

Instrument		Delirium Burden	
NOTE: This card is populated with information from the instrument's original validation study only.			
Acronym	Patient DEL-B (DEL-B-P)	Family Caregiver DEL-B (DEL-B-C)	
Primary Use	To assess the burden of delirium for patients and their family caregivers.		
Area assessed (Number of questions)	Patient items (DEL-B-P): eight questions (0 – 40 point scale) <ul style="list-style-type: none"> <li>• Unsure of where they were</li> <li>• Could not remember parts of the hospital stay</li> <li>• Saw or heard things that were not really there</li> <li>• Nightmares or vivid dreams that were intense or bothersome</li> <li>• Suddenly felt confused</li> <li>• Thought that they would not get better</li> <li>• Afraid of losing their mind</li> <li>• Restricted from getting out of a bed or a chair with alarms or restraints</li> </ul>	Family caregiver items (DEL-B-C): eight questions (0 – 40 point scale) <ul style="list-style-type: none"> <li>• Loved one did not recognize caregiver</li> <li>• Loved one experienced changes in memory and thinking</li> <li>• Loved one saw or heard things that were not really there</li> <li>• Loved one became irritable or angry</li> <li>• Feelings of helplessness as a caregiver</li> <li>• Concern about increased responsibilities as a caregiver</li> <li>• Concern that loved one would never be back to his/her usual self</li> <li>• Loved one demonstrated unsafe behaviours</li> </ul>	
Description	DEL-B is designed to quantify the subjective experience of delirium for patients and their family caregivers, and assesses three types of burden: Symptom burden, emotional burden, and situational burden.		
Versions	1		1
Scoring information	Both the Patient Delirium Burden (DEL-B-P) and Family Caregiver Delirium Burden (DEL-B-C) instruments have eight two-level questions, and if the respondent's response to the stem question is positive, a follow-up question about how distressing the experience was is asked (0–4 scale). For each set of questions, the item is scored as zero if the respondent stated that the patient (or family caregiver, as applicable) did not experience the specific sign or symptom, or if the respondent was unsure or refused to answer that question. A score of 1 means that the patient or family caregiver acknowledged experiencing the DEL-B sign or symptom, but that it was "not at all distressing." Scores ranging from 2 to 5 indicate that respondents experienced the DEL-B sign or symptom and found it to be upsetting, with higher numbers indicating more distress. The eight paired items' scores were added together to produce a maximum score of 40.		
Cognitive testing	Not included or required.		
Estimated time to rate	The DEL-B-P instrument took 3 minutes on average (range 1–16 min) to administer.	The DEL-B-C instrument takes 2 min on average (range 1–10 min) to administer.	
Require trained rater	Yes – trained lay raters or clinicians		
Administer to	Patient, in-person	Caregiver, in person	
How to obtain	Detailed instructions (permission required) at <a href="https://www.deliriumcentral.org/">https://www.deliriumcentral.org/</a>		
Licensing Fee*	None for nonprofit or educational use		
Languages available	English		
COSMIN**	5/6		
Test Performance Characteristics	Cronbach's $\alpha$ was .86 for the final DEL-B-P instrument, indicating good internal consistency.	Cronbach's $\alpha$ was .82 for the final DEL-B-C instrument, indicating good internal consistency.	

Last updated on **March 6, 2023**. If you are aware of any updates required for this document, please notify us via [nidus@hsl.harvard.edu](mailto:nidus@hsl.harvard.edu)



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\* 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 provided when forming your opinion about that test. *COSMIN ratings shown are based solely on the instrument's original validation study.*

**Reference:**

Annie M. Racine, PhD, MPA, Madeline D'Aquila, BS, Eva M. Schmitt, PhD, Jacqueline Gallagher, MS, Edward R. Marcantonio, MD, SM, Richard N. Jones, ScD, Sharon K. Inouye, MD, MPH, and Dena Schulman-Green, PhD; for the BASIL Study Group. (2018). Delirium Burden in Patients and Family Caregivers: Development and Testing of New Instruments. *Gerontologist*, 2018, Vol. 00, No. 00, 1–10. doi:10.1093/geront/gny041

**Additional Text:**

Eva M. Schmitt, PhD, Jacqueline Gallagher, MS, Asha Albuquerque, BA, Patricia Tabloski, PhD, GNP-BC, Hyo Jung Lee, PhD, Lauren Gleason, MD, MPH, Lauren S. Weiner, BS, Edward R. Marcantonio, MD, Richard N. Jones, ScD, Sharon K. Inouye, MD, MPH, and Dena Schulman-Green, PhD. (2017). Perspectives on the delirium experience and its burden: Common themes among older patients, their family caregivers, and nurses. *The Gerontologist*, gnx153-gnx153. doi:10.1093/geront/gnx153