

components of consciousness: **alertness**, an arousal-waking state, including the ability to respond to stimuli, and **cognitive power**, including the ability to process stimuli and produce verbal and motor responses.

An altered state of consciousness usually refers to varying states of unconsciousness that may be momentary or may extend for hours, for days, or indefinitely. **Unconsciousness** is depressed cerebral function—the inability to respond to sensory stimuli and have subjective experiences. **Coma** is defined as a state of unconsciousness from which the patient cannot be aroused even with powerful stimuli.

### **Nursing Alert**

Lack of response to painful stimuli is abnormal and must be reported immediately.

## **Levels of Consciousness**

Assessment of LOC remains the earliest indicator of improvement or deterioration in neurologic status. LOC is determined by observations of the child's responses to the environment. When LOC is being assessed in young children, it is often useful to have a parent present to help elicit a desired response. An infant or child may not respond in an unfamiliar environment or to unfamiliar voices. Children older than 3 years of age should be able to give their name, although they may not be cognizant of place or time. Other diagnostic tests, such as motor activity, reflexes, and vital signs, are more variable and do not necessarily directly parallel the depth of the comatose state. The most consistently used terms are described in [Box 27-2](#).

### **Box 27-2**

#### **Levels of Consciousness**

**Full consciousness:** Awake and alert, orientated to time, place, and person; behavior appropriate for age

**Confusion:** Impaired decision making