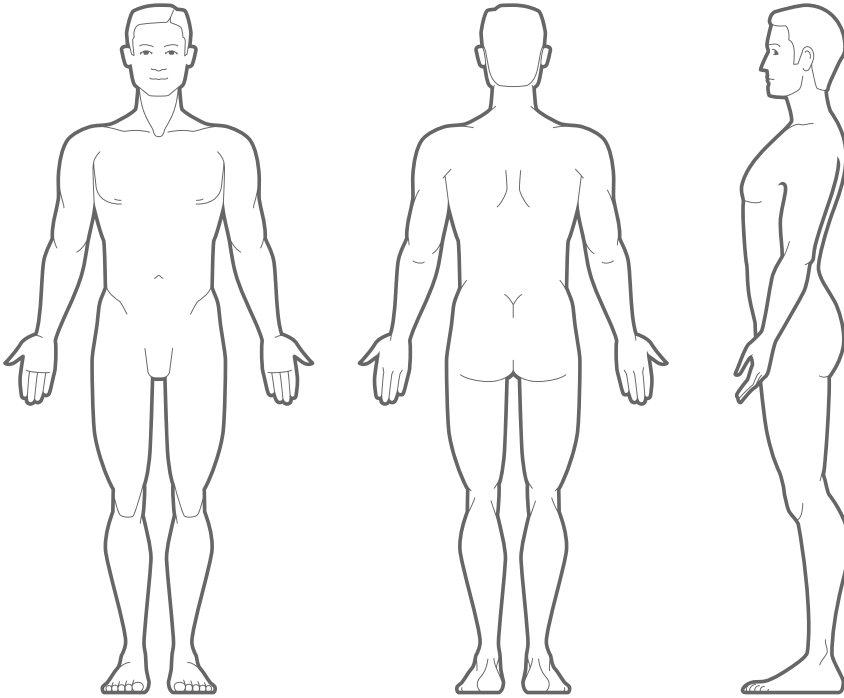


# PAIN MAP

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

TODAY'S DATE: \_\_\_\_\_ FOR: \_\_\_\_\_



**Circle your pain points  
on the diagrams and  
give each a number.**

**MY GOALS FOR TODAY:**

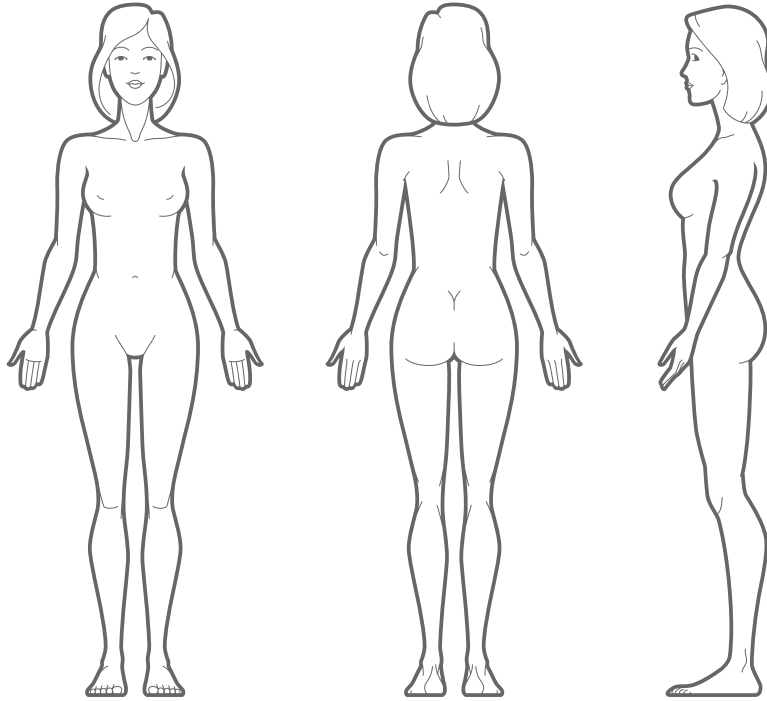
**MY LONG-TERM GOALS:**

PAIN POINT #	SEVERITY 1-10 (low to high)	FREQUENCY (how often)	TRIGGERED BY (cause)	FEELS LIKE (describe the pain)	STARTED (date)	RELIEF FROM (what helps)

# PAIN MAP

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

TODAY'S DATE: \_\_\_\_\_ FOR: \_\_\_\_\_



**Circle your pain points  
on the diagrams and  
give each a number.**

**MY GOALS FOR TODAY:**

**MY LONG-TERM GOALS:**

PAIN POINT #	SEVERITY 1-10 (low to high)	FREQUENCY (how often)	TRIGGERED BY (cause)	FEELS LIKE (describe the pain)	STARTED (date)	RELIEF FROM (what helps)