

Pain Diary - Injection

We need to know whether you have benefited from the injection you have just had. One of the ways to note the progress is to score the pain on a scale of "0" to "10".

Please note "0" = 'NO PAIN' or  and '10' = 'MOST SEVERE PAIN' 

We would like you to do this for the next 6 weeks. Once every week on Monday evening is adequate. To find out how you were before the injection we also ask you to give a value for your pain on the Monday before the injection.

Example / Sample of pain diary.

	Date	Low back	Left Leg	Right Leg
The Monday before the injection	05/01/2015	7	8	3
Six Mondays following the injection	16/02/2015	2	3	2

Please indicate a value of your pain in each area for the following 6 weeks

	Date	Low back	Left Leg	Right Leg
The Monday before the injection				
The evening of day that you had the injection				
The Monday following the injection				
Two Mondays following the injection				
Three Mondays following the injection				
Four Mondays following the injection				
Five Mondays following the injection				
Six Mondays following the injection				

If you have any queries at any stage please do not hesitate to discuss them with the staff looking after you.

Please bring this along for your next appointment.

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