

So far, what is the severity of your symptoms?

HH	MM	
11 12 1	00	Pain None <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> High
10 am 2	15	Low Energy None <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> High
9 pm 3	30	
8 pm 4	45	Freezing None <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> High
7 6 5		

Optional

HH	MM	
11 12 1	00	Pain None <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> High
10 am 2	15	Low Energy None <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> High
9 pm 3	30	
8 pm 4	45	Freezing None <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> High
7 6 5		

HH	MM	
11 12 1	00	Pain None <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> High
10 am 2	15	Low Energy None <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> High
9 pm 3	30	
8 pm 4	45	Freezing None <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> High
7 6 5		