

FLACC PAIN SCALE (Non-verbal Pain Assessment Scale)

	0	1	2
Face	No particular expression or smile	Occasional grimace or frown, withdrawn, disinterested	Frequent to constant frown, clenched jaw, quivering chin
Legs	Normal position or relaxed	Uneasy, restless, tense	Kicking or legs drawn up
Activity	Lying quietly, normal position, moves easily	Squirming, shifting back and forth, tense	Arched, rigid, or jerking
Cry	No cry (awake or asleep)	Moans or whimpers, occasional complaint	Crying steadily, screams or sobs, frequent complaints
Consolability	Content, relaxed	Reassured by occasional touching, hugging, or "talking to", distractable	Difficult to console or comfort

The FLACC is a behavior pain assessment scale
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INSTRUCTIONS - FLACC PAIN SCALE (Non-verbal Pain Assessment Scale)

This scale is to be used for non-verbal patients. The categories of the FLACC scale are listed on the left side of the scale; these are face, legs, activity, cry and consolability. Score each category with the number that correlates best with the patient's non-verbal cues, either a 0, 1, or 2. Now total the scores from all categories. This total number will be documented as the total pain score with the minimum score being 0 and the maximum 10. Be sure to document both the name of the scale used and the total number scored.

Please take into consideration the patient's disabilities in each of these categories when you assess the patient's pain behaviors and assign the score accordingly. For instance, in a patient who has stiff extremities as their normal activity, you would not necessarily assign a score of 2 for them in the activity category. Assigning a 0 or a 1 may be more appropriate based on their other normal bodily activity and other pain behaviors.

Example:

Patient AB; an 82 year old female with dementia and a recent history of hip fracture. She is immediately post-op and now admitted to your care. Her facial expressions include frowning and clenched jaw. Her legs are restless and tense. Her activity level is squirming and tense. She is moaning with occasional whimpering and is difficult to console or comfort.

Rating:	Face	2
	Legs	1
	Activity	1
	Cry	1
	Consolability	2
	Total	7

<<< Document this total as the patient's pain score. Document that the FLACC scale was used to determine the score.