CPOT SCALE

The Critical Care Observation Tool is another scale based on behavioural reactions. It has been shown to have a similar performance to the BPS in ICU patients.

The CPOT requires running through a series of steps:

Step 1:

Observe the patient for at least one minute to obtain a baseline value of the CPOT.

Step 2:

The patient should be observed during nociceptive procedures (endotracheal suctioning, position changes, wound dressings) to detect any change in the patient's behaviour to pain.

Step 3:

The patient should be evaluated before and at the peak effect of an analgesic agent to assess if the treatment was effective in relieving pain.

Step 4

To rate the CPOT, the patient should be given the highest score observed during the observation period. Step 5:

The patient should be given a score for each behaviour included in the CPOT and muscle tension should be evaluated last, especially when the patient is at rest because the stimulation of touch (passive flexion and extension of the arm) may lead to behavioural reactions.

Facial	No muscular tension observed	Relaxed, neutral	0
Expression		neidaed, neditur	<u> </u>
	Presence of frowning, brow lowering, orbit tightening and levator contraction	Tense	1
	All of the above facial movements plus eyelid tightly closed	Grimacing	2
Body Movements	Does not move at all (does not necessarily mean absence of pain)	Absence of movements	0
	Slow, cautious movements, touching or rubbing the pain site, seeking attention through movements	Protection	1
	Pulling tube, attempting to sit up, moving limbs/thrashing, not following commands, striking at staff, trying to climb out of bed	Restlessness	2
Muscle tension	No resistance to passive movements	Relaxed	0
Evaluation by passive flexion and extension of upper extremities	Resistance to passive movements	Tense, rigid	1
	Strong resistance to passive movements, inability to complete them	Very tense or rigid	2
Compliance with the ventilator (incubated patients)	Alarms not activaed, easy ventilation	Tolerating ventilator or movement	0
	Alarms stop spontaneously	Coughing but tolerating	1
OR	Asynchrony: blocking ventilation, alarms frequently activated	Fighting ventilator	2
Vocalisation (extubated patients)	Talking in normal tone or no sound	Talking in normal tone or no sound	0
	Sighing, moaning	Sighing, moaning	1
	Crying out, sobbing	Crying out, sobing	2

