#### **Diagnostic Test: DSM III-R**

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#### Diagnostic tests **Participants** Study Cole 2003 Inclusion criteria: Patients aged 65 years and over who were admitted from the emergency Index test: DSM III-R:the study gave CAM to patients with SPMSQ case control study; study held department to the medical services. score ≥3 or delirium symptoms in notes; then 10 CAM symptoms of in Canada. Exclusion criteria: Patients with a primary diagnosis of stroke, those admitted to the delirium appeared to be used to determine DSM III R; time: not stated oncology unit, ICU or cardiac monitoring unit [unless they were transferred to medical (n=322)ward within 48h of admission], & those who did not speak English or French. Setting: Hospital. Patients admitted from the emergency Reference standard: DSM IV; the study gave CAM to patients with department to the medical Patient characteristics: age: 83 years (72 to 91); sex: 37% male; Patients who did not speak SPMSQ score ≥3 or delirium symptoms in notes; then 10 CAM services. English or French excluded symptoms of delirium appeared to be used to determine the reference Comorbidities: Not reported. Other details: 9.6% were living in nursing home prior to standard; time not stated (n=322) admission, 19% in senior residence or foster home, and 71% were living at home alone or Funding: Not reported. at home with others: For Target Condition/Outcome: Cases: of the 1552 screened, 187 met DSMIII-R critieria for delirium; 19 pts excl because data on dementia Other study comments: oStudy was a secondary analysis of data collected in 2 concurrent status were missing; Controls: selected from patients screened for studies on delirium: RCT of mgmt of delirium & prospective study of the prognosis of delirium who were free of condition (part matched to cases) delirium that incl non deliriuos pts; oResults for whole sample, patients w/dementia, patients without dementia; oPts transferred to LTC, language barrier, previously enrolled in study, communciation problems, refused screening, residing outside geographic area, not sampled or missed, died were excluded following enrollment.oReference standard was

DSM III R and Index test was DSM IV but both used same symptoms, so we turned this

# Diagnostic Test: DSM III

Study	Participants	Diagnostic tests
Cole 2003 cross sectional study; study held in Canada.	Inclusion criteria: Patients aged 65 years and over who were admitted from the emergency department to the medical services.  Exclusion criteria: Patients with a primary diagnosis of stroke, those admitted to the oncology unit, ICU or cardiac monitoring unit [unless they were transferred to medical	Index test: DSM III:the study gave CAM to patients with SPMSQ score ≥3 or delirium symptoms in notes; then 10 CAM symptoms of delirium appeared to be used to determine DSM III R; time: (n=322)
Setting: Hospital. Patients admitted from the emergency department to the medical services.	ward within 48h of admission], & those who did not speak English or French.  Patient characteristics: age: 83 years (72 to 91); sex: 37% male; Patients who did not speak English or French excluded  Comorbidities: Not reported. Other details: 9.6% were living in nursing home prior to	Reference standard: DSM IV; the study gave CAM to patients with SPMSQ score $\geq 3$ or delirium symptoms in notes; then 10 CAM symptoms of delirium appeared to be used to determine the reference standard; time (n=322)
Funding:Not reported.	admission, 19% in senior residence or foster home, and 71% were living at home alone or at home with others;	For Target Condition/Outcome: Cases: of the 1552 screened, 187 met DSMIII-R critieria for delirium; 19 pts excl because data on dementia
	Other study comments: oStudy was a secondary analysis of data collected in 2 concurrent studies on delirium: RCT of mgmt of delirium & prospective study of the prognosis of delirium that incl non deliriuos pts; oPts transferred to LTC, those with a language barrier, previously enrolled in study, communciation problems, refused screening, residing outside geographic area, not sampled or missed, died were excluded following enrollment.	status were missing; Controls: selected from patients screened for delirium who were free of condition (part matched to cases)

# Diagnostic Test: ICD 10

Study	Participants	Diagnostic tests
Cole 2003 case control study; study held in Canada.	Inclusion criteria: Patients aged 65 years and over who were admitted from the emergency department to the medical services.  Exclusion criteria: Patients with a primary diagnosis of stroke, those admitted to the oncology unit, ICU or cardiac monitoring unit [unless they were transferred to medical	Index test: ICD 10:the study gave CAM to patients with SPMSQ score ≥3 or delirium symptoms in notes; then 10 CAM symptoms of delirium appeared to be used to determine ICD 10; time: not stated (n=322)
Setting: Hospital. Patients admitted from the emergency department to the medical services.	ward within 48h of admission], & those who did not speak English or French.  Patient characteristics: age: 83 years (72 to 91); sex: 37% male; Patients who did not speak English or French excluded  Comorbidities: Not reported. Other details: 9.6% were living in nursing home prior to	Reference standard: DSM-IIIR; the study gave CAM to patients with SPMSQ score ≥3 or delirium symptoms in notes; then 10 CAM symptoms of delirium appeared to be used to determine the reference standard; time not stated (n=322)
Funding :Not reported.	admission, 19% in senior residence or foster home, and 71% were living at home alone or at home with others;  Other study comments: oStudy was a secondary analysis of data collected in 2 concurrent studies on delirium: RCT of mgmt of delirium & prospective study of the prognosis of delirium that incl non deliriuos pts; oResults for whole sample, patients w/dementia, patients without dementia; oPts transferred to LTC, language barrier, previously enrolled in study, communciation problems, refused screening, residing outside geographic area, not sampled or missed, died were excluded following enrollment.	For Target Condition/Outcome: Cases: of the 1552 screened, 187 met DSMIII-R critieria for delirium; 19 pts excl because data on dementia status were missing; Controls: selected from patients screened for delirium who were free of condition (part matched to cases)

#### Diagnostic Test: CAM short version

Study	Participants	Diagnostic tests
Gonzalez 2004 cross sectional study; study held in Spain.	Inclusion criteria: Inpatients over 65 years of age with a length of stay over 24 hours. Exclusion criteria: Patients in psychiatric ward.	Index test: CAM short version:translated & adapted version of CAM; time: study reported that 'detection of symptoms required a few minutes' (n=123)
•	Patient characteristics: age: 77.73 years (65 to 94); sex: 38% male; Spanish adaptation of	minutes (11–125)
Setting: Hospital	CAM. Assume English is not the first language	Reference standard: DSM IV; assessed by either a general physician or
T 11 C 11	Comorbidities: Medical: respiratory, electrolytic, metabolic, infectious, intracranial	psychiatrist; also used patient's medical record, validated Spanish
Funding :Grant from the Ministry of Foreign Affairs of	expansive process; some patients had more than one diagnosis. Other details: Ethnicity not reported	MMSE and the Delirium Rating Scale; time (n=123)
Spain.		For Target Condition/Outcome: 30/123 [24%] diagnosed with delirium
	Other study comments: Over a 6 mo. period, one bed was randomly selected every day,	
	from inpatients of >65 years with LoS over 24h;.	

e medical geriatric wards over a 3 month hitted on Fridays & Mondays ≥3 points on after admission, severe aphasia, terminal	Index test: CAM short version:German adaptation of the CAM (IRR k=0.95 CI 0.74 to 1.0); translated and back translated; time: On day 3 after admission; Between 10 am and 4 pm, patient assessed 3 times (n=39)
95); sex: 28% male; German adaptation of age. ions: 2.77 (SD 1.3). Other details: Details on a standardized interview [based on the 30 on to assess for disorganised thinking, & 3-item about acute changes in mental status,	Reference standard: DSM IV;Assessed by a geriatric neuropsychiatricst incl pt interviews, clinical mental status exams, family or nurse interviews, as well as medical histories and record reviews. In addition, a trained resident in geriatric medicine administered a geriatric assessment [completed by patient] incl: questions on memory; orientation to date, place and person; alertness; concentration & disorganised thinking. Consensus diagnosis based on the geriatric neuropsychiatrist and geriatrician; time on day 3 after admission; examinations were performed less than 3h apart (n=39)
[,	ons: 2.77 (SD 1.3). Other details: Details on , a standardized interview [based on the 30 n to assess for disorganised thinking, & 3-item

Study	Participants	Diagnostic tests
Laurila 2002 cross sectional study; study held in Finland.	Inclusion criteria: Consecutively enrolled elderly patients (> 70 years). Exclusion criteria: Age less than 70 or coma.	Index test: CAM short version:CAM translated into Finnish; translation backed up by the Finnish translation of the DSM-criteria; Instrument not back translated; Final version developed by consensus;
Setting: Hospital. 2 acute geriatric hospitals.	Patient characteristics: age: 27% were age over 85; sex: 24.7% male; Finnish adaptation of CAM. Assume English is not the first language.  Comorbidities: not reported. Other details: 42% had education level of primary school or	time: performed within a 6 h time period between 8am and 5 pm on weekdays (n=81)
Funding :Study supported by La Carita Foundation, The Academy of Finland (Grant)	less; 79% were living at home, In addition to 43.2% with dementia, 14.8% had depression, 3.7% psychosis	Reference standard: DSM-IIIR;Reference standard assessed by geriatrician according to fully operationalised criteria of the DSM-III, DSM-III-R, DSM-IV, and ICD-10; time (n=81)
and Helsinki University Central hospital.		For Target Condition/Outcome: 32/81 (39.5%) had delirium according to the DSM-IV;

Study	Participants	Diagnostic tests
Monette 2001 cross sectional study; study held in Canada. Setting: Hospital. Emergency	Inclusion criteria: Patients $\geq$ 66 years. Exclusion criteria: Patients who were blind, deaf, mute, aphasic, hospitalised in the week prior to the interview, too sick to be interviewed or did not speak French or English were excluded.	Index test: CAM short version:Three lay interviewers (nurse; nurse with some experience of research interviewer; research assistant [without nursing degree] with considerable experience interviewing elderly); time: Patients were initially interviewed within 3 hours of arrival into ER; and within 6 h for those who arrived early a.m.; CAM
room.  Funding :Partially funded by	Patient characteristics: age: Not reported; patients ≥ 66 years eligible for enrollment; sex: Not reported; Patients who did not speak English or French were excluded Comorbidities: Not reported. Other details:	checklist completed once geriatrician conducted interview was observed (n=110)
	Reference standard: CAM; assessed by one of the three geriatricans; within 3 hours of interviewer assessment; time (n=110)	
		For Target Condition/Outcome: 19% met the CAM criteria, 24% met DSMIII-R criteria, 20% met DSM-IV criteria, 21% according to clinical impression

Study	Participants	Diagnostic tests
Pompei 1995 cross sectional study; study	Inclusion criteria: Patients who are 65 years or older and admitted to medical or surgical wards.	Index test: CAM short version:Details not reported; time: (n=432)
held in USA.	Exclusion criteria: Patients unable to provide consent because of cognitive impairment, coma, aphasia, or inability to speak English.	Reference standard: DSM-IIIR; clinical investigators [four geriatricians and one geriatric nurse specialist]; time assessment made within 24h of
Setting: Hospital. two general medicine wards and two	Patient characteristics: age: 74.5 years ( range 67.5 to 81.9); sex: 75% male; Patients unable	referral (n=432)
surgical wards [primarily orthopaedic, general surgical, urologic or vascular surgical problems].	to speak English were excluded Comorbidities: not reported. Other details: 29% African-American; Ethnicity of remaining patients not reported; Education beyond 11th grade: 11%;	For Target Condition/Outcome: 64/432 [15%] met the DSM-IIIR criteria for delirium
r	Other study comments: Of the 1168 admitted, 278 not eligible [cognitive impairment: 109;	
Funding :Funded by a grant.	discharge w/in 48h: 114; not commuicate in English: 47; protective isolation:8]; Of the 890 eligible patients: 306 refused, 107 unavailable, 45 too ill.	

Study	Participants	Diagnostic tests
Radtke 2008 cross sectional study; study held in Germany.	Inclusion criteria: Patients over age of 18 years admitted to recovery room after general anaesthesia during 9am to 5pm. Exclusion criteria: Past medical history of psychiatric or neurological illness, previous	Index test: CAM short version:patients assessed only once in the recovery room; time: unclear/not reported (n=154)
Setting: Hospital. 'recovery room'; patients ready for	cerebral insult, history of drug, alcohol or opioid abuse, unable to speak the local language.  Patient characteristics: age: 54.5 years (25.4 to 80.8); sex: 40% male; Patients not speaking	Reference standard: DSM IV; unclear who assessed patients against DSM-IV criteria; time unclear/not reported (n=154 )
discharge.  Funding :Not reported.	local language excluded Comorbidities: not reported. Other details: Details on ethinicity not reported.	For Target Condition/Outcome: 14% (21/154) diagnosed with delirium
0 1	Other study comments: LoS in the recovery room: 79 min (22 to 144): 72 min (28 to 147), for the delirious and non delirious groups, respectively.	

# Diagnostic Test: CAM long version

Study	Participants	Diagnostic tests
Cole 2003 case control study; study held in Canada.	Inclusion criteria: Patients aged 65 years and over who were admitted from the emergency department to the medical services.  Exclusion criteria: Patients with a primary diagnosis of stroke, those admitted to the oncology unit, ICU or cardiac monitoring unit [unless they were transferred to medical	Index test: CAM long version:same data used for CAM and reference standard; time: not stated (n=322)
Setting: Hospital. Patients admitted from the emergency	ward within 48h of admission], & those who did not speak English or French.	Reference standard: DSM-IIIR;no further details; time not stated (n=322 )
department to the medical services.	Patient characteristics: age: 83 years (72 to 91); sex: 37% male; Patients who did not speak English or French excluded Comorbidities: Not reported. Other details: 9.6% were living in nursing home prior to	For Target Condition/Outcome: Of the 1552 screened, 187 met DSMIII-R critieria for delirium; 19 pts excl because data on dementia status were missing; 52% patients with delirium (n=168/322); 40%
Funding :Not reported.	d. admission, 19% in senior residence or foster home, and 71% were living at home alone or at home with others;	(128/322)with delirium & dementia; 29% (94/322) with dementia only
	Other study comments: oResults for whole sample, patients w/dementia, patients without dementia; oPts w/SPSMQ score <3 were rescreenedand CAM readministered if score increased or evidence of delirium in nursing notes; oNon delirious pts selected by age and prior cognitive impairmentoStudy was a secondary analysis of data collected in 2 concurrent studies on delirium: RCT of mgmt of delirium & prospective study of the prognosis of delirium that incl non deliriuos pts; o oPts transferred to LTC, language barrier, previously enrolled in study, communciation problems, refused screening, residing outside geographic area, not sampled or missed, died were excluded following enrollment.	

Study	Participants	Diagnostic tests
Fabbri 2001 cross sectional study; study held in Brazil.	Inclusion criteria: Older adults (aged 60 years or over) admitted to a teaching hospital. Exclusion criteria: Pts 'in mutism', those who scored 11 or more in the Glasgow scale;.	Index test: CAM long version:Portugese version of CAM; translated and back translated into English by an independent translator; time: within 24h of admission to ER (n=100)
Setting: Hospital. Emergency service. Funding:Not reported.	Patient characteristics: age: 73.8 years (72.12 to 75.48); sex: 52% male; Portugese adaptation of CAM. Assume English is not the first language.  Comorbidities: Mean number of discharge diagnoses: 6.4 (SD 2.3) to 4.2 (SD 2.2) for the delirious and non delirious groups respectively Other details: 84% were of European descent; 32% [32/100] patients were unable to read or write fluently; 15% [15/100] patients had more than 8 years of formal education	Reference standard: DSM IV;Assessed by psychiatrist; time interval between CAM and DSMIV assessment were no longer than 24h (n=100) For Target Condition/Outcome: 17/100 patients with delirium
	Other study comments: Clinical state of patient prevented assessment (n=61); time period between assessment with CAM & DSMIV was >2h [n=41]; patient was discharged from the ER in <24h [n=194].	

Study	Participants	Diagnostic tests
Yates 2009 cross sectional study; study held in UK.	Inclusion criteria: Every acute older people admission to a care of the elderly ward and mixed general medical ward over a 6-week period.  Exclusion criteria: Not reported.	Index test: CAM long version:CAM with 10 items, administered by 1 of 2 medical SHOs; time: not reported (n=62)
Setting: Hospital. elderly ward and a mixed general medical	Patient characteristics: age: 82.2 years; sex: not reported; Details on language not reported Comorbidities: . Other details: Ethnicity or writing ability not reported	Reference standard: DSM IV;administered by 1 of 2 medical SHOs; time not reported (n=62 ) $$
ward in a teaching hospital.  Funding :Not reported.	Other study comments: Study reported that 15 pts were unable to be assessed w/MMSE because of level of consciousness, inability to communicate or rapidly deteriorating	Other comparator tests: b)Delirium Symptom interview [DSI]- not included in review.
	medical condition	For Target Condition/Outcome: $11/62$ [18%] diagnosed with delirium with DSM-IV

Study	Participants	Diagnostic tests
Zou 1998 cross sectional study; study held in Canada.	Inclusion criteria: Patients admitted consecutively from the emergency department to the medical wards of a primary acute care hospital and who scored 3 or more on the SPMSQ. Exclusion criteria: Not stated.	Index test: CAM long version:nurse clinician trained by psychiatrist gathered demographic info, reviewed the cart, assessed the patient before completing CAM and the chart would be rereviewed; time: all assessments done between 8am to 6pm; (n=87)
Setting: Hospital	Patient characteristics: age: 84.9 years (SD 6.97) range estimated: 77.9 to 91.87; sex: 32%	assessments done between oam to opin, (it or )
Funding :Not reported.	male; Details on language not reported  Comorbidities: not reported. Other details: Details on ethinicity not reported.	Reference standard: Consensus diagnosis (incl DSM IV and CAM);Consensus diagnosis [2 geriatric psychiatrists, research fellow & nurse clinician] based on the nurses results [from CAM, SPSMQ, chart review], psychiatrists findings from chart review & clinical examination, & each participant independently indicated delirium based on the five DSMIV criteria; time between assessments varied btw 30 min to 8h (n=87)
		For Target Condition/Outcome: 56/87 [64%] diagnosed with delirium

# Diagnostic Test: CAM

Study	Participants	Diagnostic tests
Rockwood 1994 cross sectional study; study held in USA.	Inclusion criteria: Consecutive admissions of elderly patients (65 years and over). Exclusion criteria: Not stated.	Index test: CAM:Details on type of CAM not reported; time: not reported (n=187)
Setting: Hospital. general medicine clinical teaching units.	Patient characteristics: age: before: 78.6 years (estimated range 71.1 to 86.1); after: 78.8 years(estimated range 71.3 to 86.3);; sex: before: 60% male; after: 55%; It was unclear if English was the first language.  Comorbidities: Not stated. Other details: before: 78% from the community; after: 72%;	Reference standard: DSM-IIIR;DSM III-R mentioned only in the abstract; study also reported that study physician completed the CAM, and used the DSR scale; time not reported (n=187)
Funding :supported by non- pharamaceutical funding;.	Details on ethnicity not reported  Other study comments: Data on patietns recorded 4 months before and 6 months after the	Other comparator tests: Staff were part of an education intervention programme.
	intervention. before: 187 patients; After: 247.	For Target Condition/Outcome: Delirium: before: 3%; after 9%

Study	Participants	Diagnostic tests
Rolfson 1999 cross sectional study; study held in Canada.	Inclusion criteria: Patients undergoing elective CABG. Exclusion criteria: Patients who were blind, deaf, or unable to speak English. Death or coma before the 4th postoperative day.	Index test: CAM:type of version unclear; based on an interview that included the MMSE; administered by geriatrician for the first 41 cases and by nurses by subsequent 30 cases; time: administered prior to the
Setting: Hospital. Centre providing cardiac surgery. Funding:Not reported.	Patient characteristics: age: 71 years; sex: 80% male; All patients who were unable to speak English excluded Comorbidities: . Other details: Details on ethnicity not reported	surgery & on the 4th postoperative day (n=71)  Reference standard: DSM-IIIR;unclear when reference standard was done;administered by physician (who also administered the CAM; time (n=71)
		Other comparator tests: b) MMSE c) Clock drawing Test- administered by physicians/nurses on day prior to surgery and on 4th postoperative day; score of 6 or less considered to be abnormal.
		For Target Condition/Outcome: 32% [23/71] patients diagnosed with delirium

# Diagnostic Test: DRS-R- 98

Study	Participants	Diagnostic tests
Andrew 2009 cross sectional study; study held in Canada.	Inclusion criteria: Geriatric medicine patients admitted to a tertiary care teaching hospital. Exclusion criteria: Not reported.	Index test: DRS-R-98:score range 0 to 44; pair of raters assessed on DRS-R-98 [one geriatrician, one resident) no extensive training in instrument; unclear which assessor measure used to calc sens & spec;
Setting: Hospital	Patient characteristics: age: 81.2 years; sex: 34% men; Details on language not reported Comorbidities: Mean comorbidities 7.1 (SD 2.7). Other details: Details on ethnicity not	time: not reported (n=145)
Funding :Scholarship.	reported	Reference standard: DSM IV; unclear who administered the reference standard.; time not reported (n=145)
		For Target Condition/Outcome: 23/145 [16%]; with dementia & delirium 22/145; with cognitive impairment & delirium : 10/145; Total: 55/145 [38%]

# Diagnostic Test: MMSE

Study	Participants	Diagnostic tests
Rolfson 1999 cross sectional study; study held in Canada.	Inclusion criteria: Patients undergoing elective CABG. Exclusion criteria: Patients who were blind, deaf, or unable to speak English. Death or coma before the 4th postoperative day.	Index test: MMSE:score of ≤23 was indicative of cognitive impairment; unclear whether a physician or nurse carried out the assessment; time: administered prior to the surgery & on the 4th postoperative day (n=71)
Setting: Hospital. Centre providing cardiac surgery.  Funding: Not reported.	Patient characteristics: age: 71 years; sex: 80% male; All patients who were unable to speak English excluded Comorbidities: . Other details: Details on ethnicity not reported	Reference standard: DSM-IIIR;unclear when reference standard was done;administered by physician (who also administered the CAM; time (n=71)
		Other comparator tests: postoperative day ; score of 6 or less considered to be abnormal.
		For Target Condition/Outcome: 32% [23/71] patients diagnosed with delirium

# Diagnostic Test: AMT

Study	Participants	Diagnostic tests
Ni Chonchubhair 1995 cross sectional study; study held in UK.	Inclusion criteria: Patients aged more than 65 years undergoing surgery.  Exclusion criteria: Patients expected to remain in hospital less than 48h after surgery and those with aphasia or deafness were excluded.	Index test: AMT:AMT - 10 questions with each correct answer scoring one point.; decline in AMT scores of 3 or more; time: Assessed third postoperative day; assessed before and third day after surgery- unclear who did the preop/postop assessment (n=100)
Setting: Hospital. Surgical Patient characteristics: age: 74 years; sex: 37% male; Details on language not reported Setting: Comorbidities: Not reported. Other details: Details on ethnicity not reported Reference standard	Reference standard: DSM-III;Delirium Assessment Scale used to determine delirium according to DSM-III; time unclear (n=100)	
		Comparator test: Delirium Assessment Scale used to determine delirium according to DSM-III; time: (n=100).
		For Target Condition/Outcome: 15% (15/100) were diagnosed with delirium on the third postoperative day; 25% (4/16) patients with a preoperative AMT score less than 8 and 13% (11/84) patients with a preoperative AMT score of 8 or more developed delirium

# **Diagnostic Test: Clock Drawing Test**

Study	Participants	Diagnostic tests
Rolfson 1999 cross sectional study; study held in Canada.	Inclusion criteria: Patients undergoing elective CABG. Exclusion criteria: Patients who were blind, deaf, or unable to speak English. Death or coma before the 4th postoperative day.	Index test: Clock Drawing Test:administered by physicians/nurses on day prior to surgery and on 4th postoperative day; score of 6 or less considered to be abnormal; time: administered prior to the surgery & constitution of the surgery with the 4th postoperative day (p. 71)
Setting: Hospital. Centre providing cardiac surgery.  Funding: Not reported.	Patient characteristics: age: 71 years; sex: 80% male; All patients who were unable to speak English excluded Comorbidities: Not reported. Other details: Details on ethnicity not reported	on the 4th postoperative day (n=71 )  Reference standard: DSM-IIIR;administered by physician; time unclear when this was done (n=71 )
•		For Target Condition/Outcome: 32% [23/71] patients diagnosed with delirium

# Diagnostic Test: MMSE (serial change)

Study	Participants	Diagnostic tests
O'Keeffe 2005 cross sectional study; study held in Ireland.	Inclusion criteria: Patients aged 65 years or older admitted from the A&E to an acute geriatric service.  Exclusion criteria: Patients with severe aphasia, deafness, expected to die before sixth hospital day, those expected to die or those unwilling to participate.	Index test: MMSE (serial change):MMSE [adapted & validated version for use in an Irish population] administed by registrars in geriatric and general internal medicine; time: administered first full day of hospitalisation and on hospital day 6 (n=200)
Setting: Hospital. acute geriatric services.  Funding: Not reported.	Patient characteristics: age: 79 years (SD 8); sex: 44% male; Language details not reported Comorbidities: 4.1 (SD 1.9) comorbid conditions. Other details: 96% White;  Other study comments: Admitting diagnoses were: respiratory (34%), cardiovascular (18%), gastrointestinal (10%), and cerebrovascular (9.5%); Of 200 pts included, 18% (35/200) did not have a second assessment on day 6 because of death (n=6), discharge (n=14), or error (n=15).	Reference standard: CAM + interview by experienced clinician;Diagnosis with CAM required presence of acute onset and fluctuating course, inattention and disorganised thinking or altered level of consciousness. Assessed by experienced consultant geriatrician.; time administered on the same hospital days (n=200)  For Target Condition/Outcome: Day 1: 27 delirious; Day 6: 5 prevalent + 14 incident

# **Diagnostic Test: CAM ICU**

Study	Participants	Diagnostic tests
Ely 2001 cross sectional study; study held in USA. Setting: ICU. medical and	Inclusion criteria: Mechanically ventilated adult medical and coronary ICU patients; study interval from Feb 2000 to July 2000.  Exclusion criteria: History of psychosis or neurologic disease that would confound the diagnosis of delirium, inability to communicate with assessors (not English speaking or deaf), extubated before study nurses' assessments, previously enrolled in the study,no	Index test: CAM ICU:acute onset and inattention; AND disorganised thinking or altered level of consciousness assessed by 2 critical care nurses; Assessment includes the RASS and ASE; time: 2min assessment; possibly no more than 3 h between ratings (n=91)
coronary ICU patients.  Funding :Author recipient of the Pharmacology in Aging Grant, NIH grant; Co-author (S.Inouye) recipient of research grants.	consent.  Patient characteristics: age: 55.3 years (18 to 92); sex: 47.9% male; Patients who did not speak or understand English were excluded Comorbidities: Severity: APACHE II 22.9 (SD 7.2). Other details: 79.2% White; 19.8% Black; 1% Hispanic; 61.5% with vision or hearing deficits	Reference standard: DSM IV;based on evaluation with family members, patient's nurse and chart review; Completed by geriatrician, delirium carer, geriatric consult liaison psychiatrist or neuropsychologist; patients assessed as either normal,delirious,stupor or comatose using DSM-IV or standardised definition of stupor & coma; time 30-45min duration of assessment; (n=91)
6	Other study comments: Patients also assessed with Richmond Agitation Sedation Scale (RASS); Admission diagnoses: acute respiratory distress syndrome, MI or arrhythmia, CHF, hepatic or renal failure, chronic obstructive pulmonary disease, GI tract bleeding, malignancy, drug overdose.	For Target Condition/Outcome: 86% [80/96] diagnosed with delirium

Study	Participants	Diagnostic tests
Ely 2001b cross sectional study; study held in USA. Setting: ICU	Inclusion criteria: Mechanically ventilated adult medical and coronary ICU patients. Exclusion criteria: History of severe dementia/ psychosis/neurologic disease that would confound the diagnosis of delirium, inability to communicate with assessors (not English speaking or deaf), extubated before assessments, previously enrolled in the study, no consent.	Index test: CAM ICU:acute onset and inattention; AND disorganised thinking or altered level of consciousness assessed by 2 critical care nurses; first alert or lethargic evaluation for each pt; time: 2 minute assessment; mean time between index & reference standard 1.4h (SD 0.8) (n=38)
Funding :Author recipient of the Pharmacology in Aging Grant, NIH grant; Co-author (S.Inouye) recipient of a research grant.	Patient characteristics: age: 60 years (SD19) estimated range: 41 to 79 years; sex: 60% male; Patients who did not speak or understand English were excluded Comorbidities: Severity: APACHE II 17.1 (SD 8.7). Other details: 84% White; 14% Black; 2% Hispanic; 71% with vision or hearing deficits  Other study comments: Admission diagnoses: acute respiratory distress syndrome, MI or arrhythmia, CHF, hepatic or renal failure, chronic obstructive pulmonary disease, GI tract bleeding, malignancy, drug OD.	Reference standard: DSM IV;based on evaluation w/family members, patient's nurse chart review, & nursing notes; Completed by geriatrician delirium expert and geriatric consult liaison psychiatrist with >20 y experience; patients assessed as either normal, delirious, stupor or comatose using DSM-IV or standardised definition of stupor & coma; time 30 to 45 minutes; exact duration of reference standard evaluation not recorded;≤4 hours inbetween index and reference standard assessments (n=38)  Comparator test: Assessed by intensivists; time: (n=26).  For Target Condition/Outcome: 86.68% (33/38) patients were diagnosed with delirium with Reference standard.

Study	Participants	Diagnostic tests
Lin 2004 cross sectional study; study held in Taiwan.	Inclusion criteria: Mechanically ventilated adult ICU patients admitted to university affiliated medical centre medical ICU.  Exclusion criteria: Pts w/Hx of chronic dementia, psychosis, mental retardation or other neurologic disease; antipsychotics, high doses of morphine [>50mg/day] or midazolam	Index test: CAM ICU:Chinese version of the CAM-ICU; validated with DSM IV prestudy[evaluated by psychiatrist] kappa=0.96;; time: assessment conducted within the first 5 days of their ICU stay. (n=102)
Setting: ICU. Medical ICU. Funding:Not reported.	[>0.09mg/kg/hr); pts under GA recovering from surgery or heavily sedated w/neuromuscular agent.	Reference standard: DSM IV; Evaluated by senior psychiatrists; time (n=102 ) $$
	Patient characteristics: age: 73.6 years (estimated range: 70.4 to 77.4); sex: 53% male; Chinese translation of CAM. Assume English not the first language Comorbidities: Not reported. Other details: Ethnicity details not reported.	For Target Condition/Outcome: 22/102 [22%] diagnosed with delirium
	Other study comments: Patients or familes who refused to participate were excluded. Patients who remained comatose [7/109] were excluded from analysis	

# Diagnostic Test: DSM III-R

Hospital.

Study	Participants	Diagnostic tests
Laurila 2003	Inclusion criteria: All patients in acute geriatric hospitals & residents of nursing	Index test: DSM III-R:operationalised in a yes/no questionnaire; time:
cross sectional study; study	homes.Patients with moderate cognitive impairment [MMSE score:< 20]or poor capability	both index & reference standard administered together (n=425)
held in Finland.	of judgement informed consent from closest proxy; Interviews in hosp: Nov 99- Apr 00;in	
	NH:Nov 99-Oct00.	Reference standard: DSM IV; Criteria addressed in the DSM-IV were
Setting: Mixed. geriatric	Exclusion criteria: Age less than 70 years and patients in coma.	operationalised in one questionnaire which also addressed the criteria
hospitals[230/425] and nursing		in other classification systems (DSM-III-R; DSM-III; ICD10); time both
homes[195/425].	Patient characteristics: age: 88.4 years; sex: 18% male; Language details not reported	index & reference standard administered together (n=425)
	Comorbidities: Majority of the NH patients had dementia as primary diagnosis, but also	0 ( ,
Funding :Supported by La	had mulitple diseases Other details: Dementia: wards: 45.2%; Nursing homes: 86.2%	For Target Condition/Outcome: 25% [106/425] diagnosed with delirium
Carita Foundation, the Uulo		(DSMIV)
Arhio Foundation, the	Other study comments: Patients in geriatric wards were admitted for all major diagnostic	
Academy of Finland & the	categories of somatic illness- acute infections, cardiopulmonary or endocrine problems,	
Helsinki University Central	falls or stroke, postoperative patients and patients with terminal illness.	

Study	Participants	Diagnostic tests
Laurila 2004 cross sectional study; study	Inclusion criteria: All patients in acute geriatic hospitals and all residents of nursing homes. Patients with moderate cognitive impairment [MMSE score:< 20] or poor capability	Index test: DSM III-R:; time: unclear (n=170 )
held in Finland.  Setting: Mixed. geriatric	of judgement informed consent from closest proxy.  Exclusion criteria: Age less than 70 years and in coma.	Reference standard: DSM IV;Criteria addressed in the DSM-IV were operationalised in one questionnaire which also addressed the criteria
hospitals and nursing homes.	Patient characteristics: age: 88.4 years; sex: 18% male; Language details not reported Comorbidities: Majority of the NH patients had dementia as primary diagnosis, but also	in other classification systems (DSM-III-R; DSM-III; ICD10); time unclear (n=170)
Funding :Supported by La Carita Foundation, the Uulo	had mulitple diseases Other details: Dementa: wards: 45.2%; Nursing homes: 86.2%	For Target Condition/Outcome: delirium [with dementia]:66/255; delirium [no dementia]: 40/170
Arhio Foundation, the Academy of Finland & the	Other study comments: Patients in geriatric wards were admitted for all major diagnostic categories of somatic illness- acute infections, cardiopulmonary or endocrine problems,	demant file denotation. 10/170
Helsinki University Central Hospital.	falls or stroke, postoperative patients and patients with terminal illness.	

# Diagnostic Test: DSM III

Study	Participants	Diagnostic tests
Laurila 2003 cross sectional study; study held in Finland.	Inclusion criteria: All patients in acute geriatric hospitals and all residents of nursing homes. Patients with moderate cognitive impairment [MMSE score:< 20] or poor capability of judgement informed consent from closest proxy.	Index test: DSM III:further details not reported; time: both index & reference standard administered at the same time (n=425)
Setting: Mixed. geriatric hospitals[230/425] and nursing homes[195/425].	Exclusion criteria: Age less than 70 years and patients in coma.  Patient characteristics: age: 88.4 years; sex: 18% male; Language details not reported Comorbidities: Majority of the NH patients had dementia as primary diagnosis, but also had mulitple diseases Other details: Dementia: wards: 45.2%; Nursing homes: 86.2%	Reference standard: DSM IV;Criteria addressed in the DSM-IV were operationalised in one questionnaire which also addressed the criteria in other classification systems (DSM-III-R; DSM-III; ICD10); time both index & reference standard administered together (n=425)
Funding: Supported by La Carita Foundation, the Uulo Arhio Foundation, the Academy of Finland & the Helsinki University Central Hospital.	Other study comments: Patients in geriatric wards were admitted for all major diagnostic categories of somatic illness- acute infections, cardiopulmonary or endocrine problems, falls or stroke, postoperative patients and patients with terminal illness.	For Target Condition/Outcome: 25% [106/425] diagnosed with delirium with DSM-IV

Study	Participants	Diagnostic tests
Laurila 2004 cross sectional study; study	Inclusion criteria: All patients in acute geriatic hospitals and all residents of nursing homes. Patients with moderate cognitive impairment [MMSE score:< 20] or poor capability	Index test: DSM III:; time: unclear (n=225 )
held in Finland.	of judgement informed consent from closest proxy.  Exclusion criteria: Age less than 70 years and in coma.	Reference standard: DSM IV; Criteria addressed in the DSM-IV were operationalised in one questionnaire which also addressed the criteria
Setting: Mixed. geriatric hospitals and nursing homes.	Patient characteristics: age: 88.4 years; sex: 18% male; Language details not reported Comorbidities: Majority of the NH patients had dementia as primary diagnosis, but also	in other classification systems (DSM-III-R; DSM-III; ICD10); time unclear (n=225 ) $$
Funding :Supported by La Carita Foundation, the Uulo	had mulitple diseases Other details: Dementa: wards: 45.2%; Nursing homes: 86.2%	For Target Condition/Outcome: delirium [with dementia]:66/255; delirium [no dementia]: 40/170
Arhio Foundation, the Academy of Finland & the Helsinki University Central Hospital.	Other study comments: Patients in geriatric wards were admitted for all major diagnostic categories of somatic illness- acute infections, cardiopulmonary or endocrine problems, falls or stroke, postoperative patients and patients with terminal illness.	

# Diagnostic Test: ICD 10

Hospital.

Study	Participants	Diagnostic tests
Laurila 2003 cross sectional study; study held in Finland.	Inclusion criteria: All patients in acute geriatric hospitals and all residents of nursing homes. Patients with moderate cognitive impairment [MMSE score:< 20] or poor capability of judgement informed consent from closest proxy  Exclusion criteria: Age less than 70 years and in coma.	Index test: ICD 10:ICD-10 (clinical criteria) operationalised into a yes/no question; time: both index & reference standard administered together (n=425)
Setting: Mixed. geriatric hospitals[230/425] and nursing homes[195/425].  Funding: Supported by La	Patient characteristics: age: 88.4 years; sex: 18% male; Language details not reported Comorbidities: Majority of the NH patients had dementia as primary diagnosis, but also had mulitple diseases Other details: Dementia: wards: 45.2%; Nursing homes: 86.2%	Reference standard: DSM IV;Criteria addressed in the DSM-IV were operationalised in one questionnaire which also addressed the criteria in other classification systems (DSM-III-R; DSM-III; ICD10); time both index & reference standard administered together (n=425)
Carita Foundation, the Uulo Arhio Foundation, the Academy of Finland & the Helsinki University Central	Other study comments: Patients in geriatric wards were admitted for all major diagnostic categories of somatic illness- acute infections, cardiopulmonary or endocrine problems, falls or stroke, postoperative patients and patients with terminal illness; Interviews in hospital took place: Nov 1999 to Apr 2000 and in nursing homes: Nov 1999 to Oct 2000;	For Target Condition/Outcome: 25% [106/425] diagnosed with delirium (DSMIV);

Study	Participants	Diagnostic tests
Laurila 2004 cross sectional study; study	Inclusion criteria: All patients in acute geriatric hospitals and all residents of nursing homes. Patients with moderate cognitive impairment [MMSE score:< 20] or poor capability	Index test: ICD 10:; time: unclear (n=225 )
held in Finland.	of judgement informed consent from closest proxy.  Exclusion criteria: Age less than 70 years and in coma.	Reference standard: DSM IV; Criteria addressed in the DSM-IV were operationalised in one questionnaire which also addressed the criteria
Setting: Mixed. geriatric hospitals and nursing homes.	Patient characteristics: age: 88.4 years; sex: 18% male; Language details not reported Comorbidities: Majority of the NH patients had dementia as primary diagnosis, but also	in other classification systems (DSM-III-R; DSM-III; ICD10); time unclear (n=225 ) $$
Funding :Supported by La Carita Foundation, the Uulo	had mulitple diseases Other details: Dementia: wards: 45.2%; Nursing homes: 86.2%	For Target Condition/Outcome: delirium [with dementia]:66/255; delirium [no dementia]: 40/170
Arhio Foundation, the Academy of Finland & the Helsinki University Central Hospital.	Other study comments: Patients in geriatric wards were admitted for all major diagnostic categories of somatic illness- acute infections, cardiopulmonary or endocrine problems, falls or stroke, postoperative patients and patients with terminal illness.	