



TAYLORED PHYSICAL THERAPY
TAYLOREDPT.COM 484.706.3219

USE THE FOLLOWING DRAWING AND SYMBOLS SHOWN TO INDICATE THE LOCATION AND TYPE OF SYMPTOMS YOU ARE EXPERIENCING AT THE PRESENT TIME:

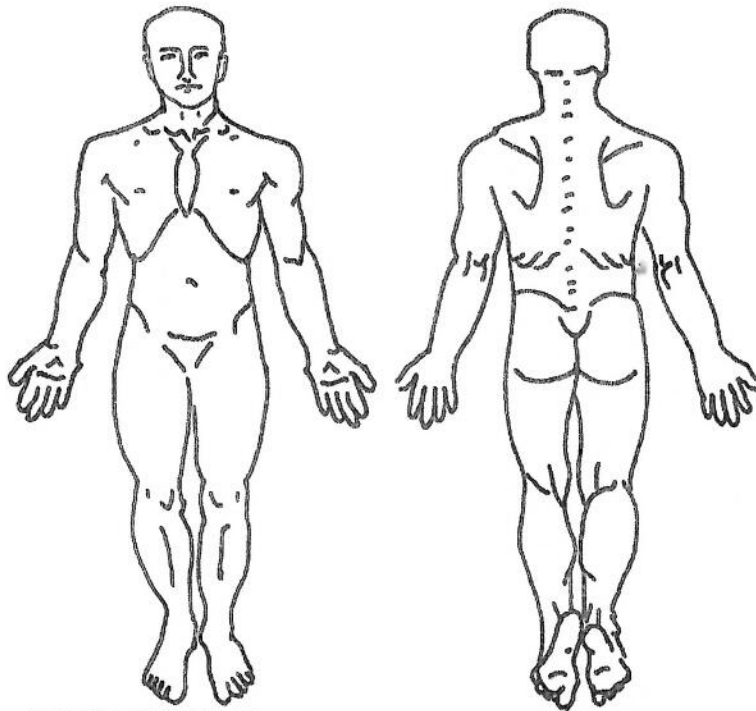
SHARP PAIN
////

ACHINESS
XXXXX

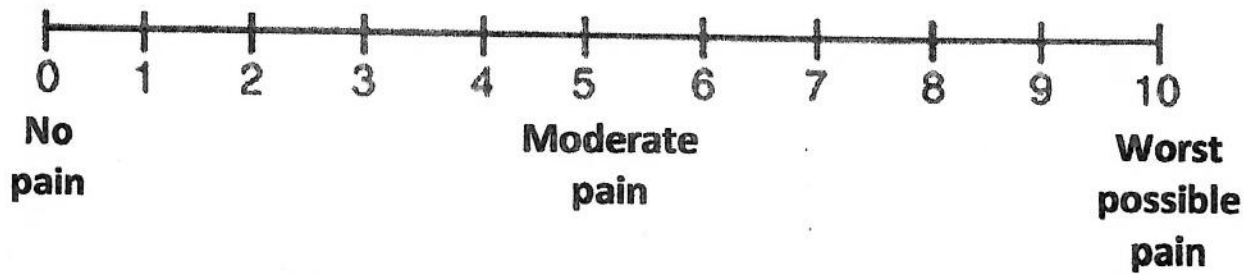
BURNING
!!!!

PINS & NEEDLES
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NUMBNESS
+++++



PLEASE USE THE FOLLOWING SCALE TO RATE YOUR PAIN



RATING OF PAIN CURRENTLY: ____/10

RATING OF PAIN AT BEST: ____/10

RATING OF PAIN AT WORST: ____/10