# Headache diary

National Migraine Centre

Get back to living

Complete your diary for a month (or as long as you can before your appointment).
You can use the diary to help you understand your headaches whether you have an appointment or not.

| Date | Day<br>M T W Th F S Su | Time<br>headache begins | Pain score<br>0 – no pain<br>10 – worst pain | Medication<br>type/time taken | Comments |
|---|---|---|---|---|---|
| 1 | | | 0<br>1<br>2 | | |
| 2 | | | 0<br>1<br>2 | | |
| 3 | | | 0<br>1<br>2 | | |
| 4 | | | 0<br>1<br>2 | | |
| 5 | | | 0<br>1<br>2 | | |
| 6 | | | 0<br>1<br>2 | | |
| 7 | | | 0<br>1<br>2 | | |
| 8 | | | 0<br>1<br>2 | | |
| 9 | | | 0<br>1<br>2 | | |
| 10 | | | 0<br>1<br>2 | | |
| 11 | | | 0<br>1<br>2 | | |
| 12 | | | 0<br>1<br>2 | | |
| 13 | | | 0<br>1<br>2 | | |
| 14 | | | 0<br>1<br>2 | | |
| 15 | | | 0<br>1<br>2 | | |

| Date | Day<br>M T W Th F S Su | Time<br>headache begins | Pain score<br>0 - no pain<br>10 - worst pain | Medication<br>type/time taken | Comments |
|---|---|---|---|---|---|
| 16 | | | 0<br>1<br>2 | | |
| 17 | | | 0<br>1<br>2 | | |
| 18 | | | 0<br>1<br>2 | | |
| 19 | | | 0<br>1<br>2 | | |
| 20 | | | 0<br>1<br>2 | | |
| 21 | | | 0<br>1<br>2 | | |
| 22 | | | 0<br>1<br>2 | | |
| 23 | | | 0<br>1<br>2 | | |
| 24 | | | 0<br>1<br>2 | | |
| 25 | | | 0<br>1<br>2 | | |
| 26 | | | 0<br>1<br>2 | | |
| 27 | | | 0<br>1<br>2 | | |
| 28 | | | 0<br>1<br>2 | | |
| 29 | | | 0<br>1<br>2 | | |
| 30 | | | 0<br>1<br>2 | | |
| 31 | | | 0<br>1<br>2 | | |

**Please don't send us diaries if you don't have an appointment as we won't be able to review them.** (You can book an appointment here.)
But if you do have an appointment at the National Migraine Centre, send the diary to us by email at: admin@nationalmigrainecentre.org.uk, making sure it reaches us at least three days before your appointment. Include in the body of your email:

- Your name
- Your date of birth
- The dates your diary covers (eg 1/1/22-31/1/22)

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