

Daily Delirium Nursing Assessment Tool

(label)

Patient name:

Date:

Date of birth:

Time:

Patient number:

Signed:

Using the 'PINCH ME' acronym, please use this assessment tool when delirium is suspected. Use your clinical judgment as needed.

If circled a **bold answer** to any question, use the Delirium Care Plan. This tool must be reviewed daily and may be discontinued at the nurse's discretion.

PLEASE FILE IN NURSING NOTES NOT MEDICAL NOTES AS THIS IS A TRIAL, THANK YOU

Pain

Average Abbey Pain Scale Score	None	Mild	Moderate	Severe
Is there a history of confusion/hallucinations with opiates?		Yes		No
Are we using PRN analgesia when required?		Yes		No
Is the patient's pain uncontrolled or advice is required?		Yes		No

Infection

Are they symptomatic of infection?	Date of sample		
Chest	Yes -	Already treating	N/A
Urine	Yes -	Already treating	N/A
Surgical wound(s)	Yes -	Already treating	N/A

Nutrition

Poor nutritional intake? If so, start food charting	Yes	No
Is the patient symptomatic of aspiration/slow swallow/pouching?	Yes	No

Constipation

Has the patient had a bowel movement in 3 days?	Yes	No – PR <input type="checkbox"/>
Has the patient been prescribed and given sufficient laxatives?	Yes	No

Hydration

Does the patient look dehydrated/overloaded?	Yes	No
Oral intake for shift	<u>ml</u>	
Urine output for shift	ml	

Medication

Has there been a change/omission in regular dementia medications?	Yes	No	N/A
Has there been a change/omission in regular Parkinson's medication?	Yes	No	N/A
Has new analgesia been given recently? Specifically NSAIDs/opiates	Yes	No	
Have new anti-emetics/anti-epileptic/cardiac/mental health medications been given recently?	Yes	No	

Environmental

Has there been a change in bed space within the last 48 hours?	Yes	No
Is there a history of? <ul style="list-style-type: none"> - Long term confusion with no diagnosis - Poor 4AT score - Previous excessive alcohol use - Previous drug use 	Yes	No

Identified issues – tick each box that is an identified issue for the patient

Identified issues	Potential cause of confusion
Pain	
Infection	
Nutrition	
Constipation	
Hydration	
Medication	
Environmental	

Please refer to Delirium Care Plan if positive for 'PINCH ME' and document in UHDB Care Plan for any implementations