

Outer Knee Pain Location Chart

Patient Information

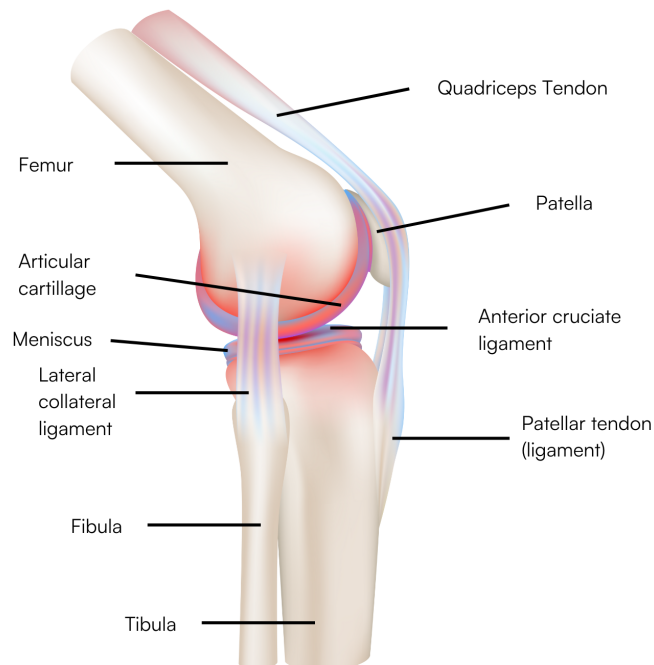
Name:

Date of Birth:

Medical Record Number:

Instructions:

- Please mark the area(s) where you experience outer knee pain.
- Use a different symbol or color for each visit to track changes.
- Note any associated symptoms or details.



Key:

- ○ : Pain during rest
- ☆ : Pain during walking
- ■ : Pain during bending
- △ : Pain during activity
- 🍎 : Swelling
- ! : Tenderness

Additional Comments

Date of Assessment: