Lesson 2

My Current Activity Baseline

Instructions:

Record how you spend your time and what activities you are doing at different times. Place a mark in each row indicating your current activities throughout the day and rate the level of pain your currently experience doing those activities (0 = *no pain* to 10 = *most severe pain*).

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Scale 0–10: 0 = *no pain*, 10 = *most severe pain*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Time | Lie | Sit | Stand | Walk | Activity | Pain  0–10 |
| 6:30–7:00am |  |  |  |  |  |  |
| 7:00–7:30 |  |  |  |  |  |  |
| 7:30–8:00 |  |  |  |  |  |  |
| 8:00–8:30 |  |  |  |  |  |  |
| 8:30–9:00 |  |  |  |  |  |  |
| 9:00–9:30 |  |  |  |  |  |  |
| 9:30–10:00 |  |  |  |  |  |  |
| 10:00–10:30 |  |  |  |  |  |  |
| 10:30–11:00 |  |  |  |  |  |  |
| 11:00–11:30 |  |  |  |  |  |  |
| 11:30–12:00 |  |  |  |  |  |  |
| 12:00–12:30pm |  |  |  |  |  |  |
| 12:30–1:00 |  |  |  |  |  |  |
| 1:00–1:30 |  |  |  |  |  |  |
| 1:30–2:00 |  |  |  |  |  |  |
| 2:00–2:30 |  |  |  |  |  |  |
| 2:30–3:00 |  |  |  |  |  |  |
| 3:00–3:30 |  |  |  |  |  |  |
| 3:30–4:00 |  |  |  |  |  |  |
| 4:00–4:30 |  |  |  |  |  |  |
| 4:30–5:00 |  |  |  |  |  |  |
| 5:00–5:30 |  |  |  |  |  |  |
| 5:30–6:00 |  |  |  |  |  |  |
| 6:00–6:30 |  |  |  |  |  |  |
| 8:30–7:00 |  |  |  |  |  |  |
| 7:00–7:30 |  |  |  |  |  |  |
| 7:30–8:00 |  |  |  |  |  |  |
| 8:00–8:30 |  |  |  |  |  |  |
| 8:30–9:00 |  |  |  |  |  |  |
| 9:00–9:30 |  |  |  |  |  |  |
| 9:30–10:00 |  |  |  |  |  |  |
| 10:00–10:30 |  |  |  |  |  |  |
| 10:30–11:00 |  |  |  |  |  |  |