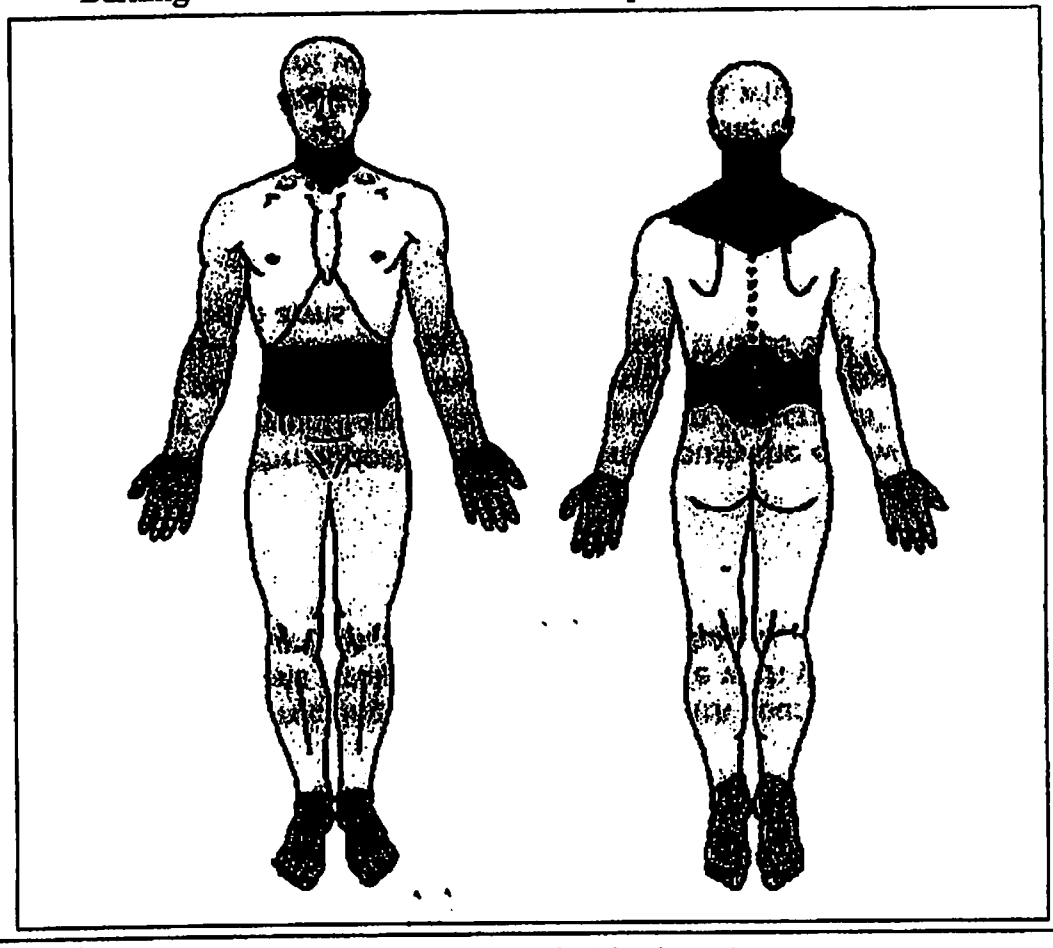
PAIN DIAGRAM AND RATING

Please use the diagram below to indicate the symptoms you have experienced over the past 24 hours. Be VERY precise when drawing the location of your pain. Use the key to indicate the type of symptoms

Key:

Pins and Needles	= 000000	Stabbing	= //////////
Burning	= xxxxxx	Deep Ache	= zzzzzz



Please rate your *current* level of pain on the following scale (check one)

0 1 2 3 4 5 6 7 8 9 10

(no pain) (worst imaginable pain)

Please rate your *worst* level of pain in the last 24 hours on the following scale (check one)

0 1 2 3 4 5 6 7 8 9 10

(no pain) (worst imaginable pain)

Please rate your *best* level of pain in the last 24 hours on the following scale (check one)

0 1 2 3 4 5 6 7 8 9 10

(no pain) (worst imaginable pain)