

## **FLACC**

Score each item from 0-2, which will result in a total score between 0-10. Various factors might affect how children exhibit pain. Observational instruments should be interpreted within the context of the child's pain experience and with regard to any limits that may exist on his or her ability to display pain behavior.

<b>CATEGORY</b>	<b>SCORING</b>		
	0	1	2
<b>Face</b>	No particular expression or smile	Occasional grimace or frown, withdrawn, disinterested	Frequent to constant quivering chin, clenched jaw
<b>Legs</b>	Normal position or relaxed	Uneasy, restless, tense	Kicking, or legs drawn up
<b>Activity</b>	Lying quietly, normal position, moves easily	Squirming, shifting back and forth, tense	Arched, rigid or jerking
<b>Cry</b>	No cry (awake or asleep)	Moans or whimpers; occasional complaint	Crying steadily, screams or sobs, frequent complaint
<b>Consolability</b>	Content, relaxed	Reassured by occasional touching, hugging or being talked to, distractible	Difficult to console or comfort.

Reference: Merkel, S et al The FLACC: A behavioral scale for scoring postoperative pain in young children 1997 *Pediatr Nurse* 23(3), p 209-297, © Jannetti Co. Scale reprinted with permission.