



# My Headache Diary- Print this diary and use it to keep track of your headaches

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

## TRACKING YOUR HEADACHES

1. The date and time each headache started and stopped.
2. Any factors that seem to trigger the headache: food; smoke; bright light; stress, activity.
3. The location and nature of the pain: throbbing, aching, stabbing, dull.
4. The severity of the pain: 1 = very mild; 4=moderate; 10=very severe
5. Other physical symptoms: nausea, vomiting, visual disturbance, sensitivity to light or noise.
6. If you are a woman, note any association between headaches and your menstrual cycle or use of birth control pills or hormone replacement therapy.
7. List any treatments: e.g. acetaminophen (Tylenol), sleep medicine, etc.