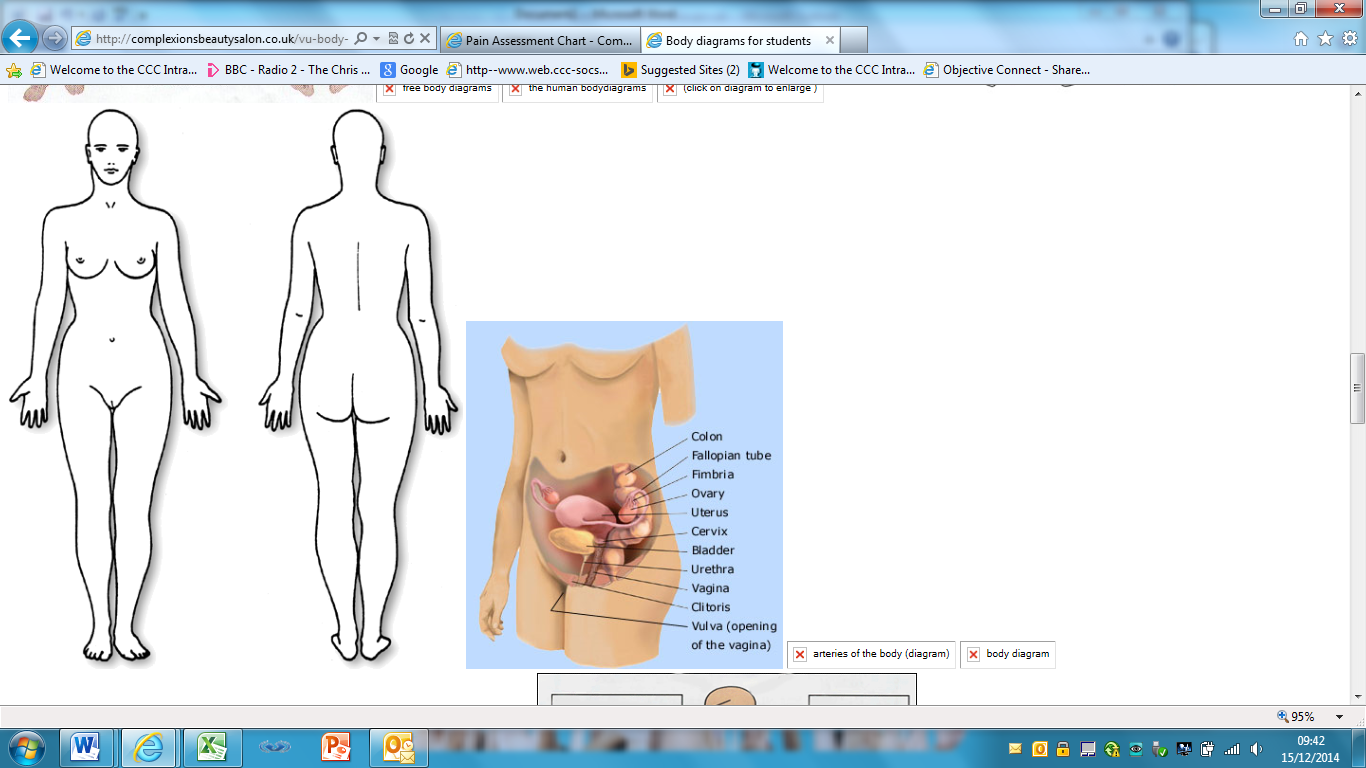
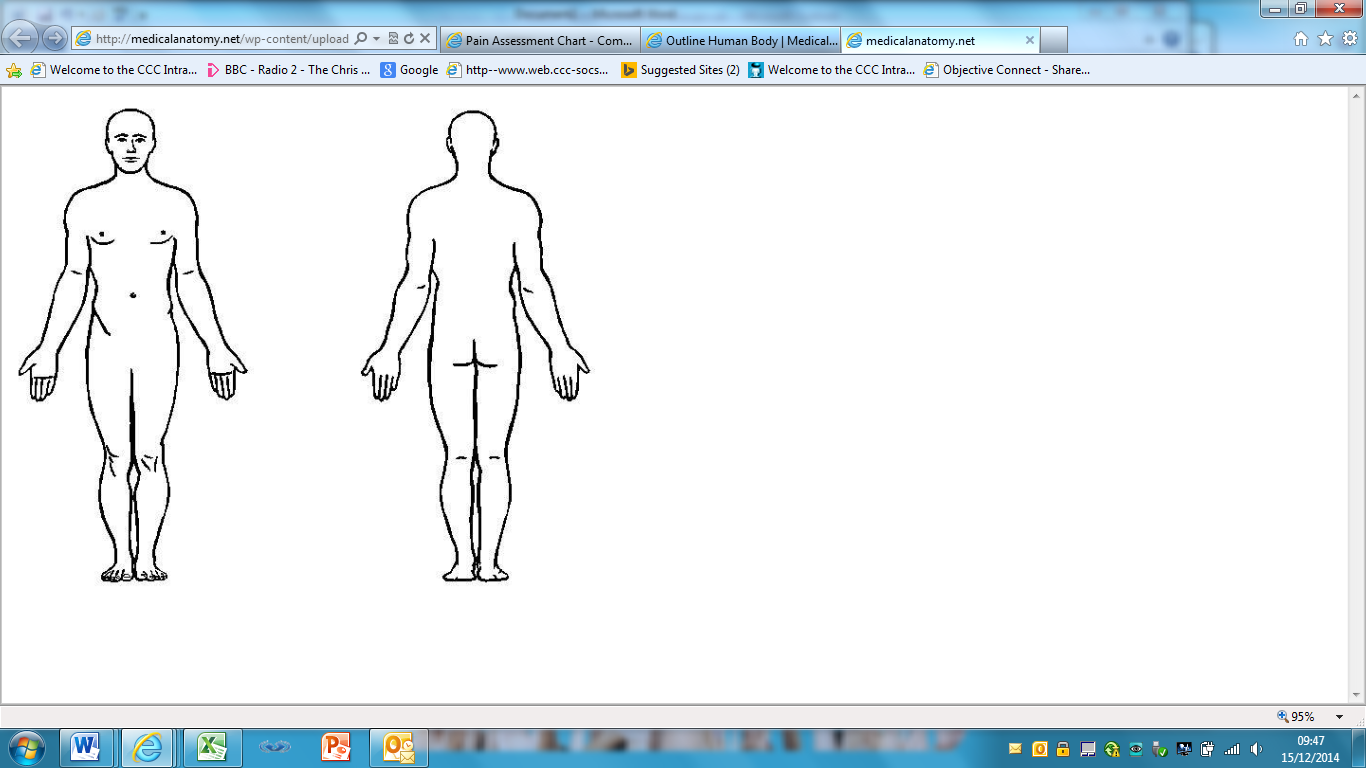
\*To be used to capture/record possibly/suspected pain for service users in line with their pain assessment tool, where pain is suspected the supervisor on duty must be notified\*

Name of Service User: D.O.B:

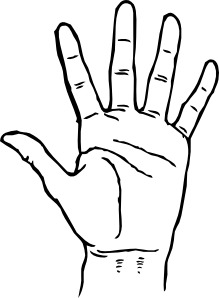
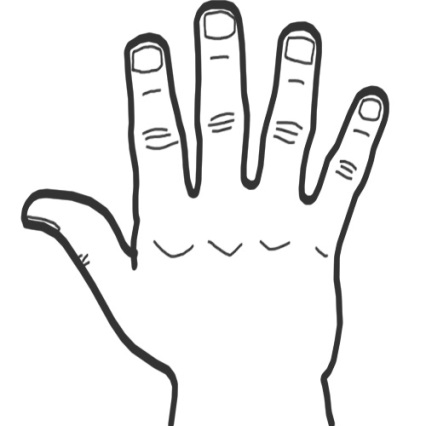


Male / Female (Circle) Establishment:

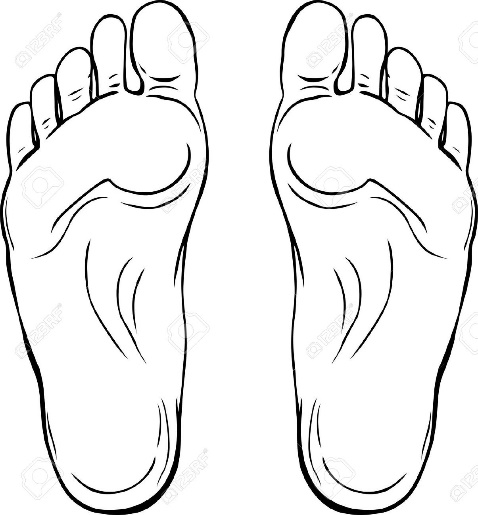
GP Name: Date & Time observed:

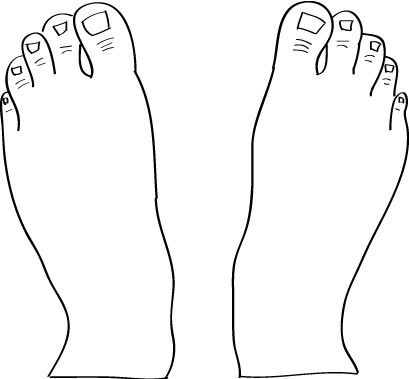
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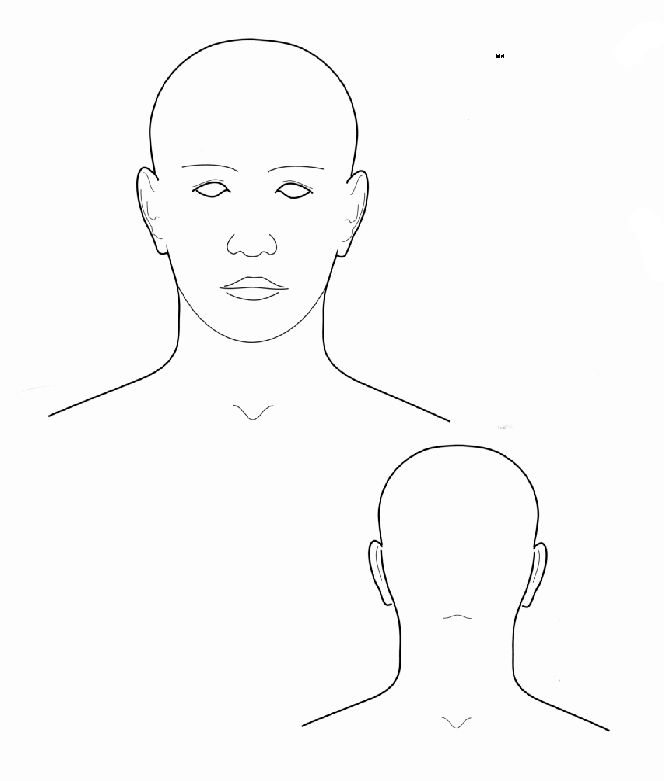


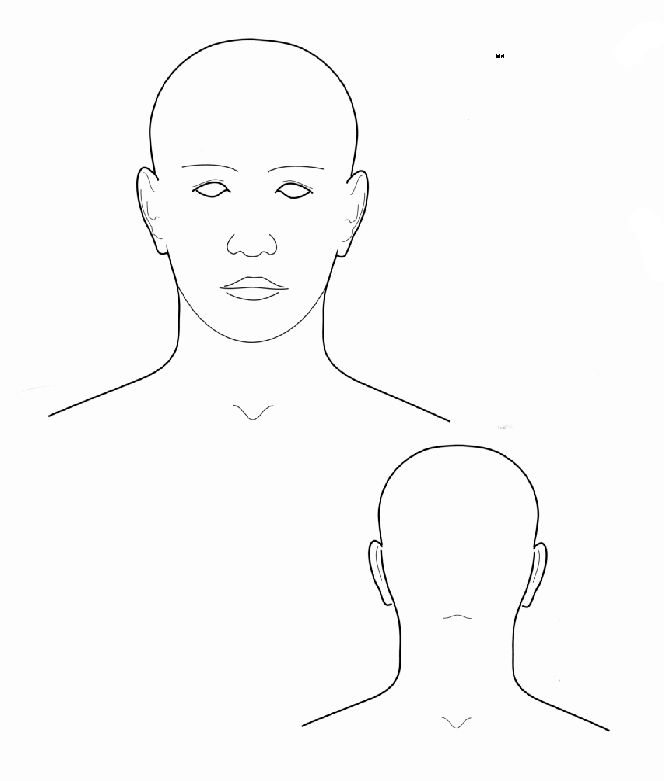
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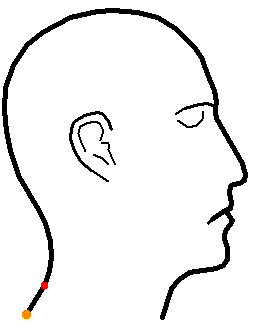
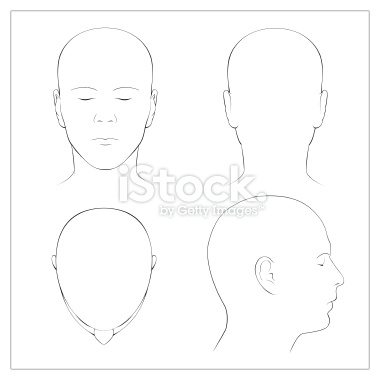


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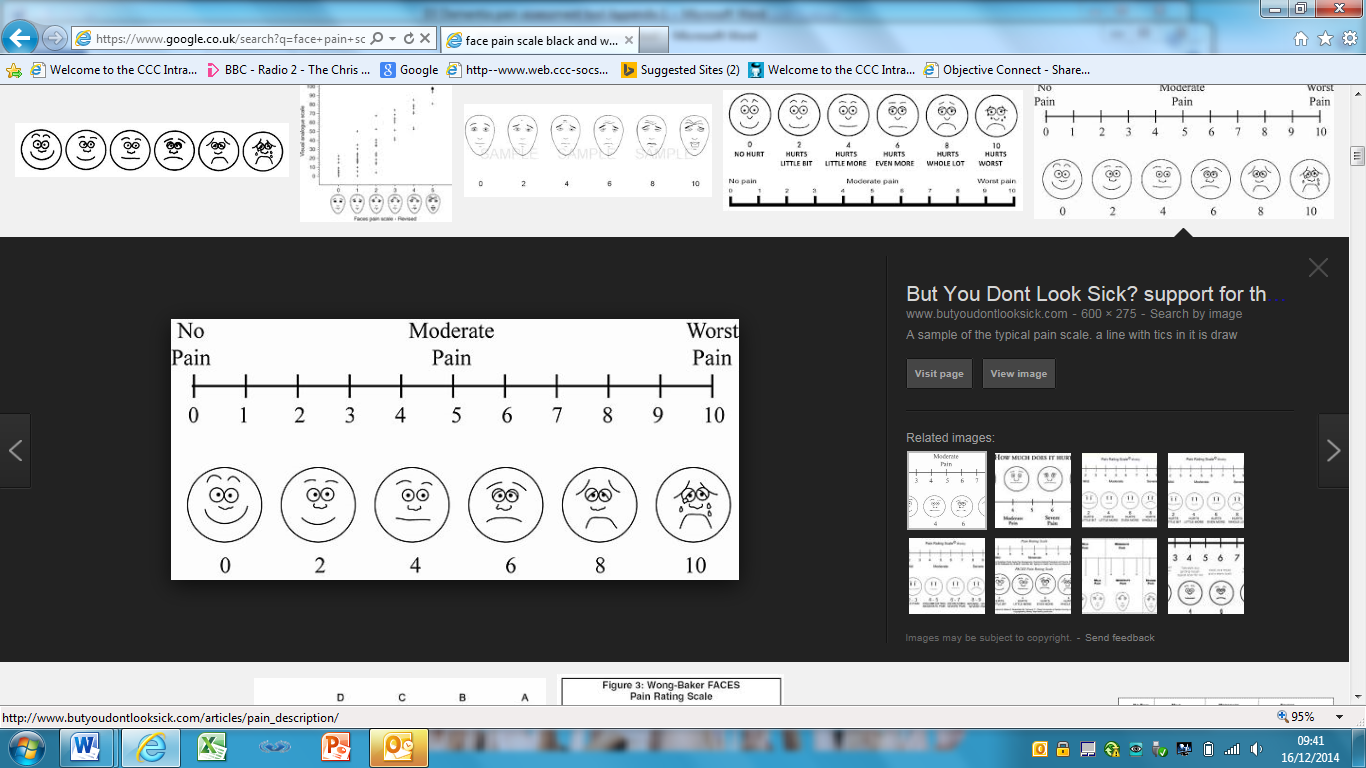
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Is the service user able to recognise the scale and images?



Yes / No / Partially

Name of person completing form:

Reported to:

Actions:

**Ensure this has been recorded in service user daily diary and has been reported to manager / supervisor.**