

**(REVISED) FLACC Scale  
SCORING**

<b>Categories</b>	<b>0</b>	<b>1</b>	<b>2</b>
<b>Face</b>	No particular expression or smile.	Occasional grimace or frown, withdrawn, disinterested, <b>Sad, appears worried.</b>	Frequent to constant quivering chin, clenched jaw, <b>distressed looking face, expression of fright/ panic.</b>
<b>Legs</b>	Normal position or relaxed; <b>usual tone and motion to limbs.</b>	Uneasy, restless, tense, <b>occasional tremors.</b>	Kicking, or legs drawn up, <b>marked increase in spasticity, constant tremors, jerking.</b>
<b>Activity</b>	Lying quietly, normal position, moves easily, <b>regular, rhythmic respirations.</b>	Squirming, shifting back and forth, tense, <b>tense/guarded movements, mildly agitated, shallow/ splinting respirations, intermittent sighs</b>	Arched, rigid or jerking, <b>severe agitation, head banging, shivering, breath holding, gasping, severe splinting.</b>
<b>Cry</b>	No cry (awake or asleep)	Moans or whimpers: occasional complaint, <b>occasional verbal outbursts, constant grunting</b>	Crying steadily, screams or sobs, frequent complaints, <b>repeated outbursts, constant grunting.</b>
<b>Consolability</b>	Content, relaxed	Reassured by occasional touching, hugging, or being talked to: distractible	Difficult to console or comfort, <b>pushing caregiver away, resisting care or comfort measures.</b>

Each of the five categories (**F**) Face; (**L**) Legs; (**A**) Activity; (**C**) Cry; (**C**) Consolability is scored from 0-2, which results in a total score between zero and ten.

References:

Merkel, S. et al. The FLACC: A Behavioural Scale for Scoring Postoperative Pain in Young Children, Pediatric Nurse 23(3): 293-297, 1997. Copyright: Jannetti Co. University of Michigan Medical Centre.

**Malviya, S., Vopel-Lewis, T. Burke, Merkel, S., Tait, A.R. (2006). The revised FLACC Observational Pain Tool: Improved Reliability and Validity for Pain Assessment in Children with Cognitive Impairment. (Pediatric Anesthesia 16: 258-265).**