

FLACC Pain Scale

FLACC PAIN SCALE

Name: _____ Date: _____ dd / mm / yyyy

Rater: _____

Instructions For assessing patients who are awake Begin by observing the patient for at least 2-5 minutes. Make sure to observe with their legs and body uncovered, if possible. Reposition the patient or observe their activity. This will help to assess the body for tenseness and tone. Touch the patient's body to assess for tenseness or tone. Use the scale below to score each category from 0-2. For assessing patients who are asleep Start by observing the patient for at least 5 minutes or longer. Make sure to observe their body and legs uncovered. Reposition the patient if possible. Touch the patient's body and assess for tenseness and tone. Use the scale below to score each category from 0-2.

Face

- ☐ 0 - No particular expression or smile ☐ 1 - Occasional grimace or frown, withdrawn, disinterested
☐ 2 - Frequent to constant quivering chin, clenched jaw

Legs

- ☐ 0 - Normal position or relaxed ☐ 1 - Uneasy, restless, tense ☐ 2 - Kicking or legs drawn up

Activity

- ☐ 0 - Lying quietly, normal position, moves easily ☐ 1 - Squirming, shifting, back and forth, tense
☐ 2 - Arched, rigid or jerking

Cry

- ☐ 0 - No cry (awake or asleep) ☐ 1 - Moans or whimpers; occasional complaint
☐ 2 - Crying steadily, screams, sobs, frequent complaints

Consolability

- ☐ 0 - Content, relaxed ☐ 1 - Reassured by touching, hugging or being talked to, distractible
☐ 2 - Difficult to console or comfort

TOTAL SCORE: _____

Interpretation 0 = Relaxed and comfortable 1-3 = Mild discomfort 4-6 = Moderate pain 7-10 = Severe discomfort/pain

Additional Notes