

# PAIN CHART

Name \_\_\_\_\_ DOB \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Please mark on the body diagrams all areas of pain, discomfort, or altered sensation, and use the key below to identify quality of each.

A = ache

B = burning

E = electrical

S = stabbing

P = pins & needles

N = numb

O = other

Th = throbbing

