



Migraine SpecialistTM

Migraine Diary



How to use your migraine diary

Print out this migraine diary template each month and keep it in an easily accessible place so you can track your headaches and migraines and record your symptoms and pain relief efforts. A comprehensive headache and migraine diary will help your treatment team further understand your triggers and prescribe a prevention and management plan that will work for you.

When adding a headache or migraine attack to your migraine diary, remember to include:

- All of the symptoms you experience during and after the headache or migraine attack. Common symptoms include vomiting, nausea, dizziness and drowsiness.
- All of the activities that you did before the headache or migraine attack, even if you think it is irrelevant or insignificant. Include what you ate and when, whether you skipped a meal, water intake, sleep, exercise and change in your usual routine.

For women:

Circle the days of your menstrual cycle each month, whether they correlate with a headache or migraine attack or not. This can help your treatment team understand patterns that might be related to menstrual migraines or hormonal migraines.



Migraine Diary

Month: _____

Date	Headache or migraine?	Pain 0-10	Where is the pain?	Symptoms	Duration	Medications taken + relief	Activities + potential triggers
1st							
2nd							
3rd							
4th							
5th							
6th							
7th							
8th							



Migraine Diary

Month: _____

Date	Headache or migraine?	Pain 0-10	Where is the pain?	Symptoms	Duration	Medications taken + relief	Activities + potential triggers
9th							
10th							
11th							
12th							
13th							
14th							
15th							
16th							



Migraine Diary

Month: _____

Date	Headache or migraine?	Pain 0-10	Where is the pain?	Symptoms	Duration	Medications taken + relief	Activities + potential triggers
17th							
18th							
19th							
20th							
21st							
22nd							
23rd							
24th							



Migraine Diary

Month: _____

Date	Headache or migraine?	Pain 0-10	Where is the pain?	Symptoms	Duration	Medications taken + relief	Activities + potential triggers
25th							
26th							
27th							
28th							
29th							
30th							
31st							