

Pain Intake

Main complaint:

Location:

Is it tender to touch?

Onset: When did it start?

Is the pain constant or come and go?

History: Is the pain caused by a trauma or just slowly start up one day?

Describe the pain. Common words to describe pain include: aching, burning, sore, pounding, crampy, tight, electric, sharp, crushing, stabbing, throbbing, knot-like, pressing, pinching, pulsing, dull, pins and needles, prickling, shooting, deep, stretching, tender or gnawing.

Rate the severity of the pain on a scale of 1-10

Does it radiate? Where does it radiate?

Is it worse in the morning or evening?

Does cold or warmth alleviate the pain?

Do you have triggers for your pain? (like rain or pressure changes)

Is it better if you sit or if you are walking around?

Function:

Does the pain impact your sleep? If so, how?

Does the pain keep you from doing anything that you want to do?

What have you done to treat the pain? Physical therapy, surgery, medication?

What are your goals for treatment?
