

## ABBHEY PAIN SCALE

For measurement of pain in people with dementia who cannot verbalise

Client Name:	Date of Birth:
Latest pain relief given was:	At:        hrs.

How to use scale: While observing the client, score questions 1 to 6.

<b>Q1 Vocalisation</b>				
Eg. whimpering, groaning, crying				
Absent 0	Mild 1	Moderate 2	Severe 3	Q1=
<b>Q2 Facial expression</b>				
Eg. looking tense, frowning, grimacing, looking frightened				
Absent 0	Mild 1	Moderate 2	Severe 3	Q2=
<b>Q3 Change in body language</b>				
Eg. fidgeting, rocking, guarding part of body, withdrawn				
Absent 0	Mild 1	Moderate 2	Severe 3	Q3=
<b>Q4 Behavioral change</b>				
Eg. increased confusion, refusing to eat, alteration in usual patterns				
Absent 0	Mild 1	Moderate 2	Severe 3	Q4=
<b>Q5 Physiological change</b>				
Eg. temperature, pulse or blood pressure outside normal limits, perspiring, flushing or pallor				
Absent 0	Mild 1	Moderate 2	Severe 3	Q5=
<b>Q6 Physical changes</b>				
Eg. skin tears, pressure areas, arthritis, contractures, previous injuries				
Absent 0	Mild 1	Moderate 2	Severe 3	Q6=

Add scores for 1–6 and record here			<b>Total Pain Score=</b>	
now tick the box that matches the Total Pain Score number	0–2 <b>No pain</b>	3–7 <b>Mild</b>	8–13 <b>Moderate</b>	14+ <b>Severe</b>
Finally, tick the box which matches the type of pain	Chronic		Acute	Acute on Chronic

Name of person completing the scale:			Designation:
Date:	Time:	Date uploaded to iCare:	