<table>
<thead>
<tr>
<th></th>
<th>SUNDAY</th>
<th>MONDAY</th>
<th>TUESDAY</th>
<th>WEDNESDAY</th>
<th>THURSDAY</th>
<th>FRIDAY</th>
<th>SATURDAY</th>
</tr>
</thead>
<tbody>
<tr>
<td>FOOD/DRINK</td>
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<tr>
<td>Note the time and food consumed</td>
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<tr>
<td>DISCOMFORT/PAIN</td>
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<tr>
<td>Note the time and intensity of the pain</td>
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<tr>
<td>0 = no pain</td>
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<tr>
<td>10 = worst possible pain</td>
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<tr>
<td>BOWEL MOVEMENT</td>
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<tr>
<td>Note the time and consistency of the stool:</td>
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<tr>
<td>normal</td>
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<tr>
<td>watery/loose</td>
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<tr>
<td>hard/difficult to pass</td>
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