

DATE/TIME						
<b>Crying</b> - Characteristic cry of pain is high pitched. 0 – No cry or cry that is not high-pitched 1 - Cry high pitched but baby is easily consolable 2 - Cry high pitched but baby is inconsolable						
<b>Requires O<sub>2</sub> for SaO<sub>2</sub> &lt; 95%</b> - Babies experiencing pain manifest decreased oxygenation. Consider other causes of hypoxemia, e.g., oversedation, atelectasis, pneumothorax) 0 – No oxygen required 1 – < 30% oxygen required 2 – > 30% oxygen required						
<b>Increased vital signs (BP* and HR*)</b> - Take BP last as this may awaken child making other assessments difficult 0 – Both HR and BP unchanged or less than baseline 1 – HR or BP increased but increase in < 20% of baseline 2 – HR or BP is increased > 20% over baseline.						
<b>Expression</b> - The facial expression most often associated with pain is a grimace. A grimace may be characterized by brow lowering, eyes squeezed shut, deepening naso-labial furrow, or open lips and mouth. 0 – No grimace present 1 – Grimace alone is present 2 – Grimace and non-cry vocalization grunt is present						
<b>Sleepless</b> - Scored based upon the infant's state during the hour preceding this recorded score. 0 – Child has been continuously asleep 1 – Child has awakened at frequent intervals 2 – Child has been awake constantly						
<b>TOTAL SCORE</b>						

### CRIES Pain Scale

- Used for infants who are preverbal
- Used for neonatal postoperative pain
- Assess for crying, requirement of oxygen, increased HR and BP, facial expressions, and sleepless state
- A score of 4 or higher indicates need for pain management