



## Table 1. Comparison of Delirium-Assessment Tools

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Tool	Advantages	Disadvantages	Additional comments
Confusion Assessment Method diagnostic algorithm (short CAM) <sup>1</sup>	Quick, accurate, and well known; used in clinical and research settings	Does not measure delirium severity; varying sensitivity depending on training of clinician	4 items; requires supplemental testing; sensitivity rates improve with training
Clinical Assessment of Confusion-A (CAC-A) <sup>2</sup>	Easy to use, requires little training	Low sensitivity; ratings influenced by time spent with patient <sup>3</sup>	Checklist of 25 behaviors
Delirium Index <sup>4</sup>	Does not require information from family, staff, or chart; measures severity; differentiates delirium with dementia from delirium without dementia	Takes 10 minutes to complete	7 items
Memorial Delirium Assessment Scale (MDAS) <sup>5</sup>	Rates the severity of delirium	Takes 10 minutes to complete; low sensitivity to detect mild cases	10-item scale for the hourly measurement of delirium severity in cancer patients
NEECHAM Confusion Scale <sup>6</sup>	Observational	Takes 10 minutes to complete; requires verbal response; can be tiring for patients; does not differentiate dementia from delirium	9 items
Nursing Delirium Screening Scale (Nu-DESC) <sup>7</sup>	Quick observational scale	Tested primarily in oncology settings	5 items
Delirium Rating Scale (DRS) <sup>8</sup>	Widely used; measures delirium severity	Doesn't measure fluctuation over a 24-hour period	10 items

### REFERENCES

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