

Pain Assessment Checklist for Seniors with Limited Ability to Communicate (PACSLAC)

Met toestemming van de auteurs

Bron: Fuchs-Lacelle, S. & Hadjistavropoulos, T. (2004). Development and preliminary validation of the pain assessment checklist for seniors with limited ability to communicate (PACSLAC). *Pain Manag.Nurs.*, 5, 37-49.

**Pain Assessment Checklist for Seniors with Limited Ability to Communicate  
(PACSLAC)**

DATE: \_\_\_\_\_ TIME ASSESSED: \_\_\_\_\_

NAME OF PATIENT/RESIDENT: \_\_\_\_\_

**PURPOSE:**

This checklist is used to assess pain in patients/residents who have dementia and are unable to communicate verbally.

**INSTRUCTIONS:**

Indicate with a checkmark, which of the items on the PACSLAC occurred during the period of interest.

Scoring the Sub-Scales is derived by counting the checkmarks in each column.

To generate a Total Pain Score sum all four Sub-Scale totals.

Comments:

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| <b>Facial Expressions</b>                                    | <b>Present</b> | <b>Activity/Body Movement</b>   | <b>Present</b> |
|--|----------------|---|----------------|
| Grimacing  |                | Uncooperative/Resistant to care   |                |
| Sad Look   |                | Guarding sore area  |                |
| Tighter face   |                | Touching/holding sore area  |                |
| Dirty look   |                | Limping   |                |
| Change in eyes (squinting, dull, bright, increased movement) |                | Clenched fist   |                |
| Frowning   |                | Going into foetal position  |                |
| Pain expression  |                | Stiff/Rigid   |                |
| Grim face  |                | <b>Social/Personality/Mood</b>  |                |
| Clenching teeth  |                | Physical aggression (e.g., pushing people and/or objects, scratching others, hitting others, striking, kicking) |                |
| Wincing  |                | Verbal aggression   |                |
| Opening mouth  |                |   |                |
| Creasing forehead  |                |   |                |
| Screwing up nose   |                |   |                |
| <b>Activity/Body Movement</b>                                |                |   |                |
| Fidgeting  |                | Not wanting to be touched   |                |
| Pulling Away   |                | Not allowing people near  |                |
| Flinching  |                | Angry/Mad   |                |
| Restless   |                | Throwing things   |                |
| Pacing   |                | Increased confusion   |                |
| Wandering  |                | Anxious   |                |
| Trying to leave  |                | Upset   |                |
| Refusing to move   |                | Agitated  |                |
| Thrashing  |                | Cranky/Irritable  |                |
| Decreased activity   |                | Frustrated  |                |
| Refusing medications   |                | <b>Other*</b>   |                |
| Moving slow  |                | Pale Face   |                |
| Impulsive Behaviour (e.g., repetitive movements)             |                | Flushed, red face   |                |
|  |                | Teary eyed  |                |
|  |                | Sweating  |                |

| <b>Other continued</b>               | <b>Present</b> |                               |
|--------------------------------------|----------------|-------------------------------|
| Shaking/Trembling                    |                | Sub-scale Scores:             |
| Cold & clammy                        |                | Facial Expressions _____      |
| Changes in sleep (please circle):    |                | Activity/Body Movement _____  |
| Decreased sleep or                   |                | Social/Personality Mood _____ |
| Increased sleep during day           |                | Other _____                   |
| Changes in Appetite (please circle): |                | <b>Total Checklist Score</b>  |
| Decreased appetite or                |                |                               |
| Increased appetite                   |                |                               |
| Screaming/Yelling                    |                |                               |
| Calling out (i.e. for help)          |                |                               |
| Crying                               |                |                               |
| A specific sound or vocalisation     |                |                               |
| For pain ‘ow’, ouch’                 |                |                               |
| Moaning and groaning                 |                |                               |
| Mumbling                             |                |                               |
| Grunting                             |                |                               |

\* “Other” sub-scale includes physiological changes, eating and sleeping changes and vocal behaviours.

This version of the scale does not include the items “sitting and rocking”, “quiet/withdrawn”, and “vacant blank stare” as these were not found to be useful in discriminating pain from non-pain states.

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Pain Assessment Checklist for Seniors with Limited Ability to Communicate (PACSLAC)

De Nederlandse versie (24 items) werd opgehaald op 14 augustus 2009 van  
<http://www.pijnverpleegkundigen.nl/Pacslac-D.pdf>

Nederlandse versie van de Pain Assessment Checklist for Seniors with Severe Dementia (Pacslac-D)\*

Datum: \_\_\_\_\_ Tijdstip beoordeling: \_\_\_\_\_

Naam patiënt/ bewoner: \_\_\_\_\_

**Doel:**

Deze checklijst wordt gebruikt om pijn te beoordelen bij patiënten met dementie die geen of slechts beperkte mogelijkheden hebben te communiceren

**Instructies:**

Kruis aan welke items van de PACSLAC voorkomen tijdens de periode waarin u geïnteresseerd bent

De score per subschaal kan worden berekend door de het aantal kruisjes per subschaal op te tellen

Door alle subschaal scores op te tellen berekend u de totale schaal score

**Opmerkingen:**

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| Gelaat   | Aanwezig |
|--|----------|
| Uitdrukking van pijn   |          |
| Een specifiek geluid of uiting van pijn 'au' of 'oef'  |          |
| Wenkbrauwen fronsen  |          |
| Grimas   |          |
| Rimpels in het voorhoofd   |          |
| Kreunen en kermen  |          |
| Verandering in de ogen (scheel kijken, mat, helder, meer bewegingen)   |          |
| Pijnlijke plek aanraken en vasthouden  |          |
| Pijnlijke plek beschermen  |          |
| Terugtrekken   |          |
| <b>Verzet/ afweer</b>  |          |
| Verbale agressie   |          |
| Fysieke agressie (bijv. mensen en/of voorwerpen wegduwen, anderen krabben, anderen slaan, stompen, schoppen) |          |
| Geërgerd (geagiteerd)  |          |
| Achteruitdeinzen   |          |
| Niet aangeraakt willen worden  |          |
| Niet-coöperatief/weerstand tegen zorgverlening   |          |
| <b>Sociaal emotioneel/stemming</b>   |          |
| Nors/prikkelbaar   |          |
| Schreeuwen/krijsen   |          |
| Donkere blik   |          |
| Verdrietige blik   |          |
| Geen mensen in de buurt laten komen  |          |
| Ontsteld (ontdaan)   |          |
| Blozend, rood gelaat   |          |
| Rusteloos  |          |

**Subschaal scores:**

Gelaat \_\_\_\_\_

Verzet/ Afweer \_\_\_\_\_

Sociaal emotioneel/ stemming \_\_\_\_\_

**Totale score:** \_\_\_\_\_

\* P4CSL4C is oorspronkelijk ontwikkeld door Fuchs-Lacelle and Hadjistavropoulos, 2004  
P4CSL4C-D werd vertaald, aangepast en getest door de Universiteit Maastricht (Zwakhalen et al., 2006)