

MEDITECH Expanse TIP SHEET

Pediatric RASS/CAPD + New Intervention



Mon Nov 11 14:32 by RT

Interventions
RASS/CAPD +

Assessments
RASS/CAPD

1 Upon observation, select best response describing patient
Best description of patients restlessness or agitation
 Alert and calm Restlessness/agitation Not alert
 +4 Combative +3 Very agitated +2 Agitated +1 Restless
 +4) Combative or violent, danger to staff
 +3) Very agitated, pulls on/removes tubes and/or catheter or has aggressive behavior to staff
 +2) Agitated, frequent nonpurposeful movement, or patient-ventilator dyssynchrony
 +1) Restless or anxious, apprehensive, no aggressive movement
 -1) Drowsy -2) Light sedation -3) Moderate sedation No response to voice
 Instructions: In loud voice state patient's name and direct to open eyes and look at speaker. Can repeat once. Can prompt patient to continue looking at speaker.
 -1) Has eye opening/eye contact sustained more than 10 sec
 -2) Has eye opening/eye contact sustained less than 10 sec
 -3) Has any movement in response to voice, no eye contact
 -4) Deep sedation -5) Unarousable
 Instructions: Physically stimulate patient by shaking shoulder. If no response, rub sternum.
 -4) Has any movement to physical stimulation
 -5) Has no response to voice or physical stimulation

RASS/LOC score
Copyright

2 CAPD
If RASS score -4 or -5 do not proceed

Does the child make eye contact with the caregiver
 4- Never 3- Rarely 2- Sometimes 1- Often 0- Always

Are the child's actions purposeful
 4- Never 3- Rarely 2- Sometimes 1- Often 0- Always

Is the child aware of his/her surroundings
 4- Never 3- Rarely 2- Sometimes 1- Often 0- Always

Does the child communicate needs and wants
 4- Never 3- Rarely 2- Sometimes 1- Often 0- Always

Is the child restless
 0- Never 1- Rarely 2- Sometimes 3- Often 4- Always

Is the child incontinent
 0- Never 1- Rarely 2- Sometimes 3- Often 4- Always

Is the child underactive-very little movement while awake
 0- Never 1- Rarely 2- Sometimes 3- Often 4- Always

Does it take the child a long time to respond to interactions
 0- Never 1- Rarely 2- Sometimes 3- Often 4- Always

CAPD Score
Copyright

3 Fields now required

2 CAPD
If RASS score -4 or -5 do not proceed

Does the child make eye contact with the caregiver
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Are the child's actions purposeful
 0- Never 3- Rarely 2- Sometimes 1- Often 0- Always

Is the child aware of his/her surroundings
 0- Never 3- Rarely 2- Sometimes 1- Often 0- Always

Does the child communicate needs and wants
 0- Never 3- Rarely 2- Sometimes 1- Often 0- Always

Is the child restless
 0- Never 1- Rarely 2- Sometimes 3- Often 4- Always

Is the child incontinent
 0- Never 1- Rarely 2- Sometimes 3- Often 4- Always

Is the child underactive-very little movement while awake
 0- Never 1- Rarely 2- Sometimes 3- Often 4- Always

Does it take the child a long time to respond to interactions
 0- Never 1- Rarely 2- Sometimes 3- Often 4- Always

CAPD Score
Copyright

3 Final Output

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Cornell Assessment of Pediatric Delirium: A Valid, Rapid, Observational Tool for Screening Delirium in the PICU. Traube C, Silver G, Kearney J, Patel A, Atkinson TM, Yoon MI, et al. Critical Care Medicine. 2014 Mar; 42(3):656-63.
Detecting Pediatric Delirium: Development of a Rapid, Observational Assessment Tool. Silver, GS, Traube C, Kearney JA, Kelly D, Yoon M, Nash Moyal W, Gangopadhyay M, Shao H, Ward MJ. Intensive Care Med. 2012 June; 38(6): 1025 - 31.
[End]

In alignment with our Women's and Children's group, a new intervention will be available for use in Expanse; this will be used most often in the Pediatric setting and is called the Cornell Assessment of Pediatric Delirium:

This assessment should not be done on patients with a RASS score of -4 or -5. As such, the CAPD queries will be greyed out until the RASS portion above the noted queries are answered appropriately.

***Please Note: If the patient meets the noted RASS criteria, the CAPD fields will open up and become required in order to complete the entire documentation.**