**Dzienniczek bólu**

*skala NRS 0-10 (0-brak bólu, 10-najsilniejszy ból, jaki można sobie wyobrazić)*

MIESIĄC : ……………………………………………… ROK: ……………….

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| Dzień | godz. 0-8 | | godz. 8-12 | | godz. 12-16 | | godz. 16-20 | | godz. 20- 00 | |
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Kraków, 30.07.2025 Opracowała: lek. med. Elżbieta Dobrowolska

