


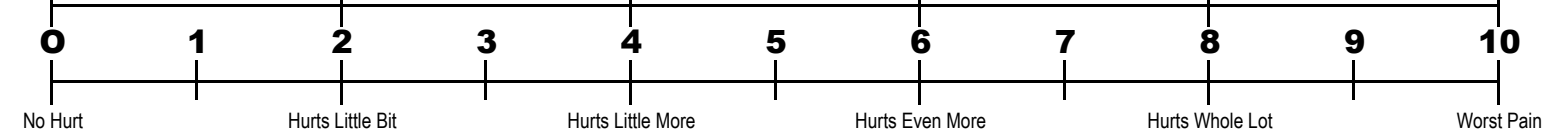
COMFORT GOAL:		PAIN MANAGEMENT							
DATE	TIME	PAIN LOCATION	SEDATION RATING	PAIN SCALE	PAIN RATING	INTERVENTION	INITIALS	EVALUATION TIME / PAIN #	INITIALS

PAIN SCALES

A. WONG-BAKER:
(Faces)



B. 0-10 VISUAL:
(Numeric)



C. VERBAL:

D. NON-VERBAL:
(FLACC Score)

WONG-BAKER FACES PAIN SCALE from Wong DL, Hockenberry-Eaton M, Wilson D, Winkelstein ML, Ahmann E, DiVito-Thomas PA, Whaley & Wong: Nursing Care of Infants & Children, 6th ed, St. Louis, MO: Mosby-Year Book Inc., 1999; 1153. Copyrighted by Mosby-Year Book, Inc. Reprinted with Permission.

INSTRUCTIONS	FACE	LEGS	ACTIVITY	CRY	CONSOLABILITY
1. Add FLACC category scores together to calculate FLACC Score 2. Record FLACC Score using the 0-10 VISUAL NUMERIC Scale above.	0 = No particular expression or smile 1 = Sporadic grimace / frown, withdrawn, disinterested 2 = Frequent / constant frown, clenched jaw, quivering chin	0 = Normal position, or relaxed 1 = Uneasy, restless, tense 2 = Kicking, or legs drawn up	0 = Lying quietly, normal position, moves easily 1 = Squirming, shifting back & forth, tense 2 = Arched, rigid, or jerking	0 = No cry (awake or asleep) 1 = Moans or whimpers, occasional complaint 2 = Crying steadily, screams, sobs, frequent complaints	0 = Content, relaxed 1 = Reassured by occasional touching, hugging, or "talking to", distractable 2 = Difficult to console or comfort

SEDATION SCALE: S = NORMAL SLEEP, EASY TO AROUSE, ORIENTED WHEN AWAKENED, APPROPRIATE COGNITIVE BEHAVIOR 1 = WIDE AWAKE - ALERT (OR AT BASELINE), ORIENTED, INITIATES CONVERSATION 2 = DROWSY, EASY TO AROUSE, BUT ORIENTED & DEMONSTRATES APPROPRIATE COGNITIVE BEHAVIOR WHEN AWAKE 3 = DROWSY, SOMEWHAT DIFFICULT TO AROUSE BUT ORIENTED WHEN AWAKE 4 = DIFFICULT TO AROUSE, CONFUSED, NOT ORIENTED 5 = UNAROUSABLE	INTERVENTION: 1 = DISCUSS PAIN MANAGEMENT PLAN WITH PHYSICIAN 2 = PHARMACOLOGICAL (see MED KARDEX) 3 = NON - PHARMACOLOGICAL a. Position Changed b. Relaxation Technique c. Splinting d. Imagery e. Music f. Education g. Other (describe below)
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ROOM #:	PATIENT Last Name:	PATIENT First Name:	Middle	DIAGNOSIS:	PHYSICIAN:

PART OF THE MEDICAL RECORD

