



American Chronic Pain Association

FIBRO LOG

Many things can affect your pain. These may include stress¹, daily activities², sleep³, and even weather.⁴ This log can help you track the everyday things that have an impact on your pain. When you understand what makes your pain worse, you can begin to work on ways to reduce or deal with your pain “triggers.”

The more you know about how your body reacts, the more you can be in control. And being in better control can help you be less afraid and better able to manage your pain.

We encourage you to fill out a chart at the end of each day or several times a week. You can then take this log to your health care provider visits. It can help you talk more openly with your health care provider so that together you can find ways to improve your quality of life and get back to doing the things that matter to you most.

Over a period of time, you might be able to see certain patterns that will provide clues on daily activities or situations that you can change to help you better manage or reduce your pain.

To use the log, simply circle the number on the line that best indicates your status.

Please use the Fibro Log as a tool for discussion with your health care providers. This is not intended to be a diagnostic tool.

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1. Gupta A, Silman AJ. Psychological stress and fibromyalgia: a review of the evidence suggesting a neuroendocrine link. *Arthritis Res Ther.* 2004;6(3):98-106.
 2. Henriksson KG. Fibromyalgia—from syndrome to disease. Overview of pathogenetic mechanisms. *J Rehabil Med.* 2003 May;(41 Suppl):89-94.
 3. Moldofsky H. Management of sleep disorders in fibromyalgia. *Rheum Dis Clin North Am.* 2002;28(2):353-365.
 4. Jamison RN, Anderson KO, Slater MA. Weather changes and pain: perceived influence of local climate on pain complaint in chronic pain patients. *Pain.* 1995 May;61(2):309-15.

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Overall Level of Pain

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

Location(s) and Intensity of Pain

Head	Back	Neck	Shoulder	Elbow	Buttock	Hip	Knee	Other
<input type="checkbox"/> Severe	<input type="checkbox"/> Severe	<input type="checkbox"/> Severe	<input type="checkbox"/> Severe	<input type="checkbox"/> Severe	<input type="checkbox"/> Severe	<input type="checkbox"/> Severe	<input type="checkbox"/> Severe	<input type="checkbox"/> Severe
<input type="checkbox"/> Moderate	<input type="checkbox"/> Moderate	<input type="checkbox"/> Moderate	<input type="checkbox"/> Moderate	<input type="checkbox"/> Moderate	<input type="checkbox"/> Moderate	<input type="checkbox"/> Moderate	<input type="checkbox"/> Moderate	<input type="checkbox"/> Moderate
<input type="checkbox"/> Mild	<input type="checkbox"/> Mild	<input type="checkbox"/> Mild	<input type="checkbox"/> Mild	<input type="checkbox"/> Mild	<input type="checkbox"/> Mild	<input type="checkbox"/> Mild	<input type="checkbox"/> Mild	<input type="checkbox"/> Mild
<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> None

Quality of Life

0 1 2 3 4 5 6 7 8 9 10
Excellent None

Level of Everyday Activities

0 1 2 3 4 5 6 7 8 9 10
Normal Function Can't Function

Interference of Pain on Sleep

0 1 2 3 4 5 6 7 8 9 10
No Interference Significant Interference

Morning Stiffness

0 1 2 3 4 5 6 7 8 9 10
None Very Stiff

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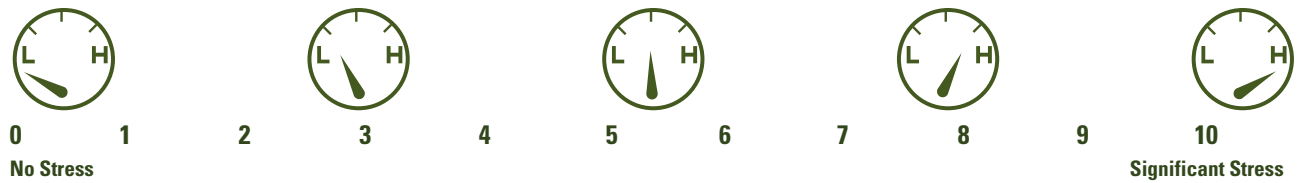
Fatigue During the Day



Changes in Weather



Stress



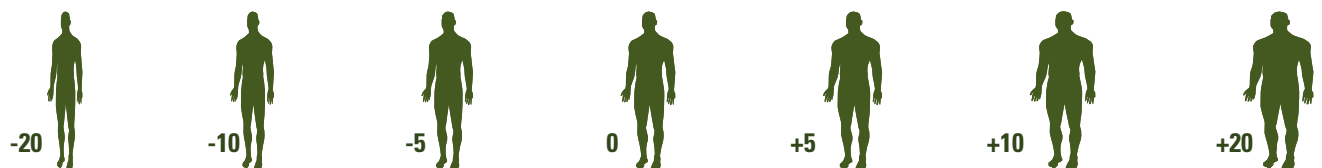
Mood



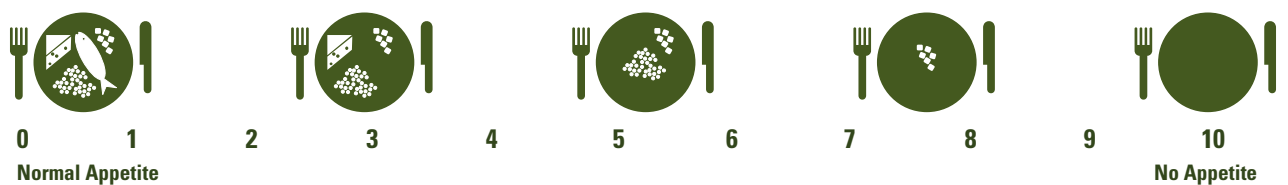
Social Interaction



Weight Loss or Gain



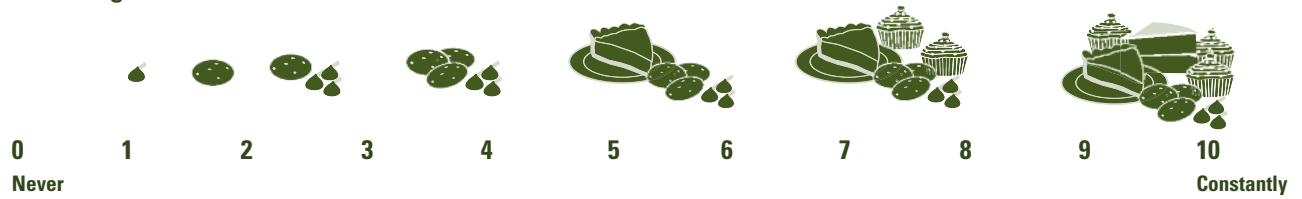
Appetite



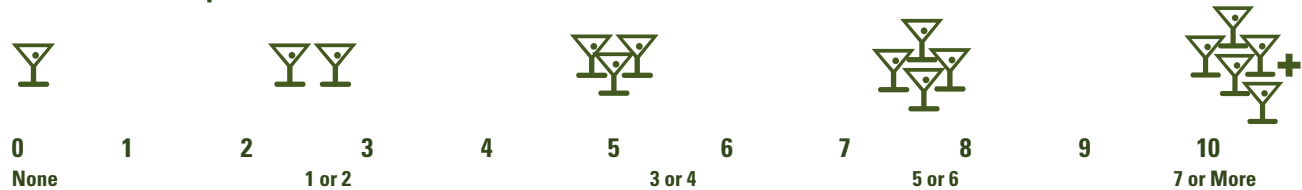
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Snacking



Alcohol Consumption



Concentration Ability



Fear of Pain



Exercise

