

Reason / Problem UpToDate UpToDate  

Confusion

Risk Factors UpToDate  



GENERAL HOSPITAL

Acute Confusion Care Plan

Condition/Disease:

- Acute illness
- Advanced age 
- Chronic illness
- Dementia  
- Disturbed sleep pattern
- Fluid or electrolyte imbalance 
- Immobility
- Impaired nutritional status
- Infection
- Metabolic disorder
- Neurologic impairment 
- Pain
- Sensory impairment
- Substance abuse withdrawal/toxicity

Therapy-Related:

- Medications 
- Surgery/procedure  
- Use of restraints

Assessment

Functional:

- Drowsiness
- Sleep pattern disturbance

Health Behavioral:

- Behavioral changes

Physiological:

- Psychomotor activity change

Psychological:

- Altered attention span
- Changes in cognition
- Disorientation
- Hallucinations
- Impaired memory
- Impaired perceptions
- Inability or impaired ability to communicate
- Irritability
- Verbalizes anxiety or stress

Expected Outcomes

Activity:

Sleeping patterns will improve

Cognitive:

Orientation to person, place, and time will improve

Will regain or maintain usual level of consciousness

Coping:

Ability to remain calm will improve

Safety:

Ability to remain free from injury will improve

Self-Care:

Ability to participate in self-care as condition permits will improve

Interventions UpToDate **Activity:**

Encourage mobilization to extent of ability   

Collaborate with physical therapy

Support uninterrupted sleeping periods

Use cluster care

Provide lighting to follow normal sleep and wake patterns 

Cognitive:

Assess underlying cause of condition 

Provide aids to assist in orientation

Explain changes in routine

Use clear and simple explanations

Provide consistency in caregivers

Provide consistency of environment and routine

Provide frequent verbal reminders (eg, time, day, place)

Explain information regarding tests and procedures UpToDate

Assess medication effects     

Perform delirium screening      

Assess neurologic status UpToDate

Use photos and familiar objects from home

Collaborate with geriatrics 

Coping:

Provide quiet time and decreased environmental stimulation

Provide reassurance 

Encourage interaction with others

Encourage family support

Monitor pain status  

Collaborate with music therapy 

Safety: 

Explore ways to alter risk to improve safety

Assess risk factors for falls  

Implement fall prevention measures 

Provide placement of familiar objects within reach

Use prevention approach to reduce the use of restraints UpToDate  

- Use aspiration precautions
- Encourage use of eyeglasses
- Encourage hearing aid use

Self-Care:

- Assist activities of daily living
 - Provide cues to aid task performance
 - Provide adequate time to perform tasks as needed
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Evaluation

Activity:

- Sleeping patterns have

Cognitive:

- Orientation to person, place, and time has
- Has regained or maintained usual level of consciousness

Coping:

- Ability to remain calm has

Safety:

- Ability to remain free from injury has

Self-Care:

- Ability to participate in self-care as condition permits has
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