CRIES Pain Scale

Full name of neonate: _____ **Gender:** _____ **Date of assessment:** _____

Coding tip for CRIES

Crying	The characteristic cry of pain is *high pitched.* • If no cry or cry which is not high pitched **score 0** • If cry high pitched but baby is easily consoled **score 1** • If cry is high pitched and baby is inconsolable **score 2**
Requires O$_2$ for Sat >95%	Look for *changes* in oxygenation. Babies experiencing pain manifest decreases in oxygenation as measure by TCO$_2$ or oxygen saturation. • If no oxygen is required **score 0** • If <30% O$_2$ is required **score 1** • If >30% is required **score 2**
Increased vital signs	*Note: Take blood pressure last as this may wake child causing difficulty with other assessments.* Use baseline pre-op parameters from a non-stressed period. Multiply baseline HR x 0.2 than add this to baseline HR to determine the HR which is 20% over baseline. Do likewise for BP. Use mean BP. • If HR and BP are both unchanged or less than baseline **score 0** • If HR or BP is increased but increase is <20% **score 1** • If either one is increased >20% over baseline **score 2**
Expression	The facial expression most often associated with pain is a grimace. This may be characterized by: brow lowering, eyes squeezed shut, deepening of the naso-labial furrow, open lips, and mouth. • If no grimace is present **score 0** • If grimace alone is present **score 1** • If grimace and non cry vocalization grunt is present **score 2**
Sleepless	This parameter is scored based upon the infant's state during the hour preceding this recorded score. • If the child has been continuously asleep **score 0** • If he/she has awakened at frequent intervals **score 1** • If he/she has been awake constantly **score 2**

Assess the five parameters below and record the score for each date/time of observation:	Date and time				
Crying: The characteristic cry of pain is high-pitched. • If no cry or cry which is not high pitched **score 0**. • If cry high pitched but baby is easily consoled **score 1**. • If cry is high pitched and baby is inconsolable **score 2**.					
Requires O$_2$ for Sat > 95%: Look for changes in oxygenation. Babies experiencing pain manifest decreases in oxygenation as measured by TCO$_2$ or oxygen saturation. • If no oxygen is required **score 0**. • If <30% O$_2$ is required **score 1**. • If >30% is required **score 2**. Consider other causes of changes in oxygenation: atelectasis, pneumothorax, over sedation, etc.)					
Increased vital signs: Use baseline pre-op parameters from a non-stressed period. Multiply baseline HR x 0.2 than add this to baseline HR to determine the HR which is 20% over baseline. Do likewise for BP, use mean BP. • If HR and BP are both unchanged or less than baseline **score 0.** • If HR or BP is increased but increase is <20% of baseline **score 1.** • If either one is increased >20% over baseline **score 2**. *Note: Take blood pressure last as this may wake child causing difficulty with other assessments.*					
Expression: The facial expression most often associated with pain is a grimace. This may be characterized by: brow lowering, eyes squeezed shut, deepening of the naso-labial furrow, open lips and mouth. • If no grimace is present **score 0**. • If grimace alone is present **score 1**. • If grimace and non cry vocalization grunt is present **score 2.**					
Sleepless: This parameter is scored based upon the infant's state during the hour preceding this recorded score. • If the child has been continuously asleep score 0. • If he/she has awakened at frequent intervals score 1. • If he/she has been awake constantly score 2.					
Total score:					

Scoring and interpretation

The CRIES scale is used for infants > than or = 38 weeks of gestation. Characteristics of crying, oxygen requirement, changes in vital signs, facial expression, and sleep state are scored. A maximal score of 10 is possible.

If the CRIES score is > 4, further pain assessment should be undertaken, and analgesic administration is indicated for a score of 6 or higher.

Reference

Krechel, S. W., & Bildner, J. (1995). CRIES: a new neonatal postoperative pain measurement score: Initial testing of validity and reliability. *Pediatric Anesthesia, 5*(1), 53–61. https://doi.org/10.1111/j.1460-9592.1995.tb00242.x