

# PQRST Pain Assessment

Patient name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Date of assessment: \_\_\_\_\_

PQRST pain assessment	Response
<b>P - Provocation</b> What triggers the pain or makes it better?	
<b>Q - Quality</b> What does the pain feel like (e.g. sharp, dull, throbbing)?	
<b>R - Region</b> Where is the pain located? Does it spread?	
<b>S - Severity</b> How intense is the pain, typically rated on a scale of 1-10?	
<b>T - Timing</b> When does the pain occur, and how long does it last?	
<b>Additional notes</b>	

## Reference:

Linares, M. (2024, July 26). *How to perform PQRST pain assessments*. SimpleNursing. <https://simplenursing.com/pqrst-pain/>