

# Migraine Experience Log Instructions

Dear [Your Name],

To effectively track your migraine experiences, please follow the instructions below:

## 1. Log Entry Template

Date: \_\_\_\_\_

Time of Onset: \_\_\_\_\_

Duration: \_\_\_\_\_

Symptoms Experienced: \_\_\_\_\_

Intensity Level (1-10): \_\_\_\_\_

Triggers Noted: \_\_\_\_\_

Medications Taken: \_\_\_\_\_

Effects on Daily Activities: \_\_\_\_\_

## 2. Important Notes

- Be as detailed as possible in each log entry.
- Note any changes in your routine or diet that may correlate with your migraines.
- Submit your log at the end of each week for review.

Thank you for your commitment to tracking your migraine experiences. This information will assist in managing your condition effectively.

Sincerely,

[Your Healthcare Provider's Name]