CONNECTICUT DISC AND LASER THERAPY CENTERS

Knee Pain Activity Log

Record what happens during activities you already do.

Date, activity and approximate time spent doing it

Where did you feel it? Front, inside, outside or behind the knee?

When did the pain start? During the activity, afterward or the next day?

Did you notice swelling, catching, or a feeling of giving way?

What made the task easier? What remained difficult?

Which activity would you most like to discuss at your appointment?

Bring this page to your appointment.

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