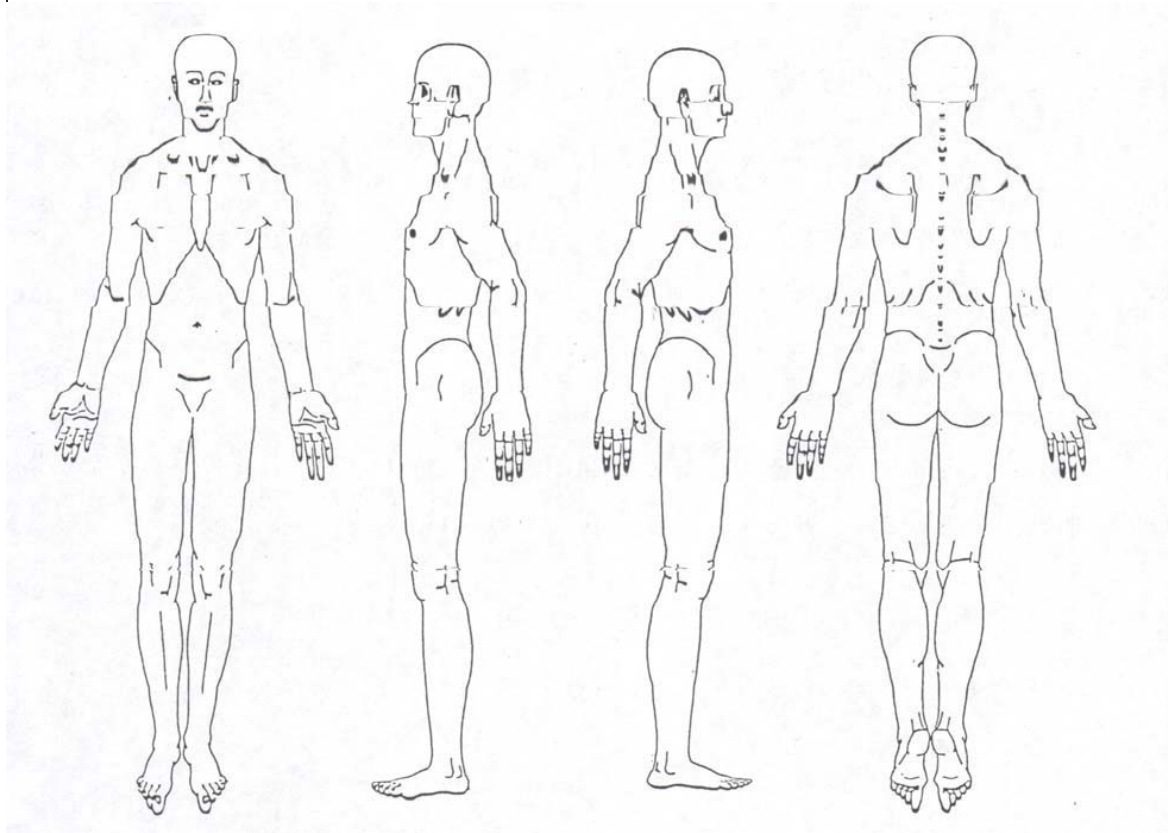


Extremity Pain Drawing

Patient Name _____ Date _____

Using the following descriptive symbols, draw the location of your pain on the body outlines below. In addition, mark the level of your pain on the pain scale at the bottom of the page.

Ache <<<	Burning ΔΔΔΔ	Numbness =====	Pins % Needles : : : : : : : : : : :	Stabbing /////	Other ooo
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Pain Severity Scale:

Rate the severity of your pain by circling one number on the following scale.

No Pain 0 1 2 3 4 5 6 7 8 9 10 Excruciating Pain