### Self-Report Pain Assessment Chart

**General Instructions**
- Score hourly for initial 6 hours, then score routinely every 4 hours if pain score remains less than 4/10.
- Score hourly if pain score is greater than 4.

**Faces Pain Scale**: Suitable for children > 3 years:
- Get patient to point to the face that shows how much they hurt.

**Visual/Verbal Analogue Scale**: Suitable for children > 5 years: (check that they know their numbers)
- Get patient to say how much they hurt on a scale 0-10, with ‘0’ being no pain and ‘10’ being the worst pain imaginable.

<table>
<thead>
<tr>
<th>DATE/TIME (24 Hour clock)</th>
<th>PAIN SCORE (0 – 10)</th>
<th>ACTION TAKEN i.e. analgesia, changing position, drink, distraction etc.</th>
<th>REVIEW (30-60 min)</th>
<th>SIGNATURE &amp; GRADE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>1. Effective</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2. Pain gone</td>
<td></td>
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<td></td>
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<td></td>
<td>3. Some change</td>
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<td></td>
<td>4. No change/Worse</td>
<td></td>
</tr>
</tbody>
</table>
### Pain Department

**Date/Time**
(24 Hour clock)

**Pain Score**
(0 – 10)

**Action Taken**
i.e. analgesia, changing position, drink, distraction etc.

**Review (30-60 min)**
1. Effective
2. Pain gone
3. Some change
4. No change/Worse

**Signature & Grade**

CONTACT PAIN CNS (Bleep 8300) or ANAESTHETIST on-call (Bleep 8528) in the event of ongoing pain problems.