

Monthly Pain Diary

Providing Social Security with a daily diary is an excellent way to prepare for your hearing.

Date	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	

Did you experience pain today?

Yes																															
No																															

Intensity of Pain: Mild-able to function; Moderate-unable to function/bed rest not needed; Severe-bed rest required

Mild																														
Moderate																														
Severe																														

Where was the pain located?

Neck																														
Shoulder(s)																														
Hands/Arms																														
Back																														
Hips																														
Legs/Feet																														
Other																														

Precipitating Factors:

Sitting																														
Standing																														
Walking																														
Activity in General																														

Alleviating Factors:

Rest																														
Position Change																														
Sleep																														
Other																														

Medications taken for treatment of the Pain

Name: _____
 Month/Year: _____