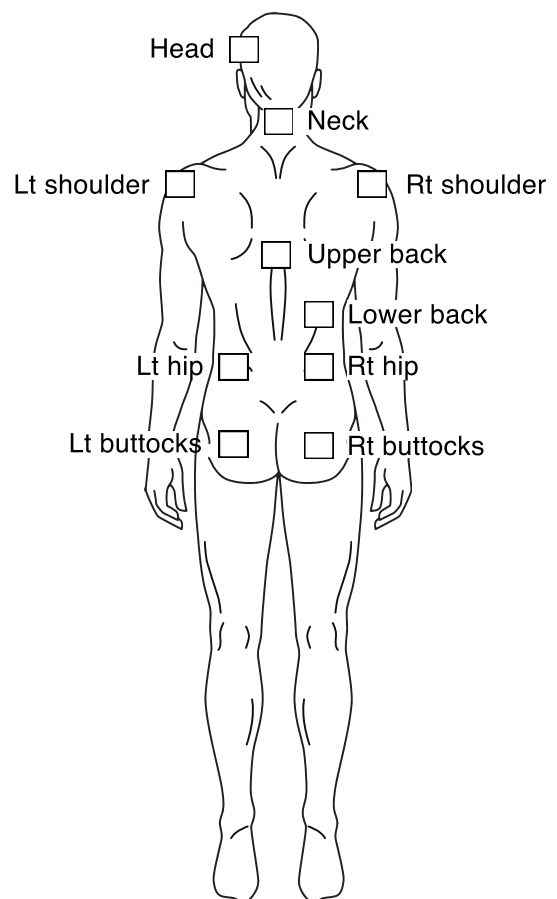
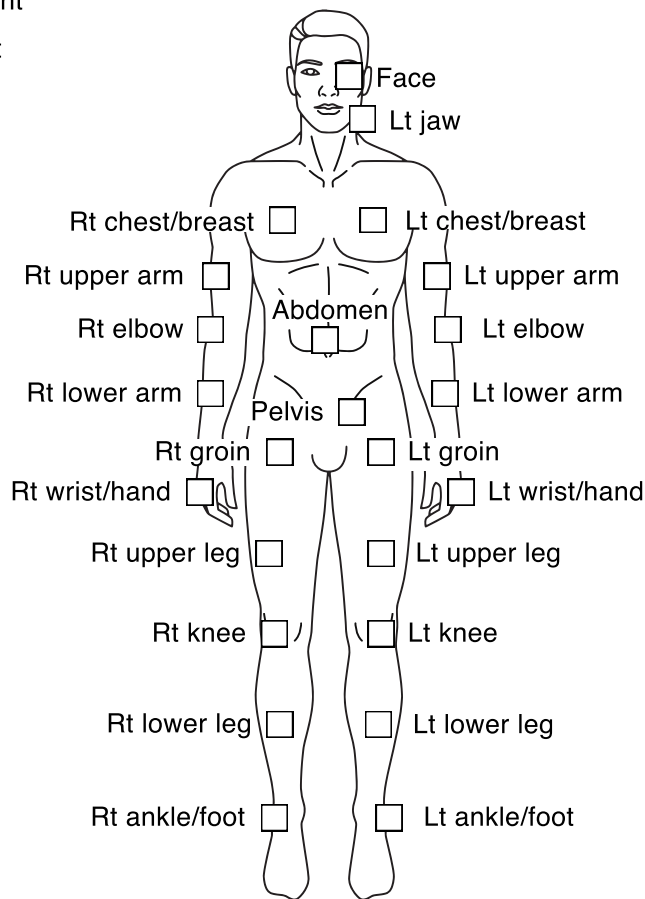
Date of pain onset:

Frequency and duration of pain:

Instruction: Mark areas of pain on the chart, simply place a checkmark in each location where there's discomfort. You can also write them down below.

Rt = Right

Lt = Left



Pain locations:

Pain descriptions: Ache Stabbing Burning Throbbing Numbness Other: Pins and needles**Pain intensity:** 0: No pain 1-3: Mild 4-6: Moderate 7-9: Severe 10: Worst possible pain**Other symptoms (if any):****Notes:**