

UCSF Child & Adolescent Headache Program

HEADACHE DIARY

Day of Month		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
Month:	RED 																															
	YELLOW 																															
	GREEN 																															
	NO headache present																															
	MEDS																															
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	GREEN 																															
	NO headache present																															
	MEDS																															

**LEGEND:**

- RED:** Severe headache, **impairing** ability to function- Not able to go to school, play, or do enjoyable activities. **Need to lay down and rest.**
- YELLOW:** Moderate headache, **not impairing** ability to function- Able to go to school, do work, and activities- but **with noticeable discomfort.**
- GREEN:** Mild headache, **not impairing** ability to function- Might not have mentioned it without diary. **No limitation to activities**, but pain is present.

ACUTE MEDICATION USAGE			
Symbol	Medication name, Dosage and Route	Symbol	Medication name, Dosage and Route
Eg: "N"	Naproxen, 500mg, By mouth		

**INSTRUCTIONS:**

**Why we are asking you to keep a diary:**

- Keeping a headache diary is **VERY** important to help track progress in managing headaches.
- Please **fill out the diary every day** and remember to bring it to all of your follow up visits
- Progress becomes more obvious when we compare week to week or month to month, rather than hour to hour or day to day, so the diary can help you and your doctor evaluate when things begin to improve.
- It is usually very hard to think back and remember in detail how things felt in the past. Just try to remember what you had for dinner last Monday and you'll notice it may be impossible- unless of course you always like to eat the same thing.
- **Even if the headache is the same every day, we want to be able to acknowledge when the pain and disability begins to improve, so we do still want you to complete the diary every day.**

**How to use the diary:**

- Every column is one day in the month. They are numbered at the top of the table.
- Every evening, think back on the day and rate the severity of your migraine as RED/YELLOW/GREEN. See legend above.
  - Fill in the box that represents the worst it got that day.
  - Fill in the box for the best it got that day.
  - If you had headache freedom- either alone or after treatment- please also mark this.
  - Some days the pain may stay in one place, and then you will only fill out one box that day.
  - Enter **P** for the first day of your period (if applicable)
  - If you treat your head pain with an acute medication or take anti-nausea medication- please record this in the diary by using the first letter of the medication (see below)

<b>EXAMPLE DIARY:</b>		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	
Month: December	<b>RED</b>																															
	<b>YELLOW</b>																															
	<b>GREEN</b>																															
	<b>NO headache present</b>																															
	<b>MEDS</b>		N S	N		N		N		N S				<u>P</u>	N			N	N S				N	N	N						N	N

<b>ACUTE MEDICATION USAGE</b>			
<b>Symbol</b>	<b>Medication name, Dosage and Route</b>	<b>Symbol</b>	<b>Medication name, Dosage and Route</b>
"N"	Naproxen 500mg, By mouth		
"S"	Sumatriptan 25mg, By mouth		