

## DRS-R-98 SCORESHEET

Name of patient: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_ Time: \_\_\_\_\_

Name of rater: \_\_\_\_\_

SEVERITY SCORE:

TOTAL SCORE:

Severity item	Item score				Optional information
Sleep-wake cycle	0	1	2	3	Naps Nocturnal disturbance only Day-night reversal
Perceptual disturbances	0	1	2	3	Sensory type of illusion or hallucination: auditory    visual    olfactory    tactile Format of illusion or hallucination simple        complex
Delusions	0	1	2	3	Type of delusion: persecutory Nature:        poorly formed        systematized
Lability of affect	0	1	2	3	Type:    angry        anxious        dysphoric elated        irritable
Language	0	1	2	3	Check here if intubated, mute, etc.
Thought process	0	1	2	3	Check here if intubated, mute, etc.
Motor agitation	0	1	2	3	Check here if restrained <i>Type of restraints:</i>
Motor retardation	0	1	2	3	Check here if restrained <i>Type of restraints:</i>
Orientation	0	1	2	3	Date: Place: Person:
Attention	0	1	2	3	
Short-term memory	0	1	2	3	Record # of trials for registration of items: Check here if category cueing helped
Long-term memory	0	1	2	3	Check here if category cueing helped
Visuospatial ability	0	1	2	3	Check here if unable to use hands
Diagnostic item	Item score				Optional information
Temporal onset of symptoms	0	1	2	3	Check here if symptoms appeared on a background of other psychopathology
Fluctuation of symptom severity	0	1	2		Check here if symptoms only appear during the night
Physical disorder	0	1	2		Disorder:

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Paula T. Trzepacz, M.D. Dinesh Mittal, M.D. Rafael Torres, M.D. Kim Canary, B.S. John Norton, M.D. Nita Jimerson, M.S.N. (2001). Validation of the Delirium Rating Scale-Revised-98: Comparison With the Delirium Rating Scale and the Cognitive Test for Delirium. *J Neuropsychiatry Clin Neurosci* 13:2