Assessing Your Pain

Please answer the following questions about how pain is affecting your life. This screening tool will help us track your pain symptoms over time and see if you have improvement once you’ve started treatment.

Circle the number that best describes how you’ve felt during the past week:

1. **What number best describes your pain on average?**
   - 0: No pain
   - 10: Pain as bad as you can imagine

2. **What number best describes how pain has interfered with your enjoyment of life?**
   - 0: Does not interfere
   - 10: Completely interferes

3. **What number best describes how pain has interfered with your general activity?**
   - 0: Does not interfere
   - 10: Completely interferes