Pain Management Associates
G. David Bojrab, M.D.

Pain Diary

Patient Name_____ Date of Procedure_____

Procedure_____ Usual Pain Level_____

DIRECTIONS: **Rate your pain 0 - 10 every hour for the next 6 hours.** Rate ONLY your usual pain, not the procedure (needle stick) pain or muscle pain. Ex: If the pain from the procedure/ needle stick is a 4, but your usual pain is gone, circle 0 on the form.

To best determine if the numbing medicine is working, do not go home and rest after the procedure but instead do the normal activities that usually irritate your pain. Just be careful not to over-do it.

Please keep in mind that this is a 4 – 6 hour test to help us determine if this is where your pain is coming from, and that the numbing medicine will wear off after about 4 - 6 hours and your normal pain will return. You may also experience some procedural pain in addition to your usual pain for the next few days.

	No Pain										Worst Pain
Initial	0	1	2	3	4	5	6	7	8	9	10
Hour 1	0	1	2	3	4	5	6	7	8	9	10
Hour 2	0	1	2	3	4	5	6	7	8	9	10
Hour 3	0	1	2	3	4	5	6	7	8	9	10
Hour 4	0	1	2	3	4	5	6	7	8	9	10
Hour 5	0	1	2	3	4	5	6	7	8	9	10
Hour 6	0	1	2	3	4	5	6	7	8	9	10

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*****BRING COMPLETED FORM TO YOUR NEXT OFFICE VISIT******