



# Edmonton Symptom Assessment Scale (ESAS) Tool

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ Completed By: \_\_\_\_\_

Please circle a number that best describes how you feel:

0 1 2 3 4 5 6 7 8 9 10  
←-----→  
*No pain* *Worst possible pain*

0 1 2 3 4 5 6 7 8 9 10  
←-----→  
*Not tired* *Very tired*

0 1 2 3 4 5 6 7 8 9 10  
←-----→  
*No nausea* *Very nauseous*

0 1 2 3 4 5 6 7 8 9 10  
←-----→  
*Not depressed* *Very depressed*

0 1 2 3 4 5 6 7 8 9 10  
←-----→  
*Calm* *Very anxious*

0 1 2 3 4 5 6 7 8 9 10  
←-----→  
*Not drowsy* *Very drowsy*

0 1 2 3 4 5 6 7 8 9 10  
←-----→  
*Normal appetite* *No appetite*

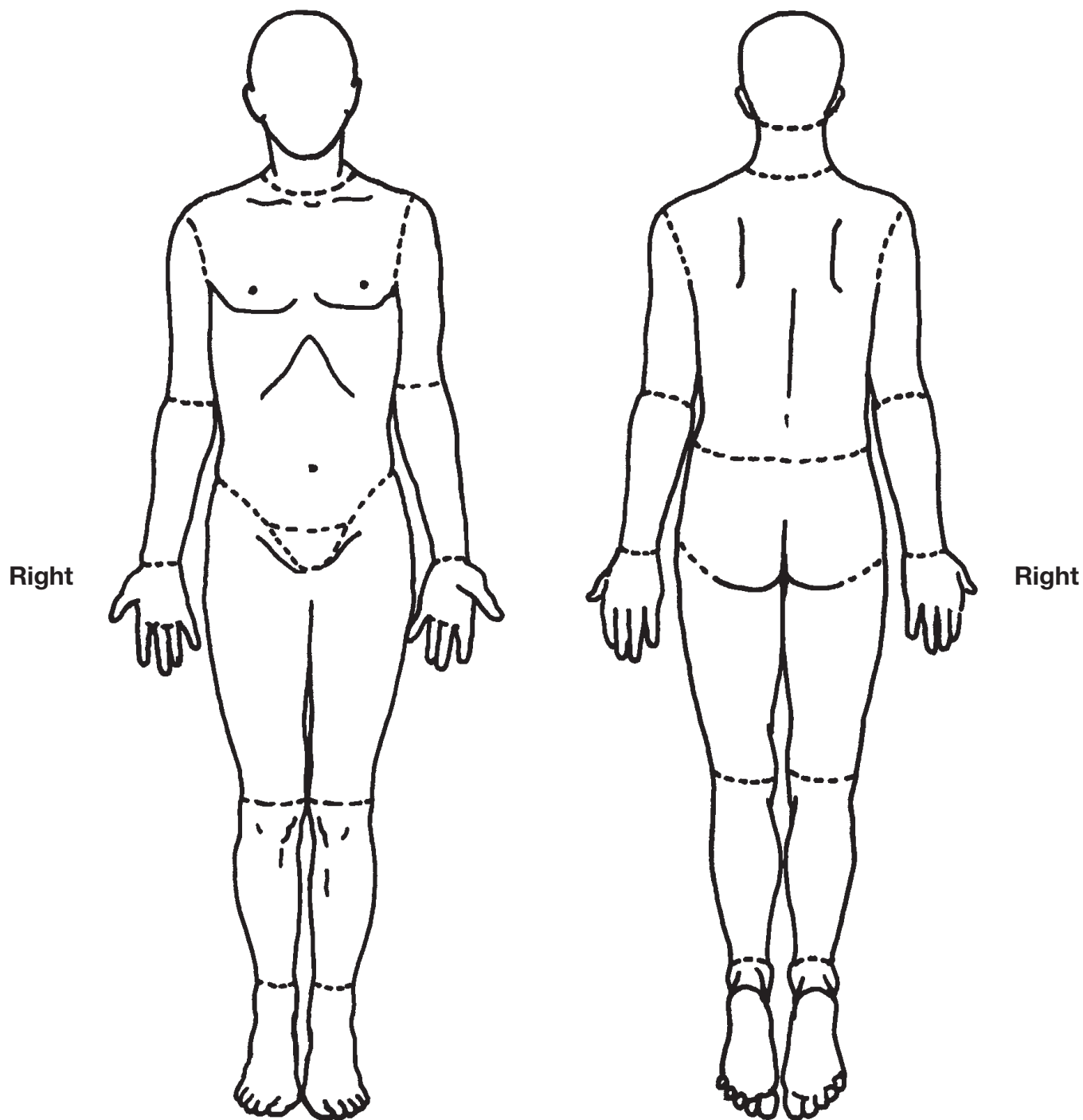
0 1 2 3 4 5 6 7 8 9 10  
←-----→  
*Best feeling of well-being* *Worst possible feeling of well-being*

0 1 2 3 4 5 6 7 8 9 10  
←-----→  
*No shortness of breath* *Very short of breath*

0 1 2 3 4 5 6 7 8 9 10  
←-----→  
*Other problem*



Please mark on these pictures where you feel pain or discomfort.



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# Edmonton Symptom Assessment Scale (ESAS)

The Edmonton Symptom Assessment Scale (ESAS) is a valid and reliable tool to assist in the assessment of nine common symptoms experienced by cancer patients. The ESAS is one of the key tools used by Saint Elizabeth Health Care for Oncology and Palliative Care clients. The original tool was developed by the Regional Palliative Care Program, Capital Health in Edmonton, Alberta.

## PURPOSE OF THE ESAS

This scale is designed to help assess pain, tiredness, nausea, depression, anxiety, drowsiness, appetite, well-being, and shortness of breath. The blank scale can be used to assess “other problems” as needed. Each symptom’s severity at the time of assessment is rated from 0 to 10; 0 meaning the symptom is absent and 10 being the worst possible severity.

The ESAS was designed so you or your family/caregiver could self-assess symptoms, and use this tool to better understand your symptoms. Your opinion of the severity of your own symptoms is the gold standard for symptom assessment.

The ESAS provides a clinical profile of symptom severity over time as well as a context for understanding symptoms. However, it is not a complete assessment in itself. For comprehensive symptom management, the ESAS must be used as one part of a holistic clinical assessment.

## HOW TO DO THE ESAS

Take a moment to reflect on your symptoms and choose the most appropriate number to indicate where the symptom lands on the scale. You can then write it onto the ESAS Log.



Some symptoms may be harder to vocalize or understand. Below are similar words that may help you better understand the symptom.

- ∞ **Depression** – Feeling sad or blue most of the time
- ∞ **Anxiety** – Feeling nervous or restless
- ∞ **Tiredness** – Having lower energy but not necessarily tired
- ∞ **Drowsiness** – Feeling sleepy
- ∞ **Well-being** – Reflect on your overall comfort, both physical and otherwise. Truthfully answer the question “How are you?”

If you are in pain, the Body Diagram can be used to find out where you hurt specifically.





## WHO SHOULD COMPLETE THE ESAS

Ideally, each person fills out their own ESAS. However, if needed it should be completed with assistance by the caregiver (a family member, friend) or a health professional closely involved with your care. If you cannot participate in the symptom assessment, the ESAS is completed by the caregiver or professional.

The method in which the ESAS is completed must be indicated on the client log as follows: by client, caregiver assisted, by caregiver, or by health professional.

### NOTE:

*When the caregiver or professional completes the ESAS alone, the subjective symptom scales are left blank (i.e. tiredness, depression, anxiety, and well-being) while the caregiver assesses the remaining symptoms as objectively as possible (i.e. pain is assessed based on knowledge of pain behaviours, appetite is interpreted as the absence or presence of eating, nausea as the absence or presence of retching or vomiting, and shortness of breath as laboured or accelerated breaths that appear to cause the patient distress).*

## WHEN TO DO THE ESAS

The ESAS should be completed at every visit to the doctor. It is good practice to complete the ESAS at the same time of day, prior to your scheduled visit. The ESAS should only be completed on a daily basis for those receiving more than one nursing visit per day; however, there may be a symptom(s) requiring reassessment more than once a day. For example, if your pain is at a 10 on the morning visit, you can call your doctor and they may suggest some tools to better manage the symptom. The case manager authorizes visits twice a day for pain control, and at the second visit you reassess the pain.

## WHERE TO DOCUMENT THE ESAS

The ESAS is then transcribed onto the Monthly ESAS/PPS Data Collection Form in the Saint Elizabeth.

*Permission to use tool granted by: Regional Palliative Care Program, Capital Health Region, Edmonton, Alberta, 2004. Additional acknowledgement to Kingston Integrated Palliative Care Project, for allowing us to use their user friendly documents as a guideline, 2004.*



First Nations, Inuit  
& Métis Program