

WorkSafeBC Pain Journal Template

Designed for BC workplace injury claims. Document pain in the format WCB case managers need.

Name: _____

Date Range: _____

WCB Claim Number: _____

Injury Date: _____

Employer: _____

Pain Scale Reference (0–10 NRS)



Daily Work-Related Pain Log

Connect symptoms to work duties. Note functional limitations and treatment compliance.

Date	Pain (0-10)	Work Status	Duties Affected	Limitations	Treatment Today

Functional Capacity

Date	Sitting	Standing	Lifting	Walking	Driving	Concentrating

Date	Sitting	Standing	Lifting	Walking	Driving	Concentrating

Treatment Compliance

Date	Physio/Exercise	Medications	MD Appointments	Other Treatment	Notes

Case Manager / Return-to-Work Notes