Trigger Tracker

When a symptom flares, look back at the day before it.



WHY IT HELPS

Triggers rarely act alone or right away. A short night, a skipped meal and a stressful afternoon can add up hours later. Looking back 24 hours after each episode, then comparing episodes, shows which suspects keep coming back.

AFTER EACH EPISODE

Note	Write what happened and how bad it was.
Look back	Fill in the clock for the 24 hours before.
Suspect	Tick what stood out.
Compare	After a few episodes, count the ticks.

One episode is a clue, not a cause. A suspect that shows up in three or more episodes is worth testing with your care team.

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EXAMPLE TRIGGER TRACKER · EPISODE

EPISODE NO. 3

DATE Thursday, June 4

1 What happened

The symptom or flare you want to explain.

SYMPTOM: Migraine with nausea

STARTED AT: 4:00 pm

HOW BAD: ●●●○ mild to severe

2 Look back 24 hours

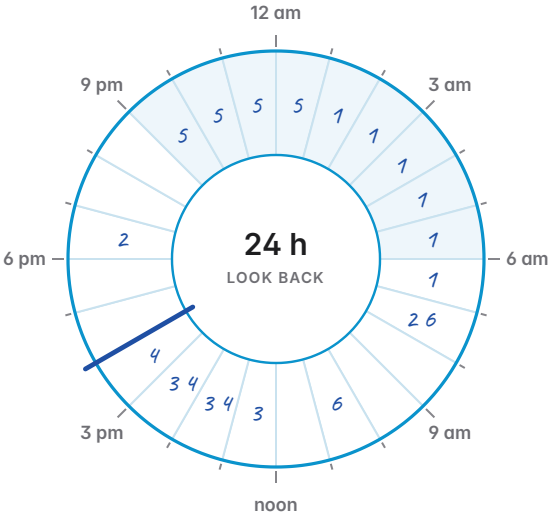
Draw a line at the start. Write each number in the hours it happened.

1 Sleep
1 am to 6:30 am
Woke up twice

2 Meals
Dinner 6 pm, toast 7 am
Skipped lunch

3 Stress
Deadline at work
Noon to 3 pm

4 Weather
Storm rolled in
After 1 pm



5 Screens
Phone in bed
Until 1 am

6 Alcohol or caffeine
Two big coffees
7 am and 10 am

7 Exercise
None

8 Cycle
Day 26

3 Suspects

Tick anything that was different from a usual day.

☑	1 Sleep	**Short night**	Broken sleep	Late night	Overslept
☑	2 Meals	**Skipped a meal**	Big meal	New food	Ate late
☑	3 Stress	**Work or school**	Conflict	Worry	**Rushing**
☑	4 Weather	Hot	Cold	**Storm or pressure**	Bright sun
☑	5 Screens	Long screen time	**Late screens**	Bright or flicker	
☑	6 Alcohol or caffeine	**More caffeine**	Less caffeine	Alcohol	
☐	7 Exercise	Harder than usual	None at all	New activity	
☐	8 Cycle	Before period	Period	Mid cycle	
☐	+ Something else				

WHAT HELPED: Dark room, cold pack, early night

MY BEST GUESS: Short sleep and no lunch, like last time

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1 **Sleep**

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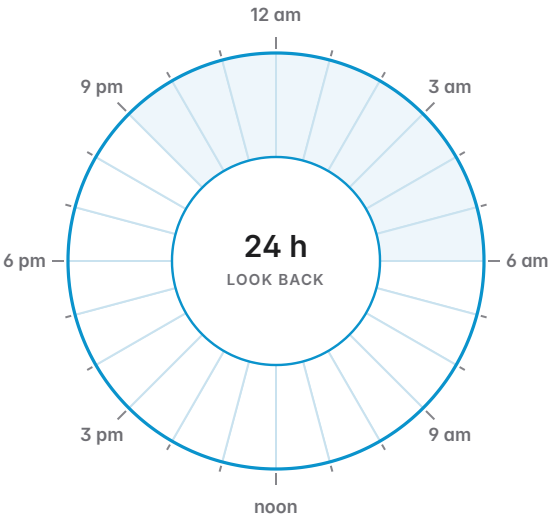

5 **Screens**

6 **Alcohol or caffeine**

7 **Exercise**

8 **Cycle**

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careclinic.io · A planning aid, not medical advice

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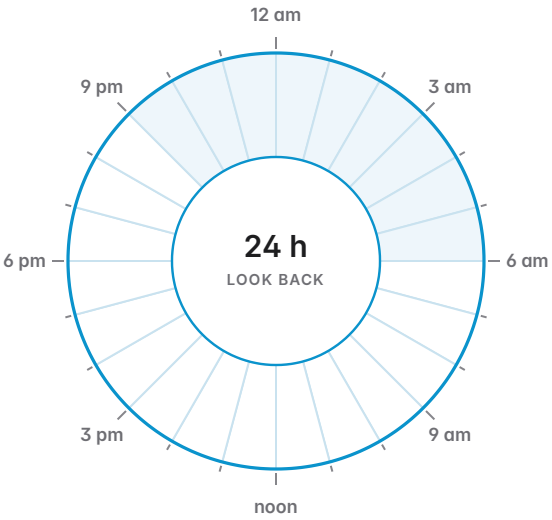

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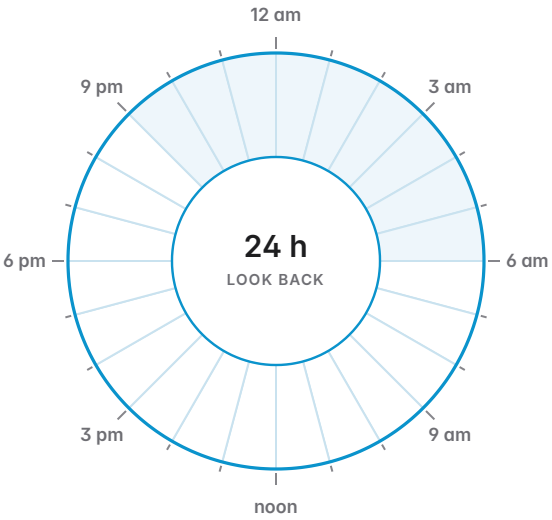

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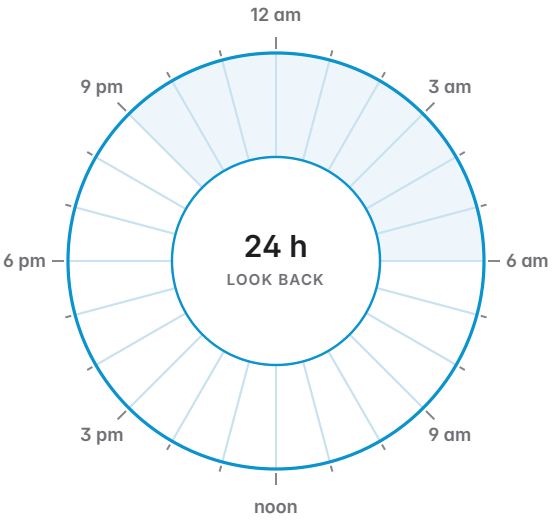

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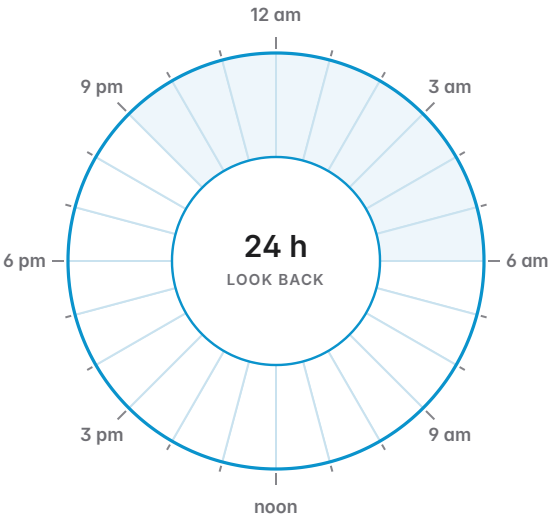

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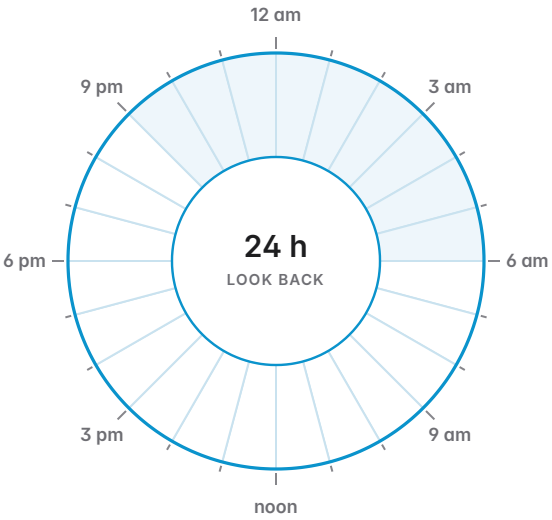

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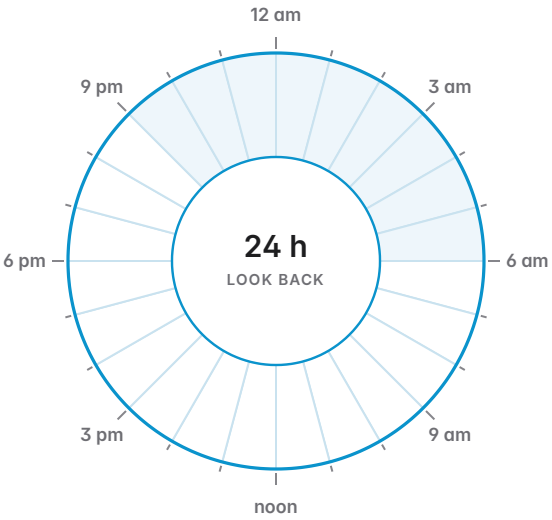

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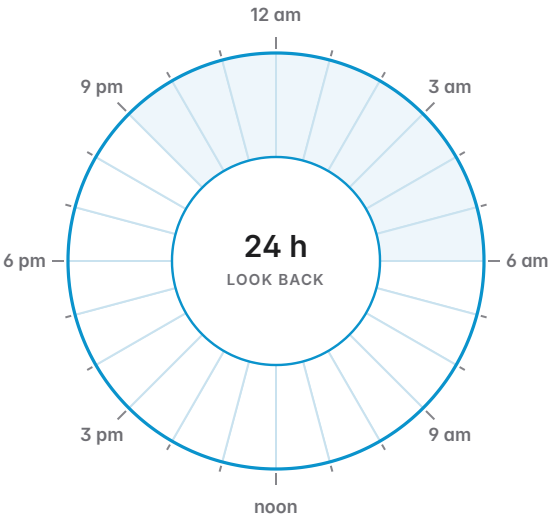

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Comparing episodes

Copy the ticks from each episode page into its column. Suspects that repeat will stand out.

SYMPTOM I AM TRACKING _____ FROM _____ TO _____

SUSPECT	1	2	3	4	5	6	7	8	9	10	TOTAL
DATE											
1 Sleep	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
2 Meals	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
3 Stress	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
4 Weather	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
5 Screens	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
6 Alcohol or caffeine	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
7 Exercise	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
8 Cycle	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
+ _____	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	
+ _____	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	

Three or more ticks for one suspect is a pattern. One or two can be chance. Test one suspect at a time so you can tell what made the difference.

MY TOP SUSPECTS

1 _____

2 _____

3 _____

WHAT I WILL TEST NEXT

1 _____

2 _____

3 _____

FOR MY NEXT APPOINTMENT

Questions or changes to raise with my doctor or care team.

_____

_____