## **0-10 SCALE OF PAIN SEVERITY**

## Severity

## **Description of Experience**

10	Unable to Move	I am in bed and can't move due to my pain. I need someone to take me to the emergency room to get help for my pain.			
9	Pain should be at 3 or less 24/7 so you can exercise, sleep, and enjoy life. If you are constantly aware of your pain ("4" or greater), the immune system begins to be suppressed.				
7	Unmanageable	I am in pain all the time. It keeps me from doing most activities.			
6	Distressing	I think about my pain all of the time. I give up many activities because of my pain.			
5	Distracting	I think about my pain most of the time. I cannot do some of the activities I need to do each day because of the pain.			
4	Moderate	I am constantly aware of my pain but I can continue most activities.			
3	Uncomfortable	My pain bothers me but I can ignore it most of the time.			
2	Mild	I have a low level of pain. I am aware of my pain only when I pay attention to it.			
1	Minimal	My pain is hardly noticeable.			
0	No Pain	l have no pain.			

Date/ Time	Activity	Pain scale before activity	What total amount of what Medication was used and at what time?	Pain scale after activity. Other therapies, modalities or tools were used? What helped with pain management? What made it worse? How long did pain last for?