

Pain Assessment IN Advanced Dementia (PAINAD) Pain Assessment Scale - MANGUM REGIONAL MEDICAL CENTER

Instructions: Observe the older person before scoring his/her behaviors. For each of the items included in the PAINAD, select the score (0, 1, 2) that reflects the current state of the persons behavior. The patient can be observed under different conditions (i.e., at rest, during a pleasant activity, during caregiving, after the administration of pain medication, etc.). Monitor changes in the total score over time and in response to treatment to determine changes in pain. Higher scores suggest greater pain severity.

Note: Behavior observation scores should be considered in conjunction with knowledge of existing painful conditions and report from an individual knowledgeable of the person and their pain behaviors. Remember that some individuals may not demonstrate obvious pain behaviors or cues.

Behavior	0	1	2	Score
Breathing	Normal	Occasional labored breathing	Noisy labored breathing	
Independent of Vocalization		Short period of hyperventilation	Long period of hyperventilation	
			Cheyne-Stokes respirations	
Negative vocalization	None	Occasional moan or groan	Repeated trouble calling out]
		Low-level speech with a negative or	Loud moaning or groaning	1
		disapproving quality	Crying [1
Facial expression	Smiling or inexpressive	Sad	Facial grimacing	
		Frightened		
		Frown		
Body Language	Relaxed	Tense	Rigid 🗆	
		Distressed pacing	Fists clenched]
		Fidgeting	Knees pulled up	1
			Pulling or pushing away]
			Striking out	
Consolability	No need to console	Distracted or reassured by voice or touch	Unable to console, distract, or reassure]
			TOTAL SCORI	

(Total scores range from 0 to 10 [based on a scale of 0 to 2 for five items], with a higher score indicating more severe pain [0="no pain" to 10="severe pain"])

Adapted from: Warden V., Hurley, AC, et al. (2003). Development and psychometric evaluation of the Pain Assessment in Advanced Dementia (PAINAD) Scale. Journal of American Medical Directors Association, 4(1):9-15.



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Item Descriptions

Breathing:

1.	Normal breathing: characterized by effortless, quiet, rhythmic (smooth) respirations.		
2.	Occasional labored breathing: characterized by episodic bursts of harsh difficult or wearing respirations		
3.	Short period of hyperventilation: characterized by intervals of rapid, deep breaths lasting a short period of time		
4.	Noisy labored breathing: characterized by negative sounding respirations on inspiration or expiration. May be loud, gurling, wheezing. Strenuous or wearing.		
5.	Long period of hyperventilation: characterized by an excessive rate and depth of respirations lasting a considerable time.		
6.	Cheyne-Stokes respirations: characterized by rhythmic waxing and waning of breathing from very deep to shallow respirations with periods of apnea.		
Negative Vocalization:			

- None: characterized by speech or vocalization that has a neutral or pleasant quality
 <u>Occasional moan or groan:</u> characterized by mournful or murmuring sounds, wails or laments. Groaning characterized by louder than usual inarticulate involuntary sounds, often abruptly beginning and ending.
 <u>Low level speech with a negative or disapproving quality:</u> characterized by muttering, mumbling, whining, grumbling, or swearing in a low volume with a complaining, sarcastic or caustic tone.
 <u>Repeated trouble calling out:</u> characterized by phrases or words being used over and over in a tone that suggests anxiety, uneasiness, or distress.
 <u>Loud moaning or groaning:</u> characterized by mournful or murmuring sounds, wails or laments in much louder than usual volume. Loud groaning characterized by louder than usual inarticulate involuntary sounds, often abruptly beginning and ending.
- 6. <u>Crying:</u> characterized by an utterance of emotion accompanied by tears. There may be sobbing or quiet weeping.

Facial Expression:

- 1. <u>Smiling or Inexpressive:</u> characterized by upturned corners of mouth, brightening of eyes and a look of pleasure or contentment. Inexpressive refers to a neutral, at ease, relaxed or blank look.
- 2. <u>Sad:</u> characterized by an unhappy, lonesome, sorrowful or dejected look. May tears in the eyes.
- 3. <u>Frightened:</u> characterized by a look of fear, alarm or heightened anxiety. Eyes appear wide open.
- 4. <u>Frown:</u> characterized by downward turn of the corners of mouth. Increased facial wrinkling in the forehead and around the mouth may appear.
- 5. <u>Facial grimacing:</u> characterized by a distorted, distressed look. Brow is more wrinkled as is the area around the mouth. Eyes may be squeezed shut.



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Body Language:

1.	Relaxed: characterized by a calm, restful, mellow appearance. Seems to be taking it easy.
2.	Tense: characterized by a strained, apprehensive or worried appearance. Jaw may be clenched (exclude any fractures)
3.	Distressed pacing: characterized by activity that seems unsettled. May be a fearful, worried or distressed element present. Rate may by faster or slower.
4.	Fidgeting: characterized by restless movement. Squirming about or wiggling. Repetitive touching, tugging or rubbing body parts may also be observed.
5.	Rigid: characterized by stiffening of body. Arms and/or legs are tight and inflexible. Trunk may appear straight and unyielding (exclude any fractures).
6.	Fist clenched: characterized by tightly closed hands. May be open and closed repeatedly or held tightly closed
7.	Knees pulled up: characterized by flexing legs and drawing knees up toward chest. Overall troubled appearance (exclude any contractures)
8.	Pulling or pushing away: characterized by resistiveness upon approach to care. Person is trying to escape by yanking or wrenching free or shoving person away.
9.	Striking out: characterized by hitting, grabbing, punching, biting, or other form of personal assault.

Consolability:

- 1. <u>No need to console:</u> characterized by a sense of well-being. Person appears content.
- 2. <u>Distracted or reassured by voice or touch</u>: characterized by a disruption in the behavior when the person is spoken to or touched. Behavior stops during period of interaction with no indication that the person is at all distressed.
- 3. <u>Unable to console, distract or reassure:</u> characterized by the inability to sooth the person or stop a behavior with words or actions. No amount of comforting, verbal or physical, will alleviate the behavior.