

Instrument	Nursing Delirium Screening Scale NOTE: This card is populated with information from the instrument's original validation study only.
Acronym	Nu-DESC
Primary use	Delirium Screening
Area assessed (Number of questions)	5 areas assessed: disorientation, inappropriate behavior, inappropriate communication, illusions or hallucinations, and psychomotor retardation 5 items total
Description	A screening tool designed for nurses to use at the end of their shift to identify patients with delirium, derived from the Confusion Rating Scale (CRS). Raters reference behaviors that they have witnessed in the patient or that the patient's nurse has witnessed during their shift to score the Nu-DESC. The Nu-DESC can be rated one or more times daily.
Versions	1
Scoring information	Each feature is scored on 0-2 based on severity, with 0=absent, 1=mild, and 2=severe. Positive Nu-DESC is score ≥ 2 , maximum total score is 10.
Cognitive testing	Not included or required
Estimated time to rate	1-2 mins; based on 8-hour periods of observation (nursing shift)
Require trained rater	Yes – trained lay rater or clinician
Administer to	Patient, in-person
How to obtain	Instrument and instructions available at http://dx.doi.org/10.1016/j.jpainsymman.2004.07.009
Licensing Fee*	None
Translations	German, Chinese, Korean, Italian, Swedish, Portuguese (Brazil), Finnish, Danish
Highest COSMIN** rating	Overall: 2.5/6 [†]
Test Performance Characteristics	Gaudreau 2005 (Journal of Pain and Symptom Management) <ul style="list-style-type: none"> •Sensitivity (Compared to Confusion Assessment Method [CAM] administered by trained research nurses 0.86 [95% CI 0.65-0.95]) COSMIN: FAIR •Specificity (Compared to CAM 0.87 [0.73-0.94]) COSMIN: FAIR •Efficiency (Compared to CAM 0.86 [0.76-0.93]) COSMIN: FAIR

* Fees and licensing information is effective as of 2018, but is subject to change over time

** COSMIN is used to rate a study's evaluation of a survey or test's measurement properties. COSMIN does NOT rate the instrument itself, but helps readers understand if they can have confidence in the results of studies evaluating measurement properties of surveys and tests. For example, a rigorous study evaluating a test with poor measurement properties will receive a "good" COSMIN rating, while a poorly-conducted study evaluating a test with good measurement properties will receive a "poor" COSMIN rating. Small sample size can impact all COSMIN ratings. You must consider both the COSMIN rating and the results of studies when forming your opinion about that test. *COSMIN ratings shown are based solely on the instrument's original validation study.*

† COSMIN breakdown: internal consistency: NONE, inter-rater reliability: NONE, construct validity: FAIR, external validation: NONE, content validity: GOOD, internal consistency: GOOD

Reference:

Gaudreau, J-D., Gagnon, P., Harel, F., Roy, M-A. (2005) Impact on delirium detection of using a sensitive instrument integrated into clinical practice. *General Hospital Psychiatry*, 27:194-199.

Doi:10.1016/j.genhosppsych.2005.10.002

Additional Test Performance Characteristics:

Gaudreau 2005

- Sensitivity Ratio relative to CAM (Compared to CRS 1.125 [1.05-1.20]; DSM-IV 0.947 [0.84-1.06]; MDAS 0.900 [0.75-1.05])
- Specificity Ratio relative to CAM (compared to CRS 1.065 [1.04-1.09]; DSM-IV 0.868 [0.81-0.93]; MDAS 0.971 [0.91-1.03])

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Reviews:

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