

## Carlisle Pediatric Associates

### Recurrent Pain Diary

To help in diagnosing recurrent stomach or head pain, it is **VERY** useful to have a diary of symptoms. It will guide us in determining which, if any, tests should be done and which treatments are most likely to be helpful. This diary doesn't have to be fancy...a notepad or large sheet of notebook paper will do. A copy of a calendar page is particularly nice, since you won't have to write down the date. Keep in mind that the suggestions below may apply to only head pain, or only stomach pain...you don't have to record those things that are obviously relevant.

#### **Include the following information:**

- 1) **Time of Day:** Does the pain happen mainly mornings, evenings, or wake you at night? Is there no time of day pattern?
- 2) **Where:** Does the pain occur in your body? Forehead, sides of the head, back of the head. Point to the spot on stomach that hurts most. Be as specific as possible.
- 3) **Quality of Pain:** Sharp and stabbing, dull ache, constant or throbbing.
- 4) **Triggers:** What makes the pain worse? Does moving hurt more, or does it not matter? Does eating help or hurt? Are there diet triggers? (Caffeine, chocolate, milk, artificial sweeteners, fatty foods, hot dogs/cold cuts, Chinese foods). Does lack of sleep or over activity seem to cause the pain? Does stress or worrying bring it on? Does laying flat help or hurt?
- 5) **Relief:** What makes it better? Does sleeping help? Eating? Tylenol or Advil? Having a bowel movement?
- 6) Is the pain associated with **nausea and/or vomiting**?
- 7) For older females, is there any relation to your **menstrual cycle**?
- 8) If **abdominal pain**, is there any change in firmness of your bowel movement (looser or harder than normal)? Any urinary symptoms (burning when urinating, going more often than usual?) Any feelings of chest pain or tightness, or acid taste in mouth? Any loss of weight? Any blood in your bowel movements? Gas or burping a lot?
- 9) For **headaches**, does light and/or noise make the pain worse? Do you see flashes of light or have other odd sensations before or during the pain?
- 10) **How Bad?** It is also helpful to assign your pain a number, with 1 being barely noticeable pain and 10 being the worst pain you can imagine. Note if you are missing school or other activities because of the pain.