**Supplemental Table 26. The Relationship Between RASS and Positive Delirium Assessments**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Study** | **RASS -2** | | | **RASS 0 to -1** | | |
|  | **#**  **assessments** | **# delirium detection positive** | **Frequency %** | **# assessments** | **# delirium detection positive** | **Frequency %** |
| Svenningsen  2013 [1] | 471A | 301 | 64 | 9441B | 2065 | 22 |
| Haenngi M  2013 [2] | 92C  (96)C | 90  (88)C | 98  (92%)D | 232  (228)D | 125  (116)D | 31  (29)D |
| Gusmao  2014 [3] | 100 | 80 | 80 | 896 | 146 | 16 |
| Patel  2014 [4] | 124 | 119 | 98 | 1019 | 259 | 25 |
| **Total** | **883** | **678** | **77** | **11,816** | **2711** | **23** |

A530 of 1001 assessments at RASS -2 were characterized as Unable To Assess (UTA)

B1184 of 10,626 assessments at RASS -1 to 0 were characterized as UTA

CData combined RASS -2 and -3.

DDelirium assessments in parentheses used ICDSC; all others used CAM-ICU

**References**

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