

Modified Objective Pain Score (MOPS)

Overview: Wilson and Doyle used a modification of the Objective Pain Score (OPS) to assess pain in children. It is intended for evaluation of post-operative pain and can be used by the child's parents.

Age of children studied: 2 to 11 years of age

Parameters used in score:

(1) crying

(2) movement

(3) agitation

(4) posture

(5) verbal

This differs from the OPS of Broadman et al by substituting posture assessment for blood pressure.

Criteria	Finding	Points
crying	none	0
	consolable	1
	not consolable	2
movement	none	0
	restless	1
	thrashing	2
agitation	asleep	0
	calm	0
	mild	1
	hysterical	2
posture	normal	0
	flexed	1
	holds injury site	2
verbal	asleep	0
	no complaint	0
	complains but cannot localize	1
	complains and can localize	2

where:

- Table 1 in Wilson and Doyle under posture have "holds groin/throat". Children in study had either hernia repair or tonsillectomy.

objective pain score = SUM(points for all 5 parameters)

Interpretation:

- minimum score: 0
- maximum score: 10
- The higher the score the greater the pain experience for the child.

Limitations:

- The score would appear to have some limits for use in preverbal children but could be modified for this population.
- Physicians tend to give slightly lower scores than parents.

References:

Wilson GAM Doyle E. Validation of three paediatric pain scores for use by parents. *Anaesthesia*. 1996; 51: 1005-1007.