



## Pre – Post Test

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Job Location: \_\_\_\_\_

Date: \_\_\_\_\_ Score: \_\_\_\_\_ / 11

1. The diagnosis of delirium is likely in a person who demonstrates:
  - a) An acute onset, a fluctuating course, normal attention, disorganized thinking, and an altered level of consciousness
  - b) An acute onset, a steady course, inattention, disorganized thinking, and an altered level of consciousness
  - c) An acute onset, a fluctuating course, inattention, disorganized thinking, and alertness
  - d) An acute onset, a fluctuating course, inattention, disorganized thinking, and an altered level of consciousness
  
2. Hallmark signs and symptoms of delirium include all of the following EXCEPT:
  - a) Disorganized thinking
  - b) Transient memory loss
  - c) Day/night reversal
  - d) Inattention
  - e) Gradual onset
  - f) Altered and fluctuating locus of control
  
3. Which of the following factors increase the risk of delirium:
  - a) Age 75 or older
  - b) Having dementia
  - c) History of urinary tract or respiratory infection
  - d) Multiple medications including over the counter
  - e) Relocation
  - f) All of the above
  
4. True or False? Delirium is a medical emergency.
  
5. Which of the following intervention(s) can help prevent delirium?
  - a) Regular sleep pattern
  - b) Physical activity
  - c) Relocate often
  - d) Restraining to prevent falls
  
6. Family members or close significant others need to be involved in the initial assessment of delirium because:
  - a) They can give you good history about the person's usual behaviours and abilities
  - b) They will require support and education about delirium
  - c) They will often assist in some of the intervention strategies
  - d) All of the above
  - e) None of the above

7. The key factor in differentiating delirium from depression and dementia is:
- Alteration in mood
  - Rapid onset of symptoms
  - Change of sleep pattern
  - Change of psychomotor activity
8. The diagnosis of delirium using the Confusion Assessment Method (CAM) requires the presence of the following, **EXCEPT**:
- Acute onset
  - Fluctuating course
  - Inattention
  - Disorganized thinking and altered level of consciousness
  - Disorganized thinking or altered level of consciousness
9. Which strategy will keep the older person with delirium comfortable and oriented?
- Keeping the lights on at night to prevent falls
  - Changing room placement periodically to remind them that they are not at home
  - Keeping caregiver assignments as consistent as possible
  - Minimizing family visits to prevent disorientation about their whereabouts
10. Drug toxicity or an adverse drug reaction is **most likely** when the older person:
- Is taking a short course of antibiotics
  - Is taking 5 or more medications
  - Has a history of constipation
  - Takes supplemental thyroid hormone
11. Circle ALL the appropriate interventions for the person with delirium:
- Make all instructions as simple as possible
  - Avoid eye contact because they may perceive it as a threat
  - Speak loudly and clearly
  - Correct sleep – wake cycle
  - Encourage the person to consistently use their eyeglasses and hearing aids
  - Encourage the person to perform several self-care activities at the same time
  - Minimize noise at night and discourage napping during the day
  - Agree with content of delusions or hallucinations
  - Improve fluid intake
  - Establish safety surveillance

# Delirium in the Older Person: A Medical Emergency

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### Answers:

1. **D** Acute onset, a fluctuating course, inattention, disorganized thinking, and an altered level of consciousness
2. **E** EXCEPT gradual onset.
3. **F** All of the above.
4. **TRUE**
5. **A and B** Regular sleep pattern and Physical activity
6. **D** All of the above
7. **B** Rapid onset of symptoms
8. **D** Disorganized thinking and altered level of consciousness
9. **C** Keeping caregiver assignments as consistent as possible
10. **B** Is taking 5 or more medications
11. **A** Make all instructions as simple as possible  
**D** Correct sleep – wake cycle  
**E** Encourage the person to consistently use their eyeglasses and hearing aids  
**G** Minimize noise at night and discourage napping during the day  
**I** Improve fluid intake  
**J** Establish safety surveillance