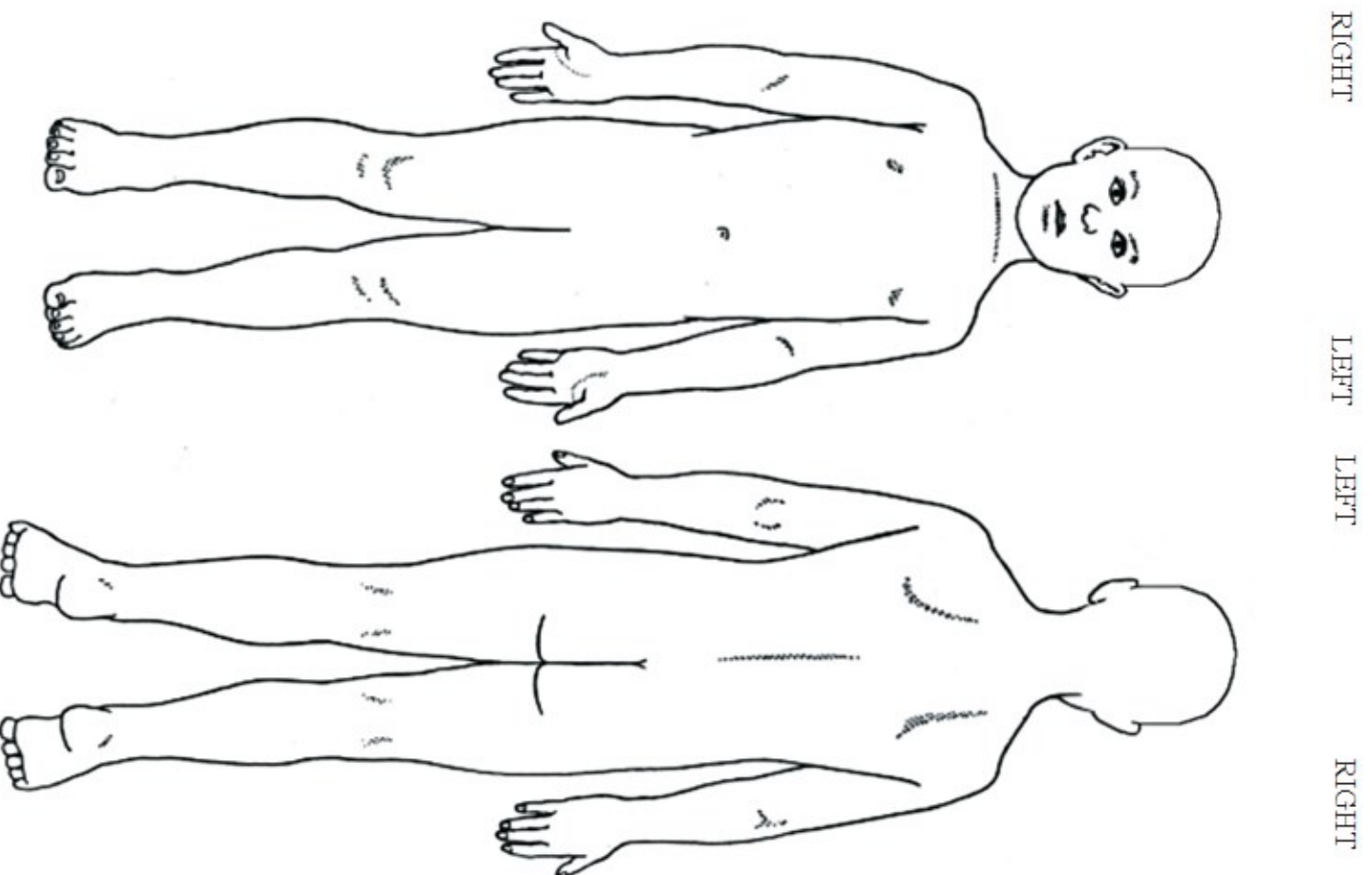


Instruction: Make a Mark on the drawings- big or small to show where you have pain.
Put a number alongside to show the severity of your pain
(0-10 see over)



Adapted from the Adolescent Paediatric Pain Tool (APPT)
Illustrations by Illustration & Design Centre UBHT
Produced by the Paediatric Pain Team

Bristol Royal Hospital for Children

The FLACC Behavioural Pain Assessment Scale

Categories	Scoring		
	0	1	2
F ace	No particular expression or smile	Occasional grimace or frown, withdrawn, disinterested	Frequent to constant quivering chin, clenched jaw
L egs	Normal position or relaxed	Uneasy, restless, tense	Kicking, or legs drawn up
A ctivity	Lying quietly, normal position moves easily	Squirming, shifting back and forth, tense	Arched, rigid or jerking
C ry	No cry, (awake or asleep)	Moans or whimpers; occasional complaint	Crying steadily, screams or sobs, frequent complaints
C onsolability	Content, relaxed	Reassured by occasional touching hugging or being talked to, distractible	Difficulty to console or comfort

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Each of the five categories is scored from 0-2, resulting in a total score between 0 and 10.

To be used for any child who is unable to report their level of pain. Please score out of ten.