

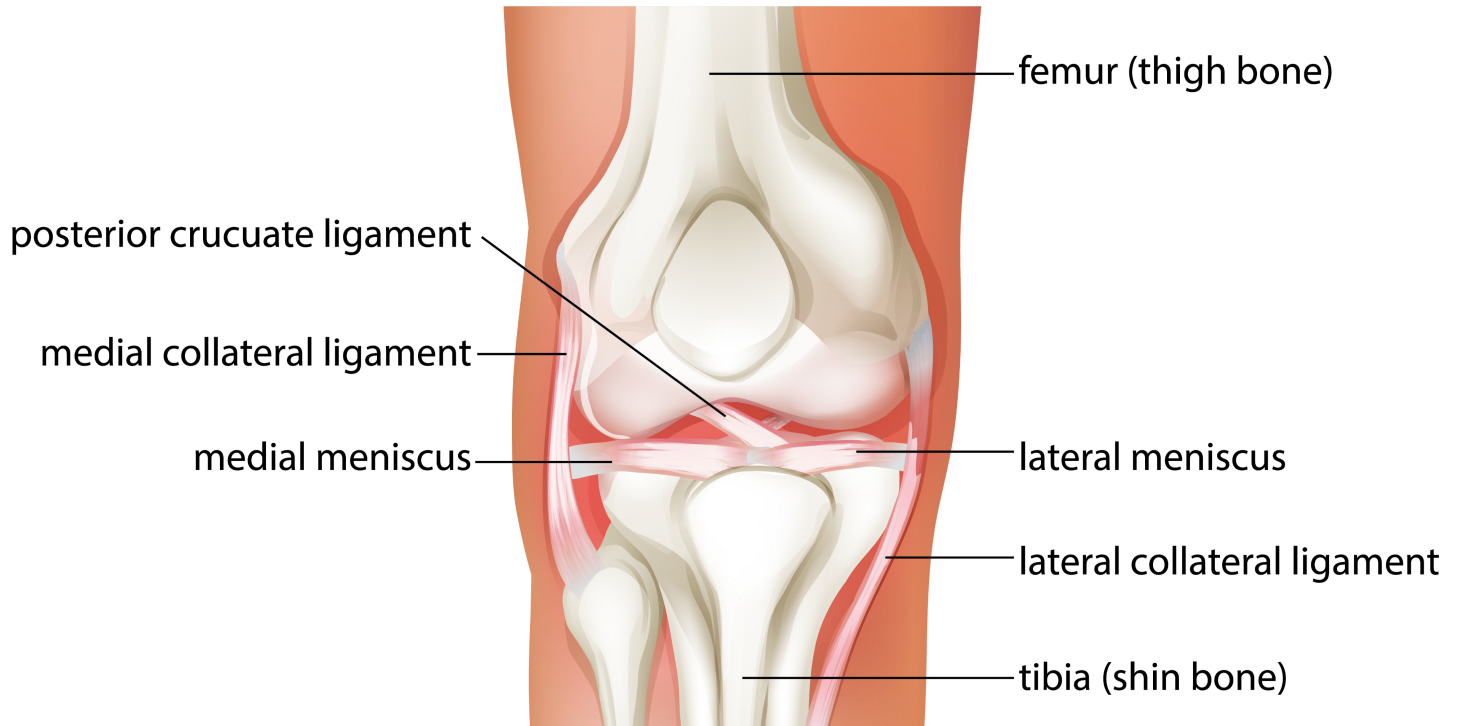
Inner Knee Pain Location Chart

Patient Information:

Name: _____ Date of Birth: _____

Contact Number: _____ Email: _____

Use a pen or highlighter to mark the exact spot of your knee pain on the chart.



Area of pain: _____ Describe the sensation: _____

Additional Notes: