

EPIC Documentation of Bolton Pain Assessment Tool

(use for all patients with cognitive impairment/communication difficulties)

Pain Assessment

☰ Pain Assessment

☰ Pain Score

Pain Type

Pain Location

Pain Orientation

Pain Radiating Towards

Pain Descriptors

Pain Frequency

Pain Onset

Clinical Progression

Effect of Pain on Daily Activities

Patient's Stated Pain Goal

Patient Entered Pain Score

Pain Interventions

Response to Interventions

☰ Multiple Pain Sites

☰ Unable to Self-Report Pain Scales

	NO PAIN 0	MILD 1	MODERATE 2	SEVERE 3	SCORE
VOCALISATION	None	Occasional moan or groan	Low level speech with a negative or disapproving quality	Repeatedly crying out, loud moaning or crying	
FACIAL EXPRESSION		Looking tense	Sad, Frowning	Grimacing and looks frightened	
CHANGE IN BODY LANGUAGE	None	Tense, fidgeting	Guarding part of the body	Withdrawn, rigid, fists clenched. Knees pulled up	
BEHAVIOURAL CHANGE	None	Increased confusion	Refusing to eat, alterations in usual pattern	Pulling or pushing away, striking out	
PHYSIOLOGICAL CHANGE	Normal	Occasional laboured breath, increased heart rate	Hyperventilation, increased heart rate and BP	Change in pulse BP, respiratory rate and perspiring, flushed or pallor	
PHYSICAL CHANGES	None	Skin tears	Pressure sores, arthritis	Post surgery, trauma	
TOTAL SCORE:					
Please transpose pain score onto NEWs observation chart. (Equivalent numbers to FHFT standard verbal descriptor scale are given in brackets)					
	0-2 = NO PAIN (0)	3-8 = MILD PAIN (1)	9-13= MODERATE PAIN (2)	14+ = SEVERE PAIN (3)	

Pain Assessment

Select single option (F5)

0-3

Unable to self-report

Bolton Pain Assessment

Vocalisation	
Facial Expression	
Changed Body Language	
Behavioural Change	
Physiological Change	
Physical Changes	
Bolton Pain Score	
Bolton Pain Scale	