

# Symptom Tracker

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

*My pain level*

3  
2  
1  
0

*My fatigue level*

3  
2  
1  
0

# of times I took relief meds y/n

I took my regular meds today y/n

I slept well last night y/n

I rested when I could y/n

I stretched / I was active y/n

I hydrated & ate well y/n

I was mindful to reduce stress y/n

Stress level 0-3

Depression / anxiety level 0-3

Cognitive slowness/ fog level 0-3

I had trouble coping today y/n

I had a virus/illness y/n