## **Confusion Assessment Method (CAM)**





The diagnosis of delirium by CAM requires the presence of BOTH features <b>A</b> and <b>B</b>		
Confusion Assessment Method	A. Acute onset	Is there evidence of an acute change in mental status from patient baseline?
	and Fluctuating course	Does the abnormal behavior: <ul> <li>come and go?</li> <li>fluctuate during the day?</li> <li>increase/decrease in severity?</li> </ul>
	B. Inattention	Does the patient: <ul> <li>have difficulty focusing attention?</li> <li>become easily distracted?</li> <li>have difficulty keeping track of what is said?</li> </ul>
	AND the presence of EITHER feature <b>C</b> or <b>D</b>	
	C. Disorganized thinking	Is the patient's thinking  > disorganized > incoherent  For example does the patient have > rambling speech/irrelevant conversation? > unpredictable switching of subjects? > unclear or illogical flow of ideas?
	D. Altered level of consciousness	Overall, what is the patient's level of consciousness:  > alert (normal)  > vigilant (hyper-alert)  > lethargic (drowsy but easily roused)  > stuporous (difficult to rouse)  > comatose (unrousable)

Adapted with permission from: Inouye SK, vanDyck CH, Alessi CA, Balkin S, Siegal AP, Horwitz RI. Clarifying confusion: The Confusion Assessment Method. A new method for detection of delirium. Ann Intern Med. 1990; 113: 941-948. Confusion Assessment Method: Training Manual and Coding Guide, Copyright © 2003, Hospital Elder Life Program, LLC.

Please see the **CAM Training Manual**, available at

http://www.hospitalelderlifeprogram.org/private/cam-disclaimer.php?pageid=01.08.00

The Confusion Assessment Method is intended to assist with identifying the symptoms of confusion or delirium and is intended to be used as instructed. An accurate diagnosis for delirium, confusion, or other psychiatric disorders can only be made by a qualified healthcare provider or physician after a clinical evaluation. These materials are not intended to address the many situations that may arise in dealing with delirium, and persons must exercise their independent judgment about such clinical situations. The Hospital Elder Life Program, LLC., Dr. Sharon K. Inouye, MD or Hebrew SeniorLife shall have no liability for claims by, or damages of any kind whatsoever to, a user of this content or any other person for a decision or action taken in reliance on the information contained on this web site. Such damages include, without limitation, direct, indirect, special, incidental or consequential damages. YOU EXPRESSLY AGREE THAT THE HOSPITAL ELDER LIFE PROGRAM, LLC., SHARON INOUYE, M.D. AND HEBREW SENIORLIFE ARE NOT LIABLE FOR ANY INJURY, PHYSICAL OR FINANCIAL, RELATED TO THE CONTENT OR YOUR RELIANCE ON THE CONTENT. YOUR USE OF THESE MATERIALS CONSTITUTES YOUR AGREEMENT TO THE PROVISIONS OF THIS DISCLAIMER.