

Table 1. Diagnostic algorithm for DSM-V delirium

DSM-V criteria	Test to be performed or information needed	DSM-V criteria fulfilled?	
		YES	NO
A: <u>Disturbance in attention</u> (i.e., reduced ability to direct, focus, sustain, and shift attention) and awareness (reduced orientation to the environment).	<p><u>TEST</u>: 4As test- Months of the year in reverse order</p> <p>Cut off (definition of inattention): unable to reach July.</p> <p><u>Observations (documented in medical record)</u>: Distractibility. Tendency to lose the tread in conversation. RASS. OSLA.</p>		
B: The disturbance <u>develops</u> over a short period of time (usually hours to a few days), represents a change from baseline attention and awareness and tends to fluctuate in severity during the course of the day.	<p>Information documented in the medical record from patients carers, nurses or doctors;</p> <p>i.e. documented changes in the patients mental state, altered consciousness, sleep-wake cycle disturbances, variability in presentation of these symptoms.</p> <p>4As test: “acute change or fluctuating course”?</p>		
C: An <u>additional disturbance in cognition</u> (i.e. memory deficit, disorientation, language, visuospatial ability, or perception).	<p><u>Information from the medical record</u>: Orientation to time, place and person. 4As test: AMT4. Cut off ≥ 2 mistakes or untestable.</p> <p>Any documented episodes of hallucinations/illusions, perceptual disturbances, sleep-wake cycle disturbances, memory disturbances, psychotic symptoms or psychomotor abnormalities.</p>		

D: The disturbances in criteria A and C are not explained by another pre-existing, established or evolving neurodegenerative disorder and do not occur in the context of a severely reduced level of arousal, such as coma.	Information from history/medical record.		
E: There is evidence from the history, physical examination, or laboratory findings that the disturbance is a direct physiologic consequence of another medical condition, substance intoxication or withdrawal (i.e. because a drug of abuse or to a medication), or exposure to a toxin or is because of multiple aetiologies.	Information from history/medical record.		
<u>Conclusion:</u> Delirium based on the tests and information above?	All DSM-V criteria fulfilled	YES	NO
Subsyndromal delirium based on the tests and information above?	DSM-V criteria not fulfilled, but evidence of change, in addition to any one of these: a) altered arousal, b) attentional deficits, c) other cognitive change, d) delusions or hallucinations.	YES	NO