



HILL PARK MEDICAL CENTER

PAIN LOCATION CHART—Female

Name: _____ Date: _____

Use the body diagram below to indicate the location of any of the sensations listed. Mark the areas on the drawings with the symbol that best describes the sensation that you feel.

	=====	Numbness		
	oooooo	Pins and Needles		
	xxxxxx	Burning Pain		
	//////	Stabbing Pain		
	^^^^^	Aching Pain		