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# Face, Legs, Activity, Cry, Consolability Observational Tool as a Measure of Pain

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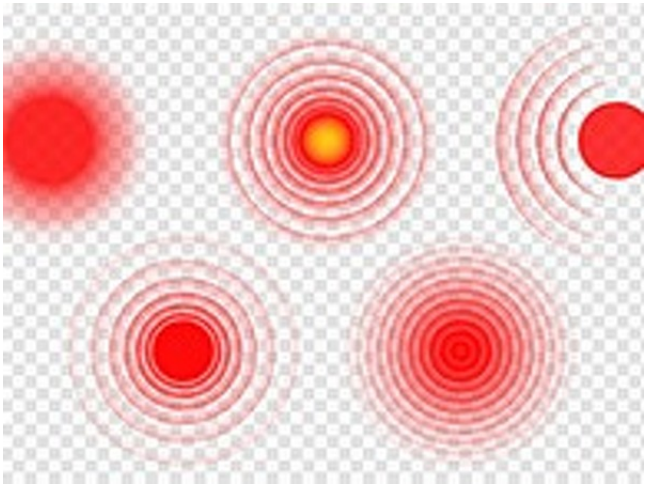

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**Category**
Content
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## OVERVIEW

- FLACC pain scale: a behavioral pain scale used to score pain
- Assist in recognizing, assessing and treating pain in vulnerable populations
- Easy to use, score and document; readily adopted into clinical practice

## BACKGROUND

Infants, children and persons with cognitively impairment frequently lack the verbal and cognitive skills necessary to report physical discomfort and pain intensity. The assessment and effective management of pain in these populations depends upon the observation and expertise of the care providers. Care providers and care takers frequently have difficulty assessing pain in these individual and this often leads to under-treatment of pain.

Researchers at the University of Michigan developed a behavioral observation tool that can be used to quantify pain behaviors in infants, young children, cognitively impaired young persons and children and adults who are intubated. The tool has been tested in these populations and found to be a reliable and valid measure pain.

Behavioral cues remain the primary indicator of pain in persons who are unable to use a self-reporting pain scale. The FLACC Pain tool incorporates five categories of behaviors. The acronym FLACC ( Face, Legs, Activity, Cry and Consolability), was developed to facilitate recall of the categories included in the tool Each category is scored on 0-2 scale and the numbers are added together which results in a total score between 0 and 10. This range is often found in other clinical pain assessment tools.

A score is obtained by reviewing the descriptions of behavior in each of the 5 categories and selecting the number that most closely matches the observed behavior. To use the scale the clinician or caregiver should observe or interact with the individual for one to five minutes. Behaviors should also be observed during routine care. It may be necessary to touch and reposition the individual to determine if pain is present with movement and to assess tension and rigidity.

The difficulty in using observations to assess pain is that there may be differences in what clinicians expect and observe. It is important to consider the patients circumstances, environment and time of the assessment. Parents and family members usually know their childs/loved ones typical behavioral response to pain and can identify behaviors unique to the individual that can be included in the assessment of pain.

Keys to the use of behavioral pain tools are to focus on the individuals behavioral presentation (at both rest and on movement or during procedures known to be painful) and to observe for changes in those behaviors with effective treatment. Increases or decreases in the number or intensity of behaviors suggest increasing or decreasing pain. However, a behavioral pain score is not the same as a self-reported pain intensity rating.

## ADDITIONAL DETAILS

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**Please note:** Each version of the FLACC also includes the Brief FLACC scale measurement as part of the standard package.

## References


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