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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | ***Example:*** ***February 1*** |  |  |  |  |  |  |  |
| Medications taken/time: misoprostol (M), Naproxen (N), Tylenol #3 (T3), Advil (A), Gravol (G), etc | *Mx4 2:00 pm**Tx2 3:00 pm* |  |  |  |  |  |  |  |
| BleedingHeavier than period (H), Clots (C), Moderate/like period (M), Lighter (L), spotting (S) | *H 3-5 pm**C 3-5 pm**M after 6 pm* |  |  |  |  |  |  |  |
| Pain on scale from 1-10 | *5, then 3*  |  |  |  |  |  |  |  |
| Any other symptoms (for example):* nausea
* vomiting
* fever
* chills
* diarrhea
* headache
* fatigue
 | *Nausea**headache* |  |  |  |  |  |  |  |