Michael Cheikin M.D., *Holistic Medicine and Physiatry*

HOURLY LOG

Date	am												MONTH OF:	pm											Notes on back ☐
	M	1	2	3	4	5	6	7	8	9	10	11	N	1	2	3	4	5	6	7	8	9	10	11	
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Hourly Coding (notes on back)
A = arousal during sleep
B = to bed
F = food
H = hunger
M = medication
N = nutriceutial (supplement)
O = out of bed (awake)
P = pain
S = symptom (note on back)
W=water

Sample Scales:
(A) Symptoms
0 = None
5 = Want to take medicine
10 = Go to E.R.

(B) Wellness/Energy
10 = Excellent; Can do anything
5 = Some limitations
1 = Stay in bed

(C) Relief: includes how well you are functioning, how much pain, duration of pain
0% = Original amount of symptom
100% = Completely gone

(D) Sleep
10 = full night, refreshed
1 = multiple interruptions, not refreshed

(E) Hunger:
-5 = Nausea
0 = None
5 = Must eat something
10 = Uncontrolled eating

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