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graph TD
    Q1[Can the person communicate successfully?] -- YES --> B1[Ask whether person has pain at rest or on movement. Use alternative descriptors such as sore, hurting or aching. Observe for potential indicators of pain.]
    Q1 -- NO --> B2[Observe for potential indicators of pain:  
• Facial expressions  
• Verbalisations/vocalisations  
• Body movements  
• Altered interpersonal interactions  
• Changes in activity patterns or routines  
• Mental status changes  
• Physiological changes.]
    
    B1 -- IS PAIN REPORTED/APPEARENT? -- YES --> B3[Assess pain intensity using a simple scale such as a verbal rating scale or numeric rating scale. Ask the person to show where their pain is (pointing or pain map).]
    B1 -- IS PAIN REPORTED/APPEARENT? -- NO --> B4[NO IMMEDIATE ACTION NEEDED  
Continue to monitor]
    B1 -- IS PAIN REPORTED/APPEARENT? -- RELUCTANT to complain of pain --> B4
    
    B3 -- IS PAIN PRESENT? -- YES --> B5[Take a detailed pain history  
• Examine the patient  
• Treat cause  
• Treat symptoms if cause is not identifiable  
• Consider referral.]
    B3 -- IS PAIN PRESENT? -- NO --> B6[NO IMMEDIATE ACTION NEEDED  
Continue to monitor]
    
    B2 -- Evidence of morbidity that may be causing pain? -- YES --> B7[TREAT MORBIDITY  
Do potential pain indicators persist?]
    B2 -- Evidence of morbidity that may be causing pain? -- NO --> B8[Attempt to interpret meaning of behaviour with help of caregivers familiar with the person. Provide individualised care.  
• Ensure basic comfort needs are met  
• Provide reassurance if behaviour suggests fear  
• Consider providing analgesics prior to movement.  
DO POTENTIAL PAIN INDICATORS PERSIST?]
    
    B7 -- DO POTENTIAL PAIN INDICATORS PERSIST? -- YES --> B9[CONSIDER EMPIRICAL ANALGESIC TRIAL OR OTHER PAIN-RELIEVING INTERVENTION  
Monitor response carefully]
    B7 -- DO POTENTIAL PAIN INDICATORS PERSIST? -- NO --> B10[NO IMMEDIATE ACTION NEEDED  
Continue to monitor and treat as required]
    
    B8 -- DO POTENTIAL PAIN INDICATORS PERSIST? -- YES --> B9
    B8 -- DO POTENTIAL PAIN INDICATORS PERSIST? -- NO --> B11[NO IMMEDIATE ACTION NEEDED  
Continue to monitor]

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Can the person communicate successfully?

- YES:** Ask whether person has pain at rest or on movement. Use alternative descriptors such as sore, hurting or aching. Observe for potential indicators of pain.
- IS PAIN REPORTED/APPEARENT?**
 - YES:** Assess pain intensity using a simple scale such as a verbal rating scale or numeric rating scale. Ask the person to show where their pain is (pointing or pain map).
 - IS PAIN PRESENT ?**
 - YES:** Take a detailed pain history
 - Examine the patient
 - Treat cause
 - Treat symptoms if cause is not identifiable
 - Consider referral.
 - NO:** NO IMMEDIATE ACTION NEEDED Continue to monitor
 - RELUCTANT to complain of pain:** NO IMMEDIATE ACTION NEEDED Continue to monitor
 - NO:** NO IMMEDIATE ACTION NEEDED Continue to monitor
- NO:** Observe for potential indicators of pain
 - Facial expressions
 - Verbalisations/vocalisations
 - Body movements
 - Altered interpersonal interactions
 - Changes in activity patterns or routines
 - Mental status changes
 - Physiological changes.

Evidence of morbidity that may be causing pain?

- YES:** TREAT MORBIDITY Do potential pain indicators persist?
 - YES:** CONSIDER EMPIRICAL ANALGESIC TRIAL OR OTHER PAIN-RELIEVING INTERVENTION Monitor response carefully
 - NO:** NO IMMEDIATE ACTION NEEDED Continue to monitor and treat as required
- NO:** Attempt to interpret meaning of behaviour with help of caregivers familiar with the person. Provide individualised care
 - Ensure basic comfort needs are met
 - Provide reassurance if behaviour suggests fear
 - Consider providing analgesics prior to movement.**DO POTENTIAL PAIN INDICATORS PERSIST?**
 - YES:** CONSIDER EMPIRICAL ANALGESIC TRIAL OR OTHER PAIN-RELIEVING INTERVENTION Monitor response carefully
 - NO:** NO IMMEDIATE ACTION NEEDED Continue to monitor