

Seasons Greetings from NIDUS! We have been busy this fall and hope you enjoy reading about what we've been doing. On behalf of the whole NIDUS team, we wish you all Happy Holidays and a Happy New Year.

6th Annual Delirium Boot Camp

The 6th annual Delirium Boot Camp was held at the Nittany Lion Inn in State College, PA, Oct. 1-3. Led by Drs. Donna Fick and Wes Ely, NIDUS Mentorship and Career Development Task Force leaders, the Delirium Boot Camp provided an in-depth research training course for new delirium investigators. Many thanks to Donna Fick, Eva Zeisky, and the whole Penn State College of Nursing team who welcomed us! Subscribe

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Participants and faculty at the 2018 Delirium Boot Camp, held October 1-3, 2018 at the Nittany Lion Inn, Pennsylvania State University.

Session Highlights:

- Wes Ely, MD, MPH gave the introductory keynote, "The ICU Delirium Story," an inspiring overview of his journey as a physician-scientist and how our knowledge of ICU delirium has grown and developed over time.
- Doug Leslie, PhD, a health economist at Pennsylvania State University, led a new, highly informative Boot Camp session: "How to Conduct an Economic Analysis of Delirium." Participants and other faculty enjoyed thinking about delirium from this different perspective.
- Rich Jones, ScD, and Tom Travison, PhD, presented "Methodological and Statistical Issues in Research Proposals," an evergreen favorite of Boot Camp participants for its practical advice and fun presentation. The session included personalized methodological guidance for each participant.
- Pratik Pandharipande, MD, MS, and Ed Marcantonio, MD, SM, covered delirium pathophysiology in two information-packed lectures – one, a broad overview of possible pathophysiological models for delirium and the other focused on fluid biomarkers associated with delirium.
- Donna Fick, PhD, MSN, led a session on "Integrating Delirium Measurement into Research," which provided an overview of delirium assessment strategies and real-world considerations for choosing appropriate tools for different types of research.

Other highlights of the meeting included a mock grant review, interactive training for the CAM and 3D-CAM, didactic sessions on qualitative research methods, led by Marie Boltz, PhD, and pragmatic trials, led by Ann Kolanowski, PhD, and several networking opportunities. Participants also enjoyed a tour of the beautiful Penn State campus!

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Research Profile: Adrian Austin, MD, MSCR

Adrian Austin is a pulmonary critical care physician, geriatrician, and delirium researcher at University of North Carolina-Chapel Hill, and a Delirium Boot Camp alumni! Read more about his current delirium research projects in this research profile on our website.



Delirium Severity Instrument	Publi- cation Year	Sample Size, No.	Recommended Time to Complete, min	Rater Qualifications	Provides Diagnosis by Criteria ^b	COSMIN Rating ^c	Construct Validity Correlation, r ^d	Estimation of Clinical Outcomes	Domains Covered,	Relative Cost Estimate
CAM-S	2014	919, 300'	10-15, Long form	Trained lay or clinical raters	Yes	5	0.64 with MMSE; 0.6480 with global confusion rating	Yes	9	\$
Confusional State Examination	1997	51	30	Trained nurse, psychologist, or physician	No	5.5	0.87 with MMSE; 0.79 with CGR	No	12	\$\$
Delirium-O-Meter	2005	92	45	Nurses without specialized training	No	4.5	0.83 with MMSE; 0.87 with DRS	No	12	\$\$
Delirium Observation Scale	2003	92	<5	Nurses without specialized training	No	6	0.60-0.79 with MMSE; 0.63 with CAM; 0.33-0.74 with IQCODE	No	10	\$\$
DRS-R98	2001	26	20-30 for scoring; 60 for information gathering from other sources	Psychiatric- trained clinicians	Yes	3.5	0.43 with MMSE	No	11	\$\$\$
Memorial Delirium Assessment Scale	1997	30	10-15 for scoring; 15-30 for interview and information gathered from other sources	Trained clinicians	No	5	0.91 with MMSE; 0.88 with DRS	No	10	\$\$
Abbreviations: CAM, Confusion Assessment Method; CAM-S, CAM-Severity coree; CGR, Clinician's Global Rating; DRS, Delirium Rating Scale; DRS-R98, DRS-Revision-98; COSMIN, Consensus-based Standards for the ejecticion of Health Measurement Instruments; (ZCODE, Informant					⁴ Construct validity is often tested by correlation with other measures of that construct. These tests are the measures with which the Delirium Sevenity Instrument is correlated. For r, >0.7 indicates a strong relationship, >0.5 indicates a moderate relationship, and >0.3 indicates a weak relationship.					
Questionnaire on Cognitive Decline in the Elderly; MMSE, Mini-Mental State Examination.					^e These levels are comparators based on the timing to administer the test and the level of staff (salary) required to complete the test.					
Severity scored using counts of either number of domains, domain intensity, or both on a continuous scale.					^f Tested in 2 cohorts: 1 with a sample size of 919 and the other with a sample size of 300.					
Diagnosis by specifi	c prespeci	fied criteri	a, not by cutpoint alone							
Rated on a scale from	m0to6c	riteria heir	of dillad							

Systematic Review: Delirium Severity

A new <u>systematic review led by Richard Jones</u>, <u>ScD</u>, published in JAMA Internal Medicine, identifies high quality assessment tools for measuring delirium severity, an important measure for tracking prognosis, response to treatment, and burden of care.

New Blog: Case study of a delirious patient

This blog post outlines the <u>case of an older</u>, <u>hospitalized woman</u> and the factors that contributed to her development of delirium. This post was written by Deborah D'Avolio, Ph.D., BC-ACNP, ANP, Associate Professor, Florida Atlantic University.



Delirium Research Catalog

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<u>Catalog</u>, a searchable "Table of Contents" for delirium research. Looking for potential collaborators? Start here! Want to publicize your work? Submit your study information to the catalog today!



Abstract Submission: ADS 2019

We look forward to seeing many of you next year in Boston for the 2019 Annual American Delirium Society Conference, June 16-18, 2019 at the Boston Park Plaza Hotel! Visit the ADS website for <u>abstract submission information</u>.

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