Delirium Rating Scale (DRS)

Trzepacz PT, Baker RW & Greenhouse J. A symptom rating scale for delirium. Psychiatry Research 1988 23:89-97

Delirium Rating Scale (DRS)

Item 1: temporal onset of symptoms

- no significant change from longstanding behaviour, essentially a chronic or chronic-recurrent disorder.
- 1. gradual onset of symptoms, occurring within a 6-month period.
- 2. Acute change in behaviour or personality occurring over a month.
- 3. abrupt change in behaviour, usually occurring over a 1-to 3-day period

Item 2: Perceptual disturbances

- 0. non evident by history or observation
- 1. feelings of depersonalization or derealisation.
- 2. visual illusions or misperceptions including macropsia, micropsia, e.g. may urinate in wastebasket or mistake bedclothes for something else.
- 3. Evidence that the patient is markedly confused about external reality, not discriminating between dreams and reality.

Items 3: Hallucination type

- 0. hallucinations not present
- auditory hallucinations present by patient's history or inferred by observation, with or without auditory hallucinations
- 2. tactile, olfactory, or gustatory hallucinations present with or without visual auditory hallucinations.

Items 4: Delusions

- 0. Not present
- 1. delusion are systematizes, i.e. well-organizes and persistent
- 2. delusions are new and not part of a pre-existing primary psychiatric disorder.

3. delusions are not well circumscribed; are transient, poorly organised, and mostly in response to misperceived environmental cues; e.g. are paranoid and involve persons who are in reality caregivers, loved ones, hospital staff, etc.

item 5: psychomotor behaviour

- 0. no significant retardation or agitation
- 1. mild restlessness, tremulousness, or anxiety evident by observation and change from patient's usual behaviour.
- 2. moderate agitation with pacing, remove i.v.'s etc.
- 3. severe agitation, needs to be restrained, may be combative; or has significant withdrawal from the environment, but not due to major depression or schizophrenic catatonia.

Item 6: cognitive status during formal testing

- 0. no cognitive deficits, or deficits which can be alternatively explains by lack of education or prior mental retardation
- 1. very mild cognitive deficits which might be attribute to inattention due to acute pain, fatigue, depression, or anxiety associated with having a medical illness.
- 2. cognitive deficit largely in one major area tested; must include periods of disorientation to time or place at least once each 24-hrs period; registration and/or recall are abnormal; concentration is reduced.
- Severe cognitive deficits, including motor or verbal perseverations, confabulations, disorientation to person, remote and recent memory deficits, and inability to cooperate with formal mental status testing.

Item 7: physical disorder

- 0. None present or active
- 1. Presence of any physical disorder which might affect mental state.
- 2. Specific drug, infection, metabolic, central nervous system lesion, or other medical problem which can be temporally implicated in causing the altered behaviour or mental status.

Item 8: sleep wake cycle disturbance

- 0. not present, awake and alert during the day, and sleeps without significant disruption at night.
- 1. occasional drowsiness during day and mild sleep continuity disturbances at night; may have nightmares but can readily distinguish from reality.
- 2. frequent napping and unable to sleep at night, constituting a significant disruption of or a reversal of the usual sleep-wake cycle.
- 3. drowsiness prominent, difficulty staying alert during interview, loss of selfcontrol over alertness and somnolence
- 4. drifts into stuporous or comatose periods

item 9: lability of mood

- 0. not present; mood stable.
- 1. affect/mood somewhat altered and changes over the course of hours; patient sates that mood changes are not under self-control.
- 2. significant mood changes which are inappropriate to situation, including fear, anger, or tearfulness; rapid shifts of emotion, even over several minutes
- 3. severe disinhibition of emotions, including temper outburst, uncontrolled inappropriate laughter, or crying.

Item 10: variability of symptoms

- 1. symptoms stable and mostly present during daytime
- 2. symptoms worsen at night.
- 4. fluctuating intensity of symptoms, such that they wax and wane during a 24-hr period.

Directives for scoring

Items are rated from 0 to either 2 or 3 or 4 points. Maximal score is 33. There are text descriptions for each item rating.

Calculation of subscale Scores

DRS: 10 items

Maximum score: 33

item		score			
1	Temporal onset of symptoms	0	1	2	3
2	Perceptual disturbance	0	1	2	3
3	Hallucination type	0	1	2	3
4	Delusions	0	1	2	3
5	Psychomotor behavior	0	1	2	3
6	Cognitive status during formal	0	1	2	3
	testing	4			
7	Physical disorder	0	1	2	
8	Sleep-wake cycle disturbance	0	1	2	3
9	Lability of mood	4			
10	Variability of symptoms	0	1	2	3
		0		2	
		4			