

PAIN ASSESSMENT IN ADVANCED DEMENTIA SCALE (PAINAD) INSTRUMENT

Items	Score = 0	Score = 1	Score = 2	Score
Breathing Independent of vocalization	<ul style="list-style-type: none"> Normal 	<ul style="list-style-type: none"> Occasional labored breathing Short period of hyperventilation 	<ul style="list-style-type: none"> Noisy labored breathing Long period of hyperventilation Cheyne-Stokes respirations 	
Negative vocalization	<ul style="list-style-type: none"> None 	<ul style="list-style-type: none"> Occasional moan or groan Low-level speech with a negative or disapproving quality 	<ul style="list-style-type: none"> Repeated troubled calling out Loud moaning or groaning Crying 	
Facial expression	<ul style="list-style-type: none"> Smiling or inexpressive 	<ul style="list-style-type: none"> Sad Frightened Frown 	<ul style="list-style-type: none"> Facial grimacing 	
Body language	<ul style="list-style-type: none"> Relaxed 	<ul style="list-style-type: none"> Tense Distressed pacing Fidgeting 	<ul style="list-style-type: none"> Rigid Fists clenched Knees pulled up Pulling or pushing away Striking out 	
Consolability	<ul style="list-style-type: none"> No need to console 	<ul style="list-style-type: none"> Distracted or reassured by voice or touch 	<ul style="list-style-type: none"> Unable to console, distract, or reassure 	
TOTAL SCORE				

Note. Total scores range from 0 to 10 (based on a scale of 0 to 2 for each of five items), with a higher score indicating more behaviors indicating pain (0 = no observable pain to 10 = highest observable pain).

The content on this page is from the following source: Warden, V., Hurley, A.C., & Volker, L. (2003). Development and psychometric evaluation of the Pain Assessment in Advanced Dementia (PAINAD) scale. *Journal of the American Medical Directors Association, 4*, 9-15.