

### Pain Assessment (PIP)

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### Key Amendments

<b>Date</b>	<b>Amendment</b>	<b>Approved by</b>
9 <sup>th</sup> Feb 24	No changes approved at Paediatric Guideline Review Day	Paediatric Guideline Review

The following guidance is taken from the Partners In Paediatrics (PIP)

Pain assessment 2022–24

## PAIN ASSESSMENT

### FLACC SCALE – (Face, Legs, Activity, Cry, Consolability)

Instructions: Rate patient in each of the five measurement categories.  
 Add together to determine total pain score

	0	1	2
FACE	No particular expression or smile, <b>eye contact and interest in surroundings</b>	Occasional grimace or frown, withdrawn, disinterested, <b>worried look to face, eyebrows lowered, eyes partially closed, cheeks raised, mouth pursed</b>	Frequent to constant frown, clenched jaw, quivering chin, <b>deep furrows on forehead, eyes closed, mouth opened, deep lines around nose/lips</b>
LEGS	Normal position or relaxed	Uneasy, restless, tense, <b>increased tone, rigidity, intermittent flexion/extension of limbs</b>	Kicking or legs drawn up, <b>hypertonicity, exaggerated flexion/extension of limbs, tremors</b>
ACTIVITY	Lying quietly, normal position, moves easily <b>and freely</b>	Squirming, shifting back and forth, tense, <b>hesitant to move, guarding, pressure on body part</b>	Arched, rigid, or jerking, <b>fixed position, rocking, side to side head movement, rubbing of body part</b>
CRY	No cry or <b>moan</b> (awake or asleep)	Moans or whimpers, <b>occasional cries, sighs, occasional complaint</b>	Crying steadily, screams, sobs, moans, <b>grunts</b> , frequent complaints
CONSOLABILITY	<b>Calm</b> , content, relaxed, does not require consoling	Reassured by occasional touching, hugging, or talking to, distractible	Difficult to console or comfort

See management ladder below for score

## WONG AND BAKER PAIN ASSESSMENT – SELF REPORT

Suggested age group ≥3 yr

Point to each face using the words to describe the pain intensity

Ask child to choose a face that best describes their own pain and record appropriate number

### Wong-Baker FACES® Pain Rating Scale



Wong-Baker FACES Foundation (2016). Wong-Baker FACES® Pain Rating Scale.  
 Retrieved 20.07.16 with permission from <http://www.WongBakerFACES.org>

See management ladder below for score

## ANALGESIC INTERVENTIONS

**Analgesic ladder** (omit NSAIDs if contra-indicated)

Review analgesia daily and step up or down dependent on pain score

[Review need for paracetamol at day 3](#)

					Systemic morphine
				Oral morphine (pain dose)	
			Oral morphine (low dose)		
		NSAID	NSAID	NSAID	NSAID
	Paracetamol	Paracetamol	Regular Paracetamol	Regular Paracetamol	Regular Paracetamol
No pain	Mild	Mild to moderate	Moderate	Moderate to severe	Severe
0	2	4	6	8	10

### Play specialist

**Intervention** by play staff

**Preparation** aid used: doll, verbal

**Explanation:** photos

**Distraction:** toys, bubbles, music, multi sensory, books

Refer all in need of analgesia and with behavioural concerns

If learning disabilities apply assessment using tool appropriate for mental age

**Check BNFc for contraindications/interactions/precautions**