One-week pain diary

One short entry each day can help you describe patterns. This is a personal record, not a diagnostic test.

Week starting: _____ Name (optional): _____

Do not delay urgent medical care to finish this sheet. Record medicines as actually taken, including timing, on this sheet or an attached list. Do not change doses for the diary.

Day / date Time	Location Sensation	Activity / function Sleep impact	What tried / medicines Response afterward	New or changed symptoms
Day 1				
Day 2				
Day 3				
Day 4				
Day 5				
Day 6				
Day 7				

Optional: add a pain score if useful. Your ability to sleep, walk, work, or do a valued activity matters too. Use another sheet if you need more space; detailed tracking is optional.

Bring these points to your appointment

When it started / overall trend: _____

Biggest effect on daily life: _____

What helped or made it worse: _____

My main question: _____

Keep this record privately. Share it with your healthcare professional if you choose.

Guide and text version: bestpainrelievers.net/blog/how-to-describe-pain-to-a-doctor