

equivalent to a 0 to 10 metric system. The Wong-Baker FACES Pain Rating Scale consists of six cartoon faces ranging from a smiling face for “no pain” to a tearful face for “worst pain.” The child is asked to choose a face that describes his or her pain. The Wong-Baker FACES Pain Rating Scale is able to differentiate pain from fear in school-aged children ([Garra, Singer, Domingo, et al, 2013](#)). The Wong-Baker FACES Pain Rating Scale is the most preferred and widely used in children's hospitals across the United States and has been translated into many languages ([Oakes, 2011](#)).

For children 8 years old and older, the Numeric Rating Scale (NRS), specifically the 0 to 10 scale, is most widely used in clinical practice because it is easy to use. The Visual Analogue Scale (VAS) uses descriptors along a line that provides a highly subjective evaluation of a pain or other symptom. VASs are often used with older children and adults. Although the VAS requires a higher degree of abstraction than the NRS, the PedIMMPACT group recommends the VAS because of the lack of supportive evidence through psychometric studies with the NRS in children and adolescents.

The number of pain measures available for use in infants, young children, and adolescents has increased dramatically and adds a layer of complexity to the assessment of pain in children. The current trend supports a common metric for measurement of pain in children. Most instruments consist of 0 for no pain to a range of 4 to 160 for the top anchors in pain measures. A pain score of 5 may mean a lot of pain (if a 0 to 5 scale is used) or very little (if a 0 to 100 scale is used), and it may not be clearly specified which score corresponds to which scale. Other health care providers who do not specialize in pediatric pain may be confused by the available instruments and scoring methods and may not be able to determine the effectiveness of interventions by the pain score documented. An advantage to using a common metric is that a certain score may be considered as the point at which an intervention is required, or a point at which relief may be considered effective. The 0 to 10 system as the common metric was reported to be preferred by health care providers and would make pain scores easier to read, interpret, and integrate into research and practice.

Multidimensional Measures