Item	Score			
Vocal Reaction	Not at	Just a	Fairly	Very
	all	little	Often	Often
Moaning, whining, whimpering (fairly soft)	0	1	2	3
Crying (moderately loud)	0	1	2	3
Screaming or yelling (very loud)	0	1	2	3
Emotional Reaction				
Not cooperating, cranky, irritable, unhappy	0	1	2	3
Agitated, being difficult to distract, not able to satisfy or pacify	0	1	2	3
Facial Expression				
Furrowed eyebrows, raising eyebrows	0	1	2	3
A change in eyes including (squinting of eyes, eyes opened wide, eye frowning)	0	1	2	3
Turning down of mouth, not smiling	0	1	2	3
Movements of the lips and tongue (lips puckering up, tight, pouting, quivering, teeth grinding, tongue pushing)	0	1	2	3
Body Language				
Moving more or less	0	1	2	3
Stiff spastic, tense, rigid	0	1	2	3
Protective Reaction				
Gesturing to or touching part of the body that hurts	0	1	2	3
Protecting, defending, or guarding part of the body that hurts	0	1	2	3
Flinching or moving the body part away, being sensitive to touch	0	1	2	3
Moving the body in a specific way to show pain (head back, arms down, curls up)	0	1	2	3
Physiological Reaction				
Change in facial color	0	1	2	3
Respiratory irregular responses (breath holding or gasping)	0	1	2	3
TOTAL (0-51) Greater score means greater pain				

## Non-Communicating Adult Pain Checklist\*

\*Lotan, M., Moe-Nilssen, R., Ljunggren, A., Strand, L. (2009) Reliability of the Non-Communicating Adult Pain Checklist (NCAPC), assessed by different groups of health workers. *Research in Developmental Disabilities, 30,* 735-745.

The total score ranges from 0 (no pain observed) to 51 (maximal duration of all pain behaviours observed).