

Migraine Trigger Observation Plan

Observe a few suspected factors prospectively - association is not proof of cause

PLAN A NARROW QUESTION

My specific question

Choose no more than five factors

- | | |
|--|--|
| ☐ Sleep timing | ☐ Skipped or delayed meals |
| ☐ Stress change | ☐ Menstrual timing |
| ☐ Weather change | ☐ Light exposure |
| ☐ Physical exertion | ☐ Alcohol |
| ☐ Caffeine change | ☐ A personally suspected food |

Observation period: 2, 3, or 4 weeks

How I will record each factor

How I will mark headache days

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DAILY OBSERVATION

Use one row per day

Date	Factor exposure	Headache?	Brief note

Other changes worth noting

What I observed - without assigning cause