

Initial Questionnaire

Name:

Date:



**PAIN QUESTIONNAIRE  
FOR CHILDREN AND  
ADOLESCENTS**



**CHILD VERSION**

German Paediatric Pain Centre  
Children`s and Adolescent`s Hospital, Datteln  
Witten/Herdecke University  
Dr. Friedrich-Steiner-Str. 5  
45711 Datteln

Fon: 0049 2363 975 180  
Fax: 0049 2363 975 181

E-Mail: [info@deutsches-kinderschmerzzentrum.de](mailto:info@deutsches-kinderschmerzzentrum.de)  
Web: [www.deutsches-kinderschmerzzentrum.de](http://www.deutsches-kinderschmerzzentrum.de)  
[www.facebook.com/DeutschesKinderschmerzzentrum](https://www.facebook.com/DeutschesKinderschmerzzentrum)

Pain Questionnaire for Children and Adolescents  
Child Version - Initial, Version 3.0

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**Hi,**

We would like to ask you a few things about your pain. With your answers you help us to better understand your pain.

If you do not understand one question, just ask an adult. Let's get started!

1. DATE:

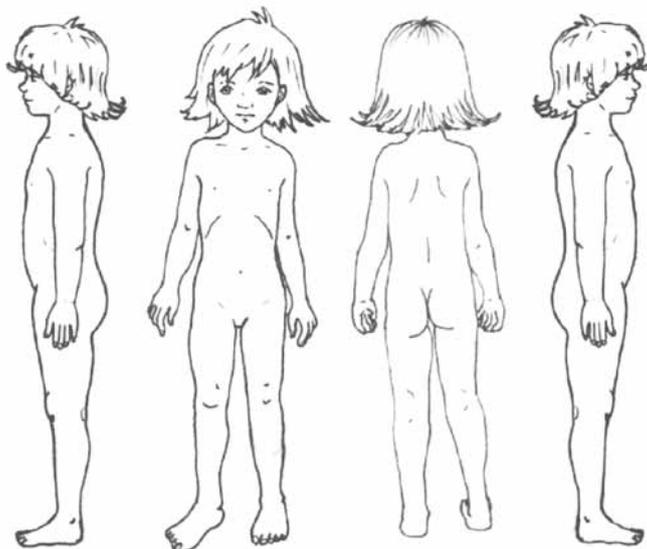
2. YOUR NAME:

3. YOUR AGE:

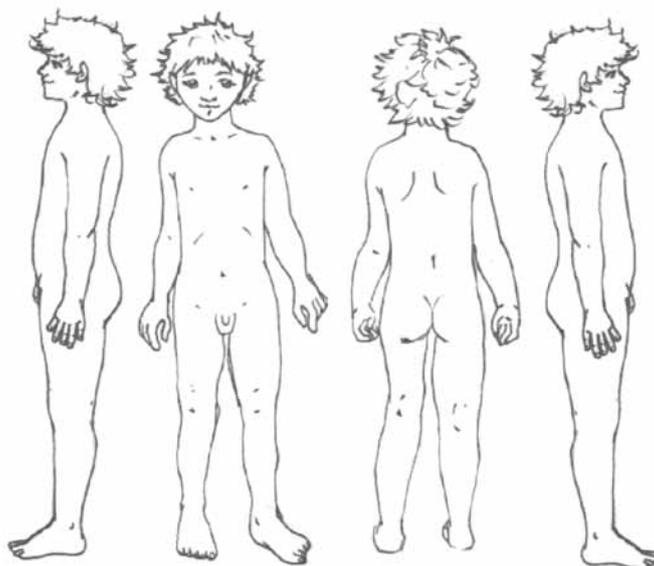
4. PLEASE MARK („X“) THE AREA(S) THAT ARE PAINFUL.

5. PLEASE ALSO DRAW A CIRCLE („○“) AROUND THE AREA THAT HURTS THE MOST. THAT IS WHAT WE CALL THE MAIN PAIN LOCATION

GIRLS



BOYS



6. DO YOU HAVE **PERMANENT PAIN** (THAT MEANS, THE PAIN IS **ALWAYS THERE AND NEVER GONE**)?

yes, my pain is always there and never gone.

no, my pain is sometimes there and sometimes gone.

**FILLING OUT THE QUESTIONS WITH THE FACES - HOW DOES IT WORK?**

The faces show how much something hurts. The first face, on the very left side, shows that it does not hurt at all. It means you have no pain. The other faces show that it hurts more and more up to the last face, on the very right side, which shows that it hurts very much.

In the following we would like to learn a bit more about your **main pain** (the one you marked with a circle („○”) in the body diagram).

**7. HOW STRONG WAS YOUR STRONGEST MAIN PAIN IN THE PAST 7 DAYS?  
PLEASE MARK THE FACE THAT FITS BEST. ONLY MARK ONE FACE!**



**8. WHEN YOU WERE EXPERIENCING THE MAIN PAIN, HOW STRONG WAS THIS PAIN MOSTLY DURING THE PAST 7 DAYS?  
PLEASE MARK THE FACE THAT FITS BEST. ONLY MARK ONE FACE!**



**9. HOW DOES YOUR PAIN FEEL?**

	Yes	No
a) My pain is deep inside me and is pressing (dull)	<input type="radio"/>	<input type="radio"/>
b) My pain pricks like a needle (spiky/stabbing)	<input type="radio"/>	<input type="radio"/>
c) My pain occurs all of a sudden	<input type="radio"/>	<input type="radio"/>
d) My pain beats like my heart (pulsating)	<input type="radio"/>	<input type="radio"/>
e) My pain burns like a fire or like a stinging nettle	<input type="radio"/>	<input type="radio"/>
f) When I am in pain everything tightens (crampy)	<input type="radio"/>	<input type="radio"/>

Or does it feel different? How exactly?

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10. WHERE DO YOU THINK YOUR PAIN IS COMING FROM OR WHAT THE REASON FOR YOUR PAIN IS?

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11. WHAT DO YOU DO WHEN YOU ARE IN PAIN?

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12. WHAT DO YOUR PARENTS DO WHEN YOU ARE IN PAIN?

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PLEASE DRAW A PICTURE OF YOUR PAIN OR WRITE DOWN WHAT YOU THINK ABOUT YOUR PAIN.

**THANK YOU!**

