



PAIN SCALE



DoctorsforPain.com

Patient: _____

Date: _____

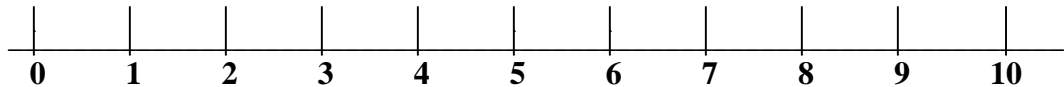
Rate your pain by selecting the term which best describes the type of pain you have on a scale of one to ten. Write that term beside the appropriate number to indicate the type of pain you are having and at what level on the scale of 0 - 10.

- Aching
- Annoying
- Agonizing
- Cramping
- Distressing
- Gnawing
- Dreadful
- Excruciating
- Horrible
- Hot-burning
- Stabbing
- Sharp
- Shooting
- Splitting
- Throbbing
- Unbearable
- Uncomfortable

0	_____
1	_____
2	_____
3	_____
4	_____
5	_____
6	_____
7	_____
8	_____
9	_____
10	_____

Numeric Pain Distress Scale

- (1) Present Pain
- (2) Worst Pain Gets
- (3) Best Pain Gets



No Pain

Distressing Pain

Unbearable Pain

Using the 1-10 scale, place (1) to indicate present pain, (2) worst pain, (3) best pain
Example: Present pain is about a 3 on scale - write (1) above the 3, Worst Pain

Is 9 - write (2) above the 9 and Best Pain Gets is 1 - write (3) above the 1