

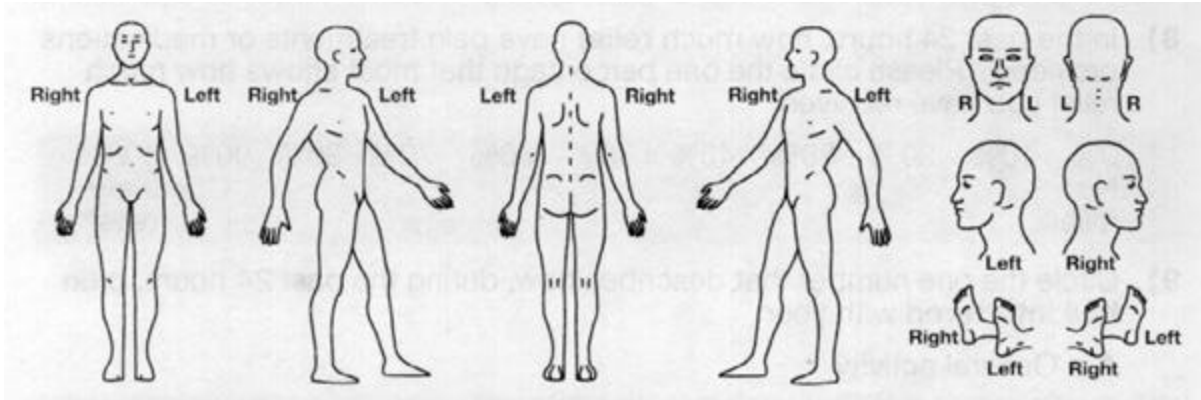
# Initial Pain Assessment Tool

Date: \_\_\_\_\_

Patient's name: \_\_\_\_\_ Age: \_\_\_\_\_ Room: \_\_\_\_\_

Diagnosis: \_\_\_\_\_ Physician: \_\_\_\_\_  
Nurse: \_\_\_\_\_

**I. Location:** Patient or nurse marks drawing



II. **Intensity:** Patient rates the pain. Scale used: \_\_\_\_\_  
Present: \_\_\_\_\_  
Worst pain gets: \_\_\_\_\_  
Best pain gets: \_\_\_\_\_  
Acceptable level of pain: \_\_\_\_\_

III. **Quality:** (Use patient's own words, e.g., prick, ache, burn, throb, pull, sharp)  
\_\_\_\_\_

IV. **Onset, duration, variations, rhythms:** \_\_\_\_\_  
\_\_\_\_\_

V. **Manner of expressing pain:** \_\_\_\_\_

VI. **What relieves the pain?** \_\_\_\_\_

VII. **What causes or increases the pain?** \_\_\_\_\_

VIII. **Effects of pain:** (Note decreased function, decreased quality of life.)

Accompanying symptoms (e.g., nausea) \_\_\_\_\_

Sleep \_\_\_\_\_

Appetite \_\_\_\_\_

Physical activity \_\_\_\_\_

Relationship with others (e.g., irritability) \_\_\_\_\_

Emotions (e.g., anger, suicidal, crying) \_\_\_\_\_

Concentration \_\_\_\_\_

Other \_\_\_\_\_

IX. **Other comments:** \_\_\_\_\_

X. **Plan:** \_\_\_\_\_  
\_\_\_\_\_

**Note:** May be duplicated and used in clinical practice  
Source: McCaffery and Beebe, 1989. Used with permission.