

WORKSHEET 10 PAIN LOG

Keeping a record of your child’s pain on a daily or weekly basis can help members of the healthcare team understand the nature and extent of the pain and how to manage it. You can use this pain log to help track his or her pain. When filling in the “Descriptions of Pain” field, consider the following questions:

- Where is the pain? (For example, is it in one location or many?)
- How does the pain feel? (For example, is it sharp, dull, burning or throbbing?)
- When does the pain happen? (For example, does the pain occur when standing or moving?)
- What activities does it prevent? (For example, does the pain make it hard to shower or dress?)

DATE	TIME	DESCRIPTIONS OF PAIN	PAIN LEVEL <i>Scale of 0-10 with zero being no pain and ten being the worst pain imaginable</i>
Example: 3/1	6:00 am to 7:00 am	Sharp, shooting pains in lower back and legs that woke me from sleep	9
Example: 3/2	2:00 pm	Constant gnawing pain in lower back while sitting. Felt better once I was able to lie down.	7