

Chronic Back Pain Diary

Comprehensive 6-page back pain tracking template with spine region mapping, posture/activity impact, red flag monitoring, treatment response, and spine-specialist-ready summaries.

Name: _____

Date Range: _____

Pain Scale Reference (0–10 NRS)



Daily Back Pain Log

Location: C=Cervical (neck), T=Thoracic (mid), L=Lumbar (low), S=Sacral. Radiation: note if pain travels to arm/leg.

Date	Pain (0-10)	Location (C/T/L/S)	Radiation? (arm/leg)	Stiffness (0-10)	Quality (ache/sharp/burning)	Worse Time	AM Stiff (min)

Activity & Position Impact

Rate tolerance: minutes before pain increases OR impact rating (0=fine, 5=unbearable). Patterns here guide physical therapy.

Date	Sitting (min)	Standing (min)	Walking (min)	Bending	Lifting (max lbs)	Lying Down	Driving (min)

Red Flag Symptom Monitor

If ANY of these appear or worsen suddenly, contact your doctor immediately. Mark Y/N daily.

Red Flag	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Numbness in legs/feet							
Weakness in legs							
Bladder changes							
Bowel changes							
Saddle area numbness							
Progressive weakness							
Fever with back pain							
Unexplained weight loss							

Nerve Symptom Tracking (Sciatica/Radiculopathy)

If pain radiates to arm or leg, track these symptoms. They help differentiate mechanical vs. nerve involvement.

Exercise & Movement Log

Track prescribed exercises and general activity. Movement patterns directly affect back pain — your physio needs this.

Posture & Ergonomics Checklist

Check items you maintained today. Good posture habits reduce flare frequency — track to build awareness.

- Desk/chair ergonomics maintained
 - Regular position changes (every 30 min)
 - Proper lifting technique used
 - Supportive footwear worn
 - Core engagement exercises done
 - Sleeping position supported (pillow between knees etc.)
 - Stretching breaks taken
 - Heat/cold applied proactively

Medication & Treatment Log

Track all spine-related medications including NSAIDs, muscle relaxants, nerve pain meds, and injections. Note posture or position when taking medication.

Non-Medication Treatments

Track physiotherapy exercises, heat/ice, TENS, traction, inversion, core strengthening, and ergonomic changes. Spine specialists prioritize these.

Treatment Effectiveness Summary

Rate each treatment weekly. Note which positions or activities each treatment helps. Spine-specific relief patterns guide surgical vs. conservative decisions.

Functional Impact Assessment

Rate each activity: 0 = Unable, 5 = Significant difficulty, 10 = Full capacity. Track daily or on representative days.

Activity	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Sitting tolerance (min)							
Standing tolerance (min)							
Walking distance							
Bending / stooping							
Lifting capacity (lbs)							
Stair climbing							
Driving tolerance (min)							
Desk work / computer							
Household chores							
Exercise / activity							

Self-Care & Daily Living

Mark: Y = Independent ~ = Modified / used aids X = Unable H = Needed help from another person.

Activity	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Getting out of bed							
Bending to dress lower body							
Toilet use (sitting/standing)							
Meal prep (standing at counter)							
Vacuuming / mopping							
Driving (vibration + posture)							
Sleep position comfort (1-5)							

Position Changes, Ergonomic Aids & Movement Strategies

Weekly Summary — Back Pain

Complete at end of each week. Bring to appointments. This page tells your doctor how the week went.

Week of: _____

Average Pain Level (0-10): _____

Worst Day (date + level): _____

Best Day (date + level): _____

Flare Days This Week: _____

Sleep Quality Average (1-5): _____

Nerve symptoms present?: _____

Physio exercises completed (out of 7 days): _____

Red flag symptoms noted?: _____

Pattern Observations

Positions/activities that made pain worse: _____

Positions/activities that gave relief: _____

Nerve symptoms pattern (worse when?): _____

Exercise/PT compliance and effect: _____

Questions for Next Appointment

1. _____

2. _____

3. _____

4. _____

5. _____

Posture Observations & Spine-Specific Concerns
