

The Confusion Assessment Method (CAM) diagnostic algorithm (short version)¹

Patient's name: _____

Date of birth: ____ / ____ / ____

Hospital number: _____

Feature 1 *Acute onset and fluctuating course*

This feature is usually obtained from a family member or nurse and is shown by positive responses to the following questions:

1. *Is there evidence of an acute change in mental status from the patient's baseline?*
2. *Did the (abnormal) behaviour fluctuate during the day, that is, tend to come and go, or increase or decrease in severity?*

Feature 2 *Inattention*

This feature is usually obtained by interacting with the patient, but may also be reported by family members or staff and is shown by a positive response to the following question:

3. *Did the patient have difficulty focusing attention, for example being easily distractible or having difficulty keeping track of what was being said?*

Feature 3 *Disorganised thinking*

This feature is usually obtained by interacting with the patient, but may also be reported by family members or staff and is shown by a positive response to the following question:

4. *'Was the patient's thinking disorganised or incoherent, such as rambling or irrelevant conversation, unclear or illogical flow of ideas, or unpredictable switching from subject to subject?'*

Feature 4 *Altered level of consciousness*

This feature is obtained by observing the patient and is shown by any answer other than 'alert' to the following question:

5. *Overall, how would you rate this patient's level of consciousness?*
 - *Alert (normal)*
 - *Vigilant (hyperalert)*
 - *Lethargic (drowsy, easily aroused)*
 - *Stupor (difficult to arouse)*
 - *Coma (unarousable)*

Scoring the test (please tick as appropriate)

	Positive	Negative
Feature 1		
Feature 2		
Feature 3		
Feature 4		

Reference

1. Inouye SK, van Dyck CH, Alessi CA et al. Clarifying confusion: the Confusion Assessment Method. A new method for detection of delirium. *Ann Intern Med* 1990; 113: 941–948.

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