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PATIENT PAIN DRAWING

NAME _____ DATE _____

Using the symbols given below, mark the areas on your body where you feel the described sensations. Include all affected areas. Just to complete the picture please draw in your face.

Aching
 ▲▲▲

Numbness
 ===

Pins and Needles
 ○○○

Burning
 XXX

Stabbing
 ///

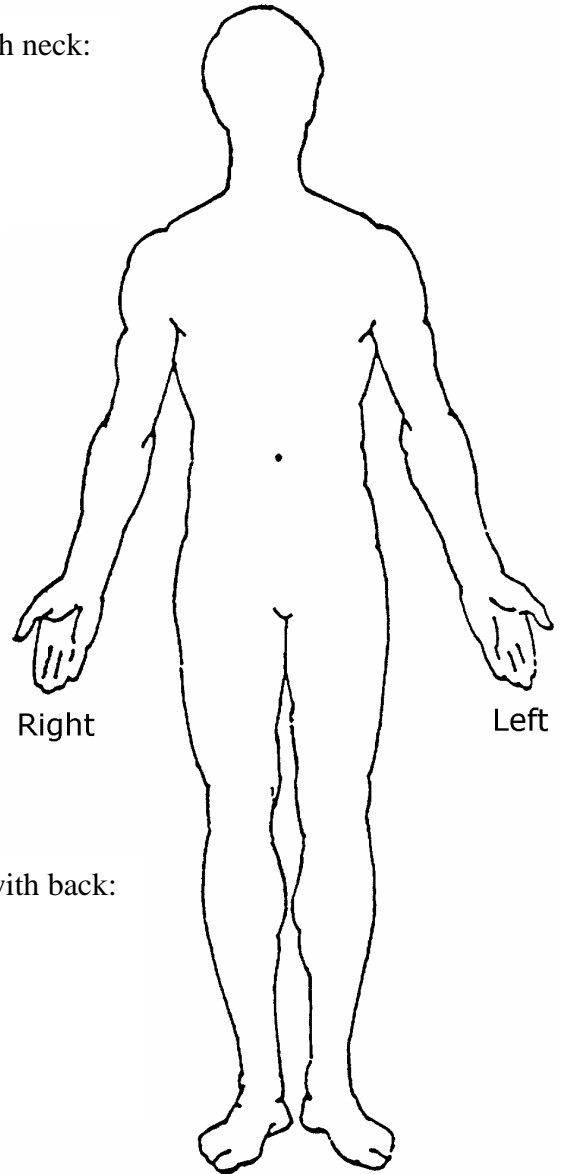
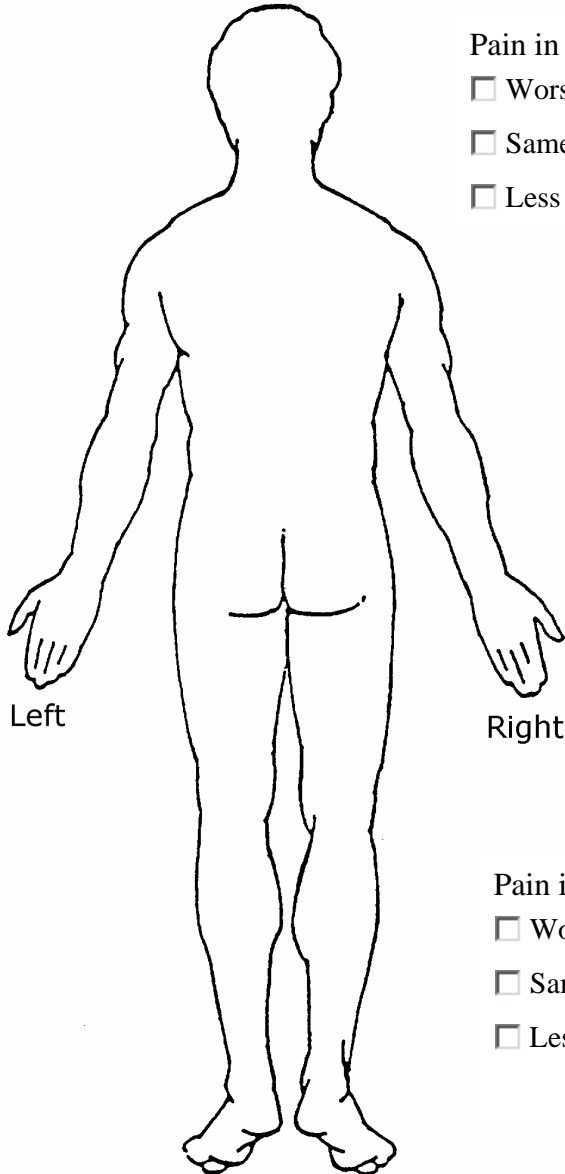
Other
 ●●●

Back

Front

Pain in arm(s) compared with neck:

- Worse than
- Same as
- Less than



Pain in legs(s) compared with back:

- Worse than
- Same as
- Less than