SLOW THINGS DOWN AND **LISTEN** . . .

Body Awareness Journal:

* Most important and underappreciated skill to learn
* Dynamic and constantly changing
* Teaches an individual her physical limits

**Task: Complete daily journal entries after each practice about the following**

**Perceived Effort Exerted:** Rank your effort at practice on the following scale and answer the questions below.

0% 50% 100%

Minimal Effort Moderate effort All-out effort

How do you feel? Was the practice hard, moderate, or easy? Did you feel like you gave everything to practice and why do you think this? Do you have anything left now that practice is over? How did you feel during practice, and how is that different from now?

**Pain Scale:** Rank any pain experienced on the following scale and answer the questions below.

0 1 - 2 - 3 4 - 5 - 6 7 - 8 - 9 - 10

 **MILD PAIN MODERATE PAIN SEVERE PAIN**

**DOES NOT** interfere with daily Interferes **SIGNIFICANTLY** with **UNABLE** to perform

 Activities daily activities daily activities

**1** – Pain is very mild, barely noticeable. Most of the time you don't think about it.

**2** – Minor pain. Annoying and may have occasional stronger twinges.

**3** – Pain is noticeable and distracting, however, you can get used to it and adapt.

**4** – Moderate pain. If you are deeply involved in an activity, it can be ignored for a period of time, but is still distracting.

**5** – Moderately strong pain. It can't be ignored for more than a few minutes, but with effort you still can manage to work or participate in some social activities.

**6** – Moderately strong pain that interferes with normal daily activities. Difficulty concentrating.

**7** – Severe pain that dominates your senses and significantly limits your ability to perform normal daily activities or maintain social relationships. Interferes with sleep.

**8** – Intense pain. Physical activity is severely limited.

**9** – Excruciating pain. Unable to converse.

**10** – Unspeakable pain. Very few people will ever experience this level of pain.

Describe the pain? Where is it located? What makes it increase? What makes it decrease? When did it first occur? Is it constant, intermittent, or sporadic?

**Recovery:** Answer the questions below.

What have you done to recover from practice (cool down, stretching, seeing athletic trainer, ice, etc)? Why did you choose these activities or not choose these activities? How did you feel before choosing these activities? How do you feel after doing these activities or not doing these activities?

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