

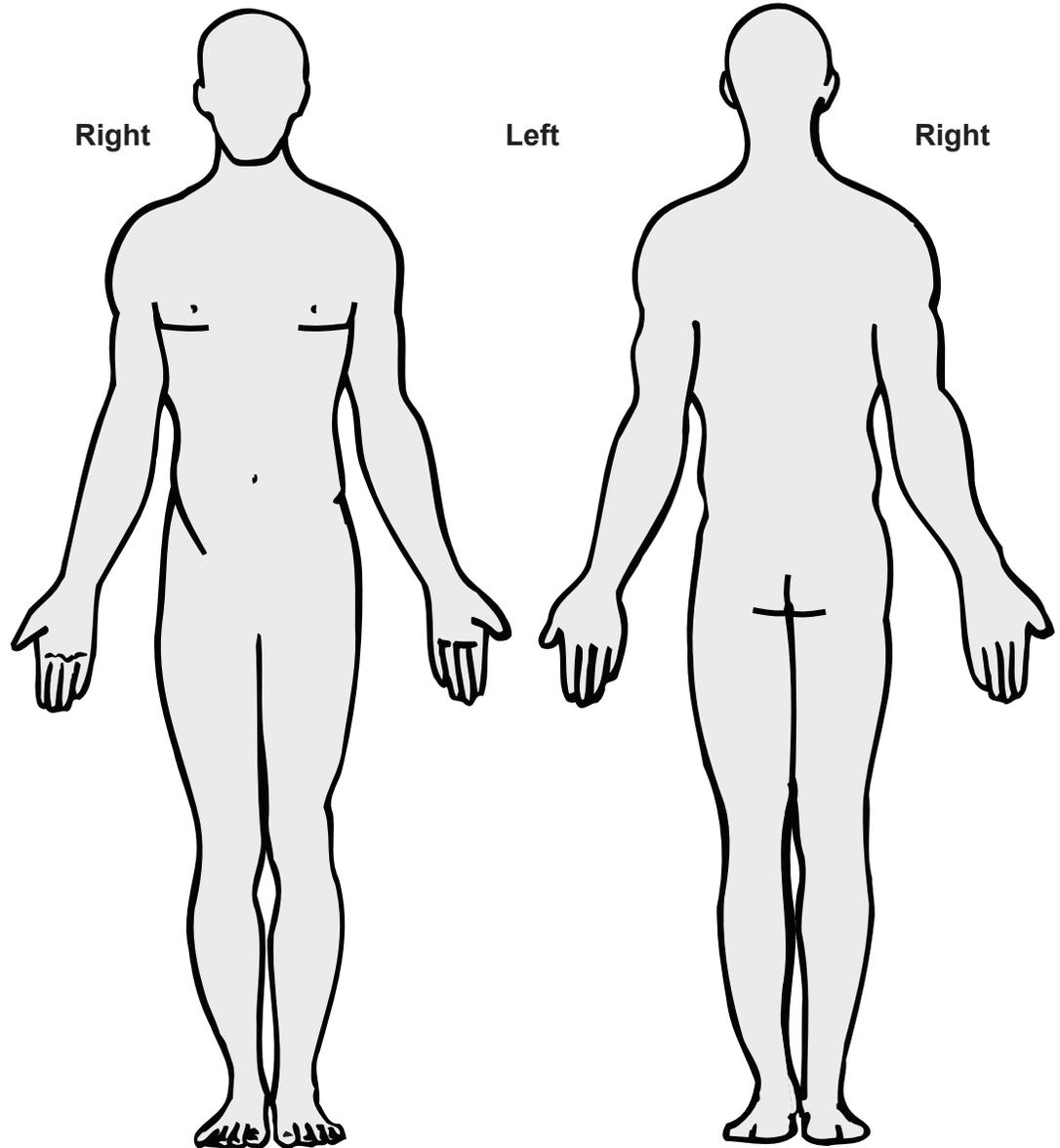


## PAIN DESCRIPTION

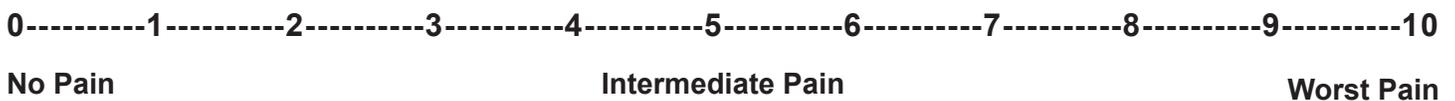
Where is your pain right now?

**INSTRUCTIONS:** Mark the areas on the body below where to where you hurt. (If the right side of your neck hurts, mark the drawing on the right side of the neck, etc.) Please indicate which sensations you feel by referring to the key below.

KEY	
^^^	Ache
000	Numbness
■■■	Pins & Needles
XXX	Burning
////	Radiating Pain
<p>I can tolerate my pain at a pain score of:</p> <div style="border: 1px solid black; width: 100px; height: 30px; margin: 5px 0;"></div>	
<p>Please check the box the best indicates the duration of your pain:</p> <p><input type="checkbox"/> Continuous</p> <p><input type="checkbox"/> Positional</p> <p><input type="checkbox"/> Intermittent (on/off)</p> <p><input type="checkbox"/> Unable to Rate</p>	



How bad is your pain right now? (indicate on the line)



PATIENT'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_