ALZHEIMER'S QUEENSLAND

ABBEY PAIN SCALE ASSESSMENT

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.

Q1 Vocalisation
eg whimpering, groaning, crying

Absent 0	Mild 1	Moderate 2	Severe 3	Q1=

Q2 Facial expression
eg looking tense, frowning, grimacing, looking frightened

Absent 0	Mild 1	Moderate 2	Severe 3	Q2=

Q3 Change in body language
eg fidgeting, rocking, guarding part of body, withdrawn

Absent 0	Mild 1	Moderate 2	Severe 3	Q3=

Q4 Behavioral change
eg increased confusion, refusing to eat, alteration in usual patterns

Absent 0	Mild 1	Moderate 2	Severe 3	Q4=

Q5 Physiological change
eg temperature, pulse or blood pressure outside normal limits, perspiring, flushing or pallor

Absent 0	Mild 1	Moderate 2	Severe 3	Q5=

Q6 Physical changes
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	**Total Pain Score=**			
now circle the box that matches the Total Pain Score number	0–2 **No pain**	3–7 **Mild**	8–13 **Moderate**	14+ **Severe**
Finally, circle the box which matches the type of pain	Chronic	Acute	Acute on Chronic	

Name of person completing the scale:
Designation:
Time and date assessment completed:
Signature:
Date uploaded to iCare: