



SELF-CARE PLANNER FOR **PAIN RESOLUTION**

Dr. Robert Vanbergen DNM PhD



OUR MISSION

Dr. Rob Vanbergen is ushering in a new generation of possibilities for the future of Pain Free For Life while continuing his parents, Dr. John and Dr. Lorry Hache's, mission. Together they're ridding the world of unnecessary pain without drugs, painful injections, invasive surgeries, or long recovery periods.

Dr. Rob suffered from debilitating anxiety and extensive scoliosis issues as a child. Neither holistic nor conventional medical remedies brought lasting relief. But when Dr. Rob applied the Hache Protocol for Pain Resolution™, his life completely changed. Now he's here to help you too!

Dr. Rob
Vanbergen



Dr. Lorry
Hache



Dr. John
Hache



PAIN FREE FOR LIFE MINDSET

OWNERSHIP

When facing chronic pain or illness, it can be easy to allow it to consume your life and define you as a person. However, taking ownership of your pain doesn't mean giving it power over your identity.

Instead, it means accepting that you have some level of control over your experience and taking steps to manage it in a way that improves your quality of life.

ACTION

Once you have taken ownership of your pain, it is time to act. This does not mean immediately pushing yourself beyond your limits. Instead, it means taking small steps each day to improve your situation.

CONSISTENCY

The goal here is not to be perfect; the goal is simply to keep moving forward each day. There will be setbacks, and there will be days when you don't feel like doing anything at all – that's normal! Just don't let those days derail your progress altogether. Get back on track as soon as possible and keep going until YOU decide YOU want to stop. Remember, YOU are in control!

SELF-CARE INTENTIONS

DAILY AFFIRMATIONS

TODAY I AM GRATEFUL FOR

TODAY'S TOP GOALS

01

02

03

SCHEDULE

WATER

☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

SLEEP

☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

MOOD

☐ ☐ ☐ ☐ ☐ ☐ ☐

NOTES



DAILY CHECKLIST

Fill in the checklist spaces below with self-care activities that you can do in the morning and at night.

MORNING SELF-CARE

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NIGHT SELF-CARE

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SMART GOALS

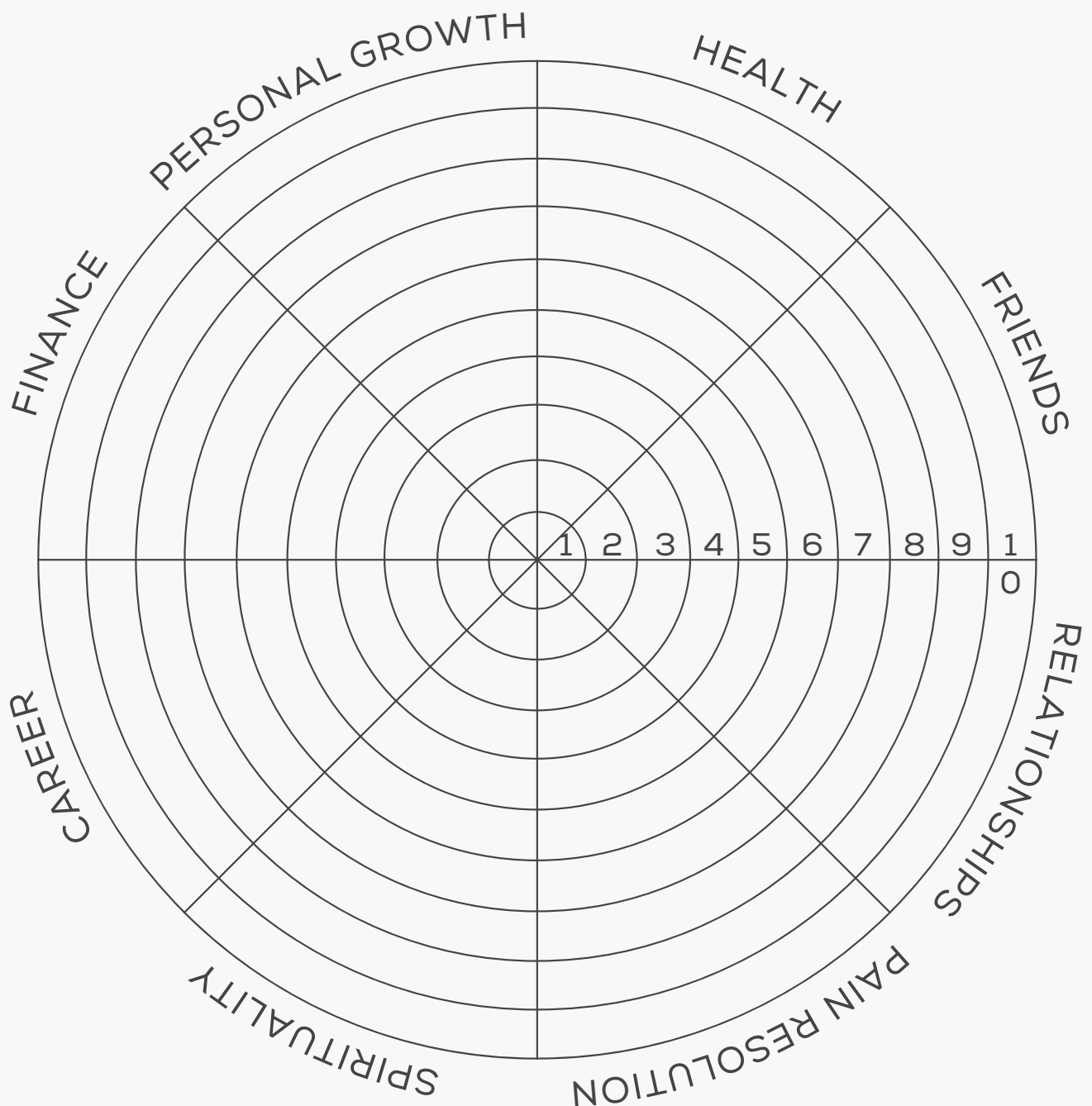
When setting pain resolution goals, make sure they follow the SMART structure. Use the questions below to create your goals.

S	<u>SPECIFIC</u> WHAT DO I WANT TO ACCOMPLISH?	
M	<u>MEASURABLE</u> HOW WILL I KNOW WHEN IT IS ACCOMPLISHED?	
A	<u>ACHIEVABLE</u> HOW CAN THE GOAL BE ACCOMPLISHED?	
R	<u>RELEVANT</u> DOES THIS SEEM WORTHWHILE?	
T	<u>TIME BOUND</u> WHEN CAN I ACCOMPLISH THIS GOAL?	



WHEEL OF LIFE

The wheel of life is a great tool that helps you better understand what you can do to make your life more balanced. Think about the 8 life categories below, and rate them from 1 - 10.



7-DAY HABIT TRACKER

Keeping track of your habits can help you stay on track and achieve your goals. Fill out your top goals and mark them off each day you successfully complete them.

WEEK OF: _____

HABIT / SELF-CARE STEP

	(S)	(M)	(T)	(W)	(T)	(F)	(S)
01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
05	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
06	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
07	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
08	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
09	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

REFLECTION NOTES



LIFE GOALS

For each of the categories below, write down things you are doing well and where you need improvement. Take the time to reflect on these, and write a goal for each category.

CATEGORY	WHAT I'M DOING WELL	WHERE I NEED IMPROVEMENT	MY GOALS
FAMILY			
FRIENDS			
WORK/ SCHOOL			
BODY			
MENTAL HEALTH			
SPIRITUALITY			



HEALING AFFIRMATIONS FOR CHRONIC PAIN & ILLNESS

Try some of these positive affirmations for healing each morning to set the intention of a collaborative healing experience between your mind and body. Some people find it helpful to gaze into the mirror when saying positive affirmations. It helps them connect with themselves and establish self-love. the vibrant lifestyle you deserve

- I know that my attitude is simply thought with an attached emotion.
- I have the power and ability to manifest it in a positive way.
- Each day I am stronger than the day before.
- I choose to heal.
- I choose to release pain and embrace healing.
- My body is powerful and capable of healing.
- I will not let my illness or pain define me.
- I am so much more than my pain.
- I am releasing pain and illness from my body.
- I welcome healing and vitality.
- I will create an environment that encourages healing in my body.
- I will listen to and nurture my body.
- I am committed to my healing journey and will strive to improve mentally and physically.
- I release pain, illness, and negativity from my body and mind.
- My body is capable of perfect harmony and balance.
- I deserve to live the life I love.
- I am open to embracing and supporting others in my goal of healing.
- I can take one small step every day and will rest when I'm weary.
- My healing potential is infinite.