

Finding Your Steady State

A guide to setting your baseline and pacing well

For people living with persistent pain or long-term fatigue
who want to get back to doing more of what matters.

Southampton Physio

Before you start

Here's what this can build.

A year from now, if you get this even half right, your life will look different in ways that are genuinely hard to imagine right now. Not pain-free necessarily. Not without difficult days. But a different range of what's possible, a different relationship with your body, a different sense of what you can count on.

Further out, what felt like restriction becomes ordinary, and the range of what you can sustain consistently expands.

That's what this is working towards.

Here's what the arc looks like

The first two weeks can feel uncomfortable. You're looking honestly at your current capacity and working within it, which is harder than it sounds. It might feel like things are getting worse. They're not, the work is just making visible what was already true.

The next three months can feel slow. You hold a baseline, progress carefully, and not much seems to be happening. Most people underestimate how much is changing in this phase because the changes are cumulative and subtle. This is also the phase where most people drop the scaffolding, usually because they feel well enough not to need it, which is exactly when they need it most.

Then, gradually, it compounds. The crashes come less often. The range of what you can sustain expands. The gap between where you are and where you want to be starts to close, in a slow accumulation of better weeks.

What this workbook is

A two-week experiment followed by an ongoing practice. You're going to collect honest information about your body, find a sustainable level, and build the habits that keep you there.

One thing before you read any further

If you don't finish this, you haven't failed. Most people don't finish on the first attempt. The workbook will still be here when you come back to it.

Five things to know before you begin

1. Pacing well is a skill, not a rule.

You wouldn't learn the piano from a single sheet of instructions. Pacing is the same. The workbook teaches the skill; your clinician helps you make it yours.

2. Pacing is about consistency, not cutting back.

This is the single most important idea in this workbook and most people get it wrong at first. There's a whole section on it coming up. If you read nothing else in Part 1, read that.

3. Your nervous system is being protective.

Sometimes a bit too protective. Pain doesn't always mean damage. Fatigue doesn't always mean something is broken. Both can come from a system that has turned the volume up higher than it needs to be. That can change.

4. Some weeks will be harder than others.

Flare-ups happen. They don't mean you're back to square one. There's a plan for when one hits, and you'll have it in your hands by the end of week 2.

5. You're not fragile.

Bodies adapt to what we ask of them, when we ask the right amount. The workbook helps you find that amount.

A quick check before you begin

Answer these six questions honestly. There are no wrong answers. They don't change the workbook you use. They help your clinician understand where to focus.

For each statement, tick how much it applies to you over the last month.

In the last month...	Not at all	A little	Quite a bit	A lot
After doing something physical, I feel worse the next day or the day after, even if it wasn't much	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When I overdo it, the symptoms that follow take more than 24 hours to settle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental effort (concentrating, difficult conversations, problem-solving) leaves me unwell, not just tired	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have crash days after I've done more than usual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rest helps, but it takes more than a good night's sleep to recover from overdoing it	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When symptoms flare after activity, they last at least a day, sometimes longer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you ticked "Quite a bit" or "A lot" for three or more of these, your body is giving you important information. Your two weeks will look slightly different, and we'll point out where as you go. Bring these answers to your next session.

Before you start the two weeks

If you've had a flare-up or setback in the last two weeks, let it settle first. Starting during a flare means your baseline will be set at your worst point, which isn't useful. Give it a few days, then begin.

Part 1

The next pages explain the thinking, about ten minutes to read. You can skip to the daily pages if you prefer. But the people who understand why they're doing what they're doing tend to get more out of it.

If you read only one section in this workbook, read the one called "Pacing means consistency. Not doing less."

Pacing means consistency. Not doing less.

When most people hear "pacing," they think it means cutting back. Doing less than they want to. Holding themselves back from the things that matter.

That's not what works.

What works is doing roughly the same amount every day. Including the good days. Especially the good days.

Here's what usually happens instead.

A good day comes. You feel better. So you catch up, the housework, the longer walk, the evening out, the emails you've been avoiding. It feels earned. And for a few hours, it is.

Then the crash, sometimes that night, sometimes 48 hours later. It isn't just tiredness, it's a setback that wipes out the progress from the good day and then some.

So you rest. You wait for the next good day. And the same thing happens again.

That pattern is called boom and bust. It's what keeps people stuck, not because they're doing anything wrong, but because they're responding to how they feel in the moment rather than working from a plan.

The way out isn't to do less overall. It's to do roughly the same amount every day, including when you feel well. To stop chasing the catch-up.

If Tuesday is a difficult day and you can manage X, that's roughly what you should do on a good Saturday, too. Not less, not more.

That steady level is your baseline. Finding it is what the next two weeks are for.

Then comes the harder bit

There's a slower version of boom and bust that gets less attention, and it's the one that catches most people out.

It looks like this. You find your baseline. You hold it for weeks, sometimes months. Things genuinely improve. You start to feel like yourself again. At some point, often without noticing, you decide you don't need the scaffolding anymore. The check-ins drift. The pacing loosens. You feel fine, so you start living like someone who's fine.

A few months pass. Then a crash comes, bigger than the small ones, and harder to come back from.

The trap is in the framing. Pacing isn't a phase you go through until you recover. Pacing is what keeps you well once you are. The moment you feel completely fine is the moment the steady level matters most, because it's the moment the pull to drop it is strongest.

So the shift this workbook is asking for isn't a technique, it's a way of operating. Not heavy or effortful, just settled — this is how I do things now. The same way someone who's learned to sleep well doesn't think of going to bed at a sensible hour as a treatment plan; it's just what they do.

That sounds like a big ask to encounter this early. Naming it now means you don't have to work it out on your own a year from now, looking back at a crash and wondering what happened.

A question worth asking yourself

When you're about to do something, or in the middle of doing it, one question is more useful than any other:

Am I doing this because I planned to, or because something is telling me to push through?

Same activity, two different consequences.

If you sit down to work because it's 9am and your plan was 90 minutes at the laptop, that's fine. You're following the plan.

If you sit down to work because the pain or fatigue is bad and you're trying to push past it, prove something to it, or ignore it, that's different. That's the pain driving the activity, not you. And it's usually the beginning of a flare.

From the outside, the activity looks identical. The signal driving it isn't.

We're not saying don't push yourself. We're saying notice what's doing the pushing.

You don't have to change anything yet. Awareness comes first. Think about the last time you overdid it. Was that task-led or pain-led?

The part most workbooks skip

There's a gap that most people in your position know well.

It's the gap between what you used to do and what your body currently allows.

You probably notice it most when you catch yourself comparing. "I used to be able to..." "Before this started, I could just..." "I never had to think about this."

That gap is a real loss. A lot of people describe what they feel about it as a kind of grief. Not dramatic, not a breakdown, just a quiet sadness about what's changed. Sometimes anger. Often both.

That's a normal response. It makes sense. And it tends to come back, especially on difficult days or when something reminds you of before.

We mention it here because setting a baseline asks you to start from where your body actually is, not where you wish it was. That means, at some point, stopping the argument with the gap. Not resolving it or accepting it as permanent, just setting it to one side long enough to work with what's true today.

That isn't giving up. It's the only place pacing can actually begin.

The workbook doesn't ask you to feel okay about any of this before it helps you. It works alongside whatever you're carrying. Some of what you feel reading this might be sadness, some might be relief — both are signs you're paying attention to the right things.

If this lands heavily, mention it to your clinician. You don't have to manage that part alone.

Choose your core activities

The next part of the workbook asks you to pick three to five activities that matter to you and are currently affected by your symptoms.

These are your cores. You'll test them across the two weeks to find out what dose of each one your body can sustainably handle right now. That gives you a real, measurable starting point for each, rather than a vague sense of "I can't do as much as I used to."

What makes a good core activity?

Things you want to do regularly that are currently affected by your symptoms. Present tense. Things connected to your current life, not a former one.

They can be physical, mental, or social. Don't limit yourself to obvious physical activities. A two-hour focused work block is a core activity. So is a phone call with a friend you find draining. So is concentrating through a difficult meeting.

Aim for variety across types. If all five of your cores are physical, you'll miss what's actually loading you most days.

How many?

Start with three. You can add a fourth in week 2 if you have capacity. Five is a maximum, not a target.

Your three to five cores

1. _____
2. _____
3. _____
4. _____ (optional)
5. _____ (optional)

If you're stuck

Choosing cores can be exposing. If you can't think of activities right now, or you feel stuck, that's normal.

Most people do this part with their clinician at their first or second session. If you're working through the workbook on your own and you're stuck here, leave this page and come back to it with your clinician. The rest of the workbook will still work.

What happens next

That's the thinking. The doing starts now.

For 14 days, you'll check in twice a day. Morning and evening. Three questions, about three minutes.

There's also a reflection at the end of each week. Five minutes, nothing more.

Don't change anything yet. You're not trying to fix anything in the next two weeks. You're gathering honest information about how your body actually works right now. That's the whole job.

By the end of week 2 you'll have tested each of your core activities to find a sustainable dose for each, mapped what your week actually contains across the domains that affect you most, and built a flare-up plan to use when you need it. You'll have something concrete to work with, not a vague sense of "I should pace better."

How activity testing works

You're going to test each of your cores three times across the two weeks. The aim is to find out what dose of each activity you can sustainably handle right now.

The protocol

Do the activity in a controlled way, paying attention to your symptoms as you go. Stop the moment your symptoms start to rise above their usual level. Note the time, volume, or amount you'd done at the point you stopped.

Do this three times across the two weeks, on separate days, with at least one day between tests. Three tests give you an average; one test on its own is too noisy to trust.

Take the average of your three test results. Your starting dose for that activity is 80 percent of that average.

A worked example

Sam's core: focused work on a difficult project

Sam chose "concentrating on a hard work project" as one of his cores. He notices that his thinking gets foggy and his neck starts to ache after a certain amount of deep focus, and that's when his symptoms typically rise.

Test 1 (Tuesday): focused work for 38 minutes before fog and neck pain started rising.

Test 2 (Friday): 32 minutes. He'd slept badly the night before.

Test 3 (the following Wednesday): 41 minutes.

Average: $(38 + 32 + 41) \div 3 = 37$ minutes.

Sam's starting dose: 80% of 37 = roughly 30 minutes of focused work in a single block.

This doesn't mean Sam can't do more than 30 minutes in a day. It means each block is capped at 30, with a break before the next one.

The reason for a mental task as the example: most people, when they hear "activity," think physical, but the biggest misses in pacing tend to be the non-physical loads — concentrating, difficult conversations, emotional work, problem-solving, managing other people.

If you ticked three or more on page 4

Your testing protocol is different

Testing to the point where symptoms rise isn't safe for everyone. If you ticked three or more on page 4, the signal you need is what your body does 24 to 48 hours after activity, not what it does during it.

For you, the testing protocol changes:

- Estimate what you think you could do without symptoms rising. Halve that. Cap it at 10 to 15 minutes for most activities.
- Do the test at that level. Stop at the time cap, even if you feel fine.
- Check in 24 hours later and 48 hours later. Did your symptoms stay at your usual level? Or did they rise?
- If your symptoms stayed the same: that's your tested dose. Do this three times to confirm.
- If your symptoms rose at 24 or 48 hours: that dose was too high. Halve it again next time.

Your starting dose is 50 percent of the tested dose, not 80 percent. This is conservative on purpose.

If a test causes a flare

Stop testing that activity until things have settled. You don't have to do all three tests if a test caused a flare; one test plus the recovery time it took is itself useful information. Note what happened on the test page and discuss it with your clinician.

Part 2

The Two-Week Baseline

How the check-ins work

Each day has its own page. Three questions in the morning, three in the evening.

Pain or symptoms: 0 is none, 10 is as bad as it gets.

Energy: 0 is completely empty, 10 is fully charged.

Activity intensity: 0 is complete rest, 10 is maximum effort.

Score what's true right now. No explaining, no qualifying — the number that feels accurate.

Morning: first thing, before you've done much. This is your starting point.

Evening: before bed. Your end point.

The gap between them matters. If symptoms are consistently higher in the evening, the day is loading you. If energy is consistently lower, you're spending more than you're restoring.

Miss a check-in? Leave it blank — a blank is information, a guess isn't.

There's a notes line on each day. Use it if something useful happens: a trigger, a particularly good day, a conversation with your clinician. You don't have to fill it in.=

If you flare up this week

The full flare-up plan is in Part 3. The short version: rest from the trigger rather than from everything, don't catch up on the good days that follow, and let things settle before returning to your previous level. Note what happened on today's notes line — what you were doing, how long it took to settle.

If symptoms haven't settled within 48 hours, or feel different from your usual pattern, contact your clinician.

Day 1

Date: _____

Morning check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evening check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did your symptoms settle back to roughly where they were this morning, by the end of the day?

Yes No Not sure

Notes (optional):

Activity test today (only if you tested one of your cores)

Which core did you test? _____

How much did you do before symptoms rose (or before your time cap)?

How did you feel the next morning (fill in tomorrow)? _____

Day 2

Date: _____

Morning check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evening check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did your symptoms settle back to roughly where they were this morning, by the end of the day?

Yes No Not sure

Notes (optional):

Activity test today (only if you tested one of your cores)

Which core did you test? _____

How much did you do before symptoms rose (or before your time cap)?

How did you feel the next morning (fill in tomorrow)? _____

Day 3

Date: _____

Morning check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evening check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did your symptoms settle back to roughly where they were this morning, by the end of the day?

Yes No Not sure

Notes (optional):

Activity test today (only if you tested one of your cores)

Which core did you test? _____

How much did you do before symptoms rose (or before your time cap)?

How did you feel the next morning (fill in tomorrow)? _____

Day 4

Date: _____

Morning check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evening check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did your symptoms settle back to roughly where they were this morning, by the end of the day?

Yes No Not sure

Notes (optional):

Activity test today (only if you tested one of your cores)

Which core did you test? _____

How much did you do before symptoms rose (or before your time cap)?

How did you feel the next morning (fill in tomorrow)? _____

Day 5

Date: _____

Morning check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evening check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did your symptoms settle back to roughly where they were this morning, by the end of the day?

Yes No Not sure

Notes (optional):

Activity test today (only if you tested one of your cores)

Which core did you test? _____

How much did you do before symptoms rose (or before your time cap)?

How did you feel the next morning (fill in tomorrow)? _____

Day 6

Date: _____

Morning check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evening check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did your symptoms settle back to roughly where they were this morning, by the end of the day?

Yes No Not sure

Notes (optional):

Activity test today (only if you tested one of your cores)

Which core did you test? _____

How much did you do before symptoms rose (or before your time cap)?

How did you feel the next morning (fill in tomorrow)? _____

Day 7

Date: _____

Morning check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evening check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did your symptoms settle back to roughly where they were this morning, by the end of the day?

Yes No Not sure

Notes (optional):

Activity test today (only if you tested one of your cores)

Which core did you test? _____

How much did you do before symptoms rose (or before your time cap)?

How did you feel the next morning (fill in tomorrow)? _____

Week 1: what are you noticing?

Five minutes. Write what's true, not what sounds right.

What were your most consistent morning symptom scores across the week?

Were your evening scores higher, lower, or roughly the same as your mornings?

Did you do more than usual on any day, then feel worse the day after?

Yes No

If yes, what happened?

What made the better days better?

What made the harder days harder?

One thing to pay closer attention to in week 2:

Your week, mapped

This is the most useful page in the workbook for many people. Take fifteen minutes with it.

Fill in what your last week actually contained across these six domains. Not what you wish it had contained. What it actually did.

Before you start

This is observation, not judgment. The point isn't to feel bad about what's missing. It's to see clearly what your current week actually contains, so we can work with it.

Some boxes might be empty. That's information, not failure.

Domain	What's currently in your week	What's missing or squeezed
Work <i>paid work, study, main responsibilities</i>		
Movement <i>walking, exercise, sport, active hobbies</i>		
Social <i>family time, friends, conversations, connection</i>		
Hobbies <i>interests, creative time, play, things you do for you</i>		
Personal & family <i>childcare, eldercare, household, errands</i>		
Mental load <i>focused work, hard conversations, problem-solving, masking</i>		

Mental load is the domain working people most often forget. It includes focused work, emotionally demanding conversations, problem-solving, managing other people, masking symptoms at work. If your work needs a lot of those, your mental load is higher than it looks.

Day 8

Date: _____

Morning check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evening check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did your symptoms settle back to roughly where they were this morning, by the end of the day?

Yes No Not sure

Notes (optional):

Activity test today (only if you tested one of your cores)

Which core did you test? _____

How much did you do before symptoms rose (or before your time cap)?

How did you feel the next morning (fill in tomorrow)? _____

Day 9

Date: _____

Morning check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evening check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did your symptoms settle back to roughly where they were this morning, by the end of the day?

Yes No Not sure

Notes (optional):

Activity test today (only if you tested one of your cores)

Which core did you test? _____

How much did you do before symptoms rose (or before your time cap)?

How did you feel the next morning (fill in tomorrow)? _____

Day 10

Date: _____

Morning check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evening check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did your symptoms settle back to roughly where they were this morning, by the end of the day?

Yes No Not sure

Notes (optional):

Activity test today (only if you tested one of your cores)

Which core did you test? _____

How much did you do before symptoms rose (or before your time cap)?

How did you feel the next morning (fill in tomorrow)? _____

Day 11

Date: _____

Morning check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evening check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did your symptoms settle back to roughly where they were this morning, by the end of the day?

Yes No Not sure

Notes (optional):

Activity test today (only if you tested one of your cores)

Which core did you test? _____

How much did you do before symptoms rose (or before your time cap)?

How did you feel the next morning (fill in tomorrow)? _____

Day 12

Date: _____

Morning check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evening check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did your symptoms settle back to roughly where they were this morning, by the end of the day?

Yes No Not sure

Notes (optional):

Activity test today (only if you tested one of your cores)

Which core did you test? _____

How much did you do before symptoms rose (or before your time cap)?

How did you feel the next morning (fill in tomorrow)? _____

Day 13

Date: _____

Morning check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evening check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did your symptoms settle back to roughly where they were this morning, by the end of the day?

Yes No Not sure

Notes (optional):

Activity test today (only if you tested one of your cores)

Which core did you test? _____

How much did you do before symptoms rose (or before your time cap)?

How did you feel the next morning (fill in tomorrow)? _____

Day 14

Date: _____

Morning check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evening check-in

	0	1	2	3	4	5	6	7	8	9	10
Pain or symptoms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity intensity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did your symptoms settle back to roughly where they were this morning, by the end of the day?

Yes No Not sure

Notes (optional):

Activity test today (only if you tested one of your cores)

Which core did you test? _____

How much did you do before symptoms rose (or before your time cap)?

How did you feel the next morning (fill in tomorrow)? _____

Week 2: pulling it together

Fourteen days of honest data is genuinely useful. More useful than most things you could do in that time.

This is a synthesis, not a single answer. You're going to pull three things together: what your activity tests showed, what your week actually looks like, and what your symptom check-ins are telling you.

Set aside thirty minutes. If you can, do this with your clinician at your next session.

Step 1: Look at your symptom data

Most common morning symptom score across the two weeks: _____ / 10

Most common evening score: _____ / 10

How many days did you feel worse the day or two after doing more than usual? _____ days out of 14

What does that pattern tell you?

Step 2: Write up your activity test results

For each of your cores, write the three test results, the average, and your starting dose (80 percent of the average, or 50 percent if you ticked three or more on page 4).

Core activity	Test 1	Test 2	Test 3	Average	Starting dose

These doses are your per-activity baselines. Each one is the level you can do sustainably right now. Treat them as starting points; they'll move.

Your week, mapped again

Fill in the second life map. This is the same exercise as last week, looking at the week that's just finished.

When you've filled it in, compare with your week 1 map. Has anything shifted in either direction? Has the testing changed what you noticed about your own week?

Domain	What's currently in your week	What's missing or squeezed
Work <i>paid work, study, main responsibilities</i>		
Movement <i>walking, exercise, sport, active hobbies</i>		
Social <i>family time, friends, conversations, connection</i>		
Hobbies <i>interests, creative time, play, things you do for you</i>		
Personal & family <i>childcare, eldercare, household, errands</i>		
Mental load <i>focused work, hard conversations, problem-solving, masking</i>		

What changed between week 1 and week 2?

Where's the friction in your week, the place where what you want and what your body allows don't match up?

Step 3: Your plan, written down

This is the page you'll come back to. Make it clear and specific.

Your per-activity baselines

Copy these from the table on the previous page.

Your consistency band

Looking at your activity intensity scores across the two weeks, what range do you want to stay within most days?

My band: from _____ to _____ on the 0 to 10 activity scale.

A useful starting point: your average activity score minus 1 at the bottom, plus 1 at the top.

The biggest thing I've learned from the two weeks

The one thing I'm going to change first

Not three things, one. The one most likely to make the next two weeks easier.

The baseline phase is done. What comes next is different.

Part 3

Ongoing Pacing

Right. You've got your baselines. Here's what changes.

For two weeks your job was to watch, test, and record without trying to fix anything.

That changes now.

One thing worth naming before it does. At some point, probably when things are going well, the pull to drop the scaffolding will come — the check-ins will start to feel unnecessary, the pacing will seem like something you needed then but don't need now. Re-read the consistency section when that happens. Pacing isn't a phase you go through until you recover. It's what keeps you well once you are.

If you're using the SteadyState app, the daily logging moves there from here. It will prompt you each day, track your patterns, and flag when something is shifting. Your clinician can see those patterns with your permission, which means you're not the only one watching.

If you're not using the app, the workbook can keep going. The monthly review page later in this section is what you'll use to stay on top of your progress, and your clinician will work through it with you at each session.

Either way, the workbook itself becomes your reference document from here.

From now on, the workbook holds your baselines, your life map, your flare-up plan, your progression guide, and your monthly reviews — keep it somewhere you can find it.

Three things that matter most from here

Stay roughly at your tested doses for each of your cores. Not every day will be the same; look at the week as a whole.

Progress one activity at a time, only when you've been stable. Seven consecutive days without a flare on that activity. If you ticked three or more on page 4, make that 14 days.

Use the flare-up plan when you need it. A flare isn't evidence that the system has failed; it's the system working.

When and how to do more

The baselines aren't where you stay, they're where you start.

Progress one core at a time, not all of them at once. The temptation to push everything forwards on a good week is the same temptation that drives boom and bust.

Before you progress a core, check all four of these

- You've been doing that activity at your tested dose for at least seven consecutive days without a flare (14 if you ticked three or more on page 4).
- No flare in that time took more than 24 hours to settle.
- No significant extra stressor in your life right now, illness, a difficult week at work, something major at home.
- You feel ready to progress this specific activity. Not theoretically. Actually.

If all four are true, you can progress that core.

How much?

Roughly 10 percent of the current dose. If you're focusing for 30 minutes, try 33; if you're walking for 20, try 22.

Small progressions tend to stick; bigger jumps often don't.

What to watch for afterwards

For the next 48 hours, notice whether your symptoms settle back to your usual level. If they do, the progression has held. If they haven't, drop back to the previous dose and hold there for another week.

A progression that doesn't hold isn't a failure — it's information about where you are right now.

Progressing multiple cores

Wait at least a week between progressing different cores. Progressing two at the same time is how you lose track of which one caused the flare when one happens.

What to progress towards

Worth a conversation with your clinician. The answer should connect to something real — not "do more," but things like the Saturday walk you used to manage, a full working day with a clearer head, or playing with the children without paying for it two days later.

Your baselines are the beginning, not the end.

When things flare up

They will at some point. That's not pessimism, it's just how persistent pain and fatigue work.

A flare isn't failure, it's a signal. What matters is what you do with it.

Rest from the trigger, not from everything. If you can identify what caused the flare, ease back from that and keep doing other things at a gentle level. Withdrawing from everything tends to make recovery slower and anxiety higher.

Don't try to make up for it. The temptation after a flare is to push on the next good day to recover lost ground, and that's how flares become cycles. Return to your previous stable baseline instead — the level that was working before, not the level you were progressing towards.

Hold there for at least a week, and don't progress again until you've had seven settled days. This isn't going backwards.

Work out what happened. Use the notes in your app or the notes line in the workbook. What was different in the days before? Sleep, stress, a change in routine, a one-off physical task? Knowing the pattern helps you plan for next time, not avoid life.

Know the difference between a flare and a shift. A flare is temporary, symptoms increase, then settle back to your usual level within a few days. A shift is when things settle, but at a consistently higher level than before. If you're not sure which this is after a week, come in. Don't wait and hope.

When to contact your clinician

Symptoms haven't settled in 48 to 72 hours. The flare feels different from your usual pattern. Something new has appeared. Your baseline has shifted upwards and isn't returning. You're not sure what to do next.

You're not bothering us. This is exactly what follow-up is for.

When your schedule isn't yours to control

Most pacing guides are written for people who can take a rest break when they need one, adjust their day when things get hard, and work at their own pace.

A lot of people reading this aren't in that position.

If you're working, commuting, parenting, or carrying responsibilities you can't put down, this page is for you.

Think in tasks, not time blocks

Working baselines are usually clearer when you've thought about them in tasks rather than in time blocks. The life map you filled in at the end of weeks 1 and 2 is the most useful place to start. It shows you what your week actually contains. The tested doses for your cores tell you what you can sustainably handle inside that week. Together, they give you something to work with.

Three things that actually help when the schedule is fixed

Micro-breaks work even when they're short. Sixty seconds standing, a five-minute reset between calls with your eyes closed, a brief walk at lunch — these aren't placeholders for proper rest, they're real interventions.

Pre-load rest before peaks you can predict. Heavy week coming up? Protect your evenings and weekends in the fortnight before. Your clinician might call this energy banking; it works.

Work-day and non-work-day baselines can be different. A Tuesday and a Sunday can reasonably have different bands — that isn't inconsistency, it's accuracy.

On workplace adjustments

If your symptoms are affecting your ability to work, you may have options you haven't fully used. Under the Equality Act 2010, your employer has a legal duty to make reasonable adjustments. That might mean flexible start times, short regular breaks, remote working, or changes to workload.

These are rights, not requests for special treatment. Access to Work ([gov.uk/access-to-work](https://www.gov.uk/access-to-work)) and ACAS ([acas.org.uk](https://www.acas.org.uk)) are good starting points if you want to explore this. Your clinician can also help you think through what to ask for.

One more thing worth saying plainly: sometimes the limit on what you can do isn't your body. It's your hours, your commute, the demands being made of you. This workbook can help you manage what you can control. Some things need other kinds of help. Neither is your failure.

When to come back to your clinician

You don't need to wait for something to go wrong.

After the two weeks, bring the workbook in. Your clinician will help you confirm the baseline, build the progression plan, and make sure the app reflects your goals.

After a flare that doesn't settle in 48 to 72 hours, don't wait and hope. One session at the right moment is worth considerably more than several sessions after things have spiralled.

Every one to three months, not because something is wrong but because a fresh look at your patterns is a good habit. Many people time this around their monthly review page.

The app tracks your patterns and your clinician can see them with your permission. You're not managing the data interpretation alone. The system is designed to work together.

How confident are you?

Fill this in now, then again in about four weeks. The numbers matter less than the change between them.

Think about your persistent pain or fatigue. For each of the following, circle how confident you are that you can do it despite how you feel. 0 is not at all confident, 6 is completely confident.

	Not at all	1	2	3	4	5	Compl etely
Getting through most of my daily tasks and responsibilities	0	1	2	3	4	5	6
Managing my work or main commitments	0	1	2	3	4	5	6

Your scores now: _____ and _____

Your scores in four weeks: _____ and _____

If the scores have gone up, something is working at the level that actually matters.

If they haven't moved, bring them to your next session. That doesn't mean the pacing isn't helping; it might mean something else needs attention first.

Your monthly review

Fifteen minutes. Do this at the end of each month or before your next session.

How did the consistency band hold this month?

Days within my band (roughly): _____ out of 28

Flares this month:

How many: _____

What triggered them:

How long to settle:

Did I progress anything? Yes No

If yes, did it hold?

What's felt easier this month compared to when I started?

What's still hard?

One thing I want to work on before the next review:

Bring this page to your next session, or photograph it and send it through the app beforehand.

If things are getting worse, not better

This workbook is for people who are managing, even when managing is hard. It isn't designed for situations that need more than self-management.

If any of the following are true, please contact your clinician or GP:

- Your baseline has shifted significantly upward over several weeks and isn't returning.
- Flares are happening much more often than when you started.
- New symptoms have appeared that you haven't had before.
- You're feeling low, finding it hard to cope, or struggling to get through the day.
- Something in your pattern has changed and you can't account for it.

This isn't failing the workbook. Some presentations need more support at certain points than any workbook can give, and that's what your clinician is for.

If you need urgent support

Medical emergencies: 999 or A&E.

Urgent GP advice: 111.

Mental health support: Samaritans 116 123, available free, any time. Your GP. Your Mind app.

You don't have to be in crisis to ask for help — asking early is nearly always the right call.

About this workbook

Developed by the team at Southampton Physio, drawing on current evidence in activity pacing, persistent pain management, and long-term fatigue. Designed to be used alongside clinical care, not instead of it. Updated periodically as the evidence develops — ask your clinician about the research behind any section.

About the SteadyState app

SteadyState continues the work this workbook starts. It tracks your daily check-ins, monitors your patterns, and helps your clinician see how you're doing between sessions.

Your clinician will set it up with you. It takes about ten minutes.

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This is general guidance to support your self-management. Your clinician's specific advice takes priority over anything written here.