# Pain Assessment in Advanced Dementia (PAINAD) Scale

	0	1	2	Score
<b>Breathing</b> Independent of vocalization	Normal	Occasional labored breathing. Short period of hyperventilation.	Noisy labored breathing. Long period of hyperventilation. Cheyne-Stokes respirations.	
Negative Vocalization	None	Occasional moan or groan.  Low level speech with a  negative or disapproving quality.	Repeated troubled calling out. Loud moaning or groaning. Crying.	
Facial Expression	Smiling or inexpressive	Sad. Frightened. Frown.	Facial grimacing.	
Body Language	Relaxed	Tense. Distressed pacing. Fidgeting.	Rigid. Fists clenched, Knees pulled up. 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
		touch.		istract or reassure.

# **S**coring:

- 1-3 Mild pain
  - Provide comfort measures (i.e., non-pharmacologic approaches such as repositioning or distraction or a mild analgesic such as acetaminophen)
- 4-6 Moderate pain
- 7-10 Moderate to Severe pain

Pain that warrants stronger analgesia, such as an opioid, as well as comfort measures

# Pain Assessment IN Advanced Dementia PAINAD -- Item Definitions

#### **Breathing:**

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

#### **Negative Vocalization**

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

#### **Facial Expression**

- 1. Smiling or inexpressive: upturned corners of mouth, brightening of eyes, a look of pleasure or contentment. Inexpressive refers to neutral, at ease, relaxed, or blank look.
- 2. Sad: unhappy, lonesome, sorrowful, or dejected look. There may be tears in the eyes.
- 3. Frightened: a look of fear, alarm or heightened anxiety. Eyes appear wide open.
- 4. Frown: a downward turn of the corners of the mouth; increased facial wrinkling in the forehead, around the mouth
- 5. Facial grimacing: a distorted, distressed look. The brow is more wrinkled as is the area around the mouth. Eyes may be squeezed shut.

## **Body Language**

- 1. Relaxed: a calm, restful, mellow appearance. The person seems to be taking it easy.
- 2. Tense: a strained, apprehensive, or worried appearance. The jaw may be clenched. (Excludes any contractures).
- 3. Distressed pacing: activity that seems unsettled. There may be a fearful, worried, or disturbed element present. The rate may by faster or slower.
- 4. <u>Fidgeting, restless movement</u>. Squirming about or wiggling in the chair may occur. The person might be hitching a chair across the room. Repetitive touching, tugging, or rubbing body parts can also be observed.
- 5. Rigid: stiffening of the body. The arms and/or legs are tight and inflexible. The trunk may appear straight and unyielding. (Exclude any contractures).
- 6. Fists clenched: tightly closed hands. They may be opened and closed repeatedly or held tightly shut.
- 7. Knees pulled up: flexing the legs and drawing the knees up toward the chest. An overall troubled appearance. (Exclude any contractures).
- 8. Pulling or pushing away: resistiveness upon approach or care. The person is trying to escape by yanking or wrenching free or shoving you away.
- 9. Striking out. hitting, kicking, grabbing, punching, biting, or other form of personal assault.

## Consolability

- I. No need to console: a sense of well being. The person appears content.
- 2. <u>Distracted or reassured by voice or touch</u>: a disruption in the behavior when the person is spoken to or touched. The behavior stops during the period of interaction with no indication that the person is at all distressed.
- 3. <u>Unable to console, distract or reassure</u>: 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.

Warden, V., Hurley, A. & Volicer, L. (2003). Development and psychometric evaluation of the pain assessment in advanced dementia (PAINAD) scale. |AMDA, 4(1), 9-15.

Horgas, A., & Miller, L. (2008). Pain assessment in people with dementia. American Journal of Nursing, 108(7), 62-70.

Developed by and shared with permission of Interior Health