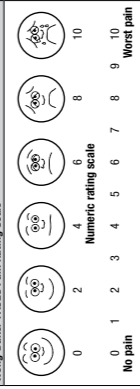


Victorian Children's Tool for Observation and Response

FLACC Scale © University of Michigan			
Face	0 No particular expression or smile	1 Occasional grimace or frown, withdrawn, disinterested	2 Frequent to constant frown, clenched jaw, quivering chin
Legs	0 Normal position or relaxed	1 Uneasy, restless, tense	2 Kicking or legs drawn up
Activity	0 Lying quietly, normal position, moves easily	1 Squirming, shifting back and forth, tense	2 Arched, rigid or jerking
Cry	0 No cry (awake or asleep)	1 Moans or whimpers occasional complaints	2 Crying steadily, screams or sobs, frequent complaints
Consolability	0 Content, relaxed	1 Reassured by occasional touching, hugging or "talking to". Distractable	2 Difficult to console or comfort

Wong-Baker FACES Pain Rating Scale



Level of Consciousness	Level of Sedation (UMSS – University of Michigan Scoring System)
(A) Alert	0 = Awake and alert
(V) Verbal	1 = Minimally sedated: may appear tired/sleepy, responds to verbal conversation and/or sound
(P) Pain	2 = Moderately sedated: somnolent/sleeping, easily roused with tactile stimulation or simple verbal command
(U) Unresponsive	3 = Deep sedation: deep sleep, rousable only with deep or physical stimulation
	4 = Unrousable

Assessment of Respiratory Distress			
	Mild	Moderate	Severe
Airway	<ul style="list-style-type: none"> • Stridor on exertion/crying 	<ul style="list-style-type: none"> • Some stridor at rest 	<ul style="list-style-type: none"> • Stridor at rest
Behaviour and feeding	<ul style="list-style-type: none"> • Normal • Talks in sentences 	<ul style="list-style-type: none"> • Some/intermittent irritability • Difficulty talking/crying • Difficulty feeding or eating 	<ul style="list-style-type: none"> • Increased irritability and/or lethargy • Looks exhausted • Unable to talk or cry • Unable to feed or eat
Respiratory rate	<ul style="list-style-type: none"> • Mildly increased 	<ul style="list-style-type: none"> • Respiratory rate in orange zone 	<ul style="list-style-type: none"> • Respiratory rate in purple zone • Increased or markedly reduced respiratory rate as the child tires
Accessory muscle use	<ul style="list-style-type: none"> • Mild intercostal and suprasternal recession 	<ul style="list-style-type: none"> • Moderate intercostal and suprasternal recession • Nasal flaring 	<ul style="list-style-type: none"> • Marked intercostal, suprasternal and sternal recession
Oxygen	<ul style="list-style-type: none"> • No oxygen requirement 	<ul style="list-style-type: none"> • Mild hypoxemia corrected by oxygen • Increasing oxygen requirement 	<ul style="list-style-type: none"> • Hypoxemia may not be corrected by oxygen
Other		<ul style="list-style-type: none"> • May have brief apnoeas 	<ul style="list-style-type: none"> • Gasping, grunting • Extreme pallor, cyanosis • Increasingly frequent or prolonged apnoeas

Note, not all respiratory assessment features are relevant to all conditions