

The FLACC Pain Scale can be used with infant and pediatric patients age 0-3 years, cognitively impaired patients, and those patients unable to use other scales. The words below that are bolded apply to all patients EXCEPT infant and pediatric patients. FLACC- Assess the patient in each area - total the score - evaluate the total using the 0-10 pain scale parameters.

	<b>0</b>	<b>1</b>	<b>2</b>
<b>FACE</b>	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	Occasional grimace or frown, withdrawn, disinterested, 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>
<b>LEGS</b>	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>
<b>ACTIVITY</b>	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>
<b>CRY</b>	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
<b>CONSOLABILITY</b>	<b>Calm</b> , content, relaxed, does not require consoling	Reassured by occasional touching, hugging, or talking to, distractible	Difficult to console or comfort