# **Health & Care Information Model:**

nl.zorg.DOSScore-v1.2

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## Managed by:



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## 1. nl.zorg.DOSScore-v1.2

Werkgroep RadB Verpleegkundige Gegevens
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Werkgroep RadB Verpleegkundige Gegevens
11-10-2016
nl
2.16.840.1.113883.2.4.3.11.60.40.3.18.7
DOS, delier
Final
Werkgroep RadB Verpleegkundige Gegevens
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15-04-2024
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### 1.1 Revision History

Publicatieversie 1.0 (04-09-2017)

Publicatieversie <u>1.1</u> (10-06-2022)

Bevat: ZIB-1674.

Publicatieversie <u>1.2</u> (15-10-2023) Bevat: ZIB-1925, ZIB-1977, ZIB-1978.

## 1.2 Concept

The Delirium Observation Screening Scale is a tool to determine whether a patient has delirium. The DOSS includes 13 observations of behavior (verbal and non-verbal) which represent the symptoms of a delirium. These observations can be performed during regular contact with the patient.

## 1.3 Mindmap

## 1.4 Purpose

Delirium is one of the most forms of psychopathology among elderly patients and patients in the last phase of their lives. The main characteristic of delirium is the rapid onset and changing of symptoms. The DOSS is meant to qualify and quantify the nature and seriousness of delirium symptoms. This enables a quick start of treatment. The DOSS is used to signal risks and as an evaluation tool.

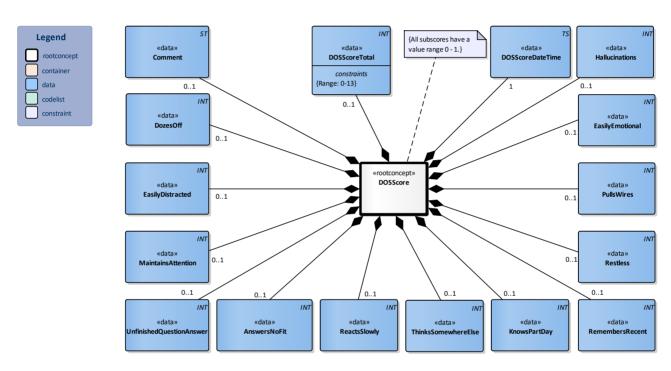
## 1.5 Patient Population

#### 1.6 Evidence Base

The DOSS contains 13 observations of behaviour (verbal and non-verbal) that reflect the symptoms of delirium. These observations can be made during regular contacts with the patient. A total score is calculated per shift (minimum 0 and maximum 13). The total scores of three shifts (day, late and night shift) are added up to the total score of this day (minimum 0 and maximum 39). This HCIM defines the total score and underlying scores of one shift.

For a DOS scale final score, 3 instances of this HCIM, one for each shift, will have to be combined (DOS SCALE FINAL SCORE = TOTAL SCORE THIS DAY / 3). A DOS scale final score < 3 means that the patient is unlikely to be delirious. A DOS scale final score > 3 means the patient is likely to be delirious. DOS SCALE FINAL SCORE is not part of this concept and can be derived or calculated from the 3 HCIM instances.

#### 1.7 Information Model



«rootconcept»	DOSScore	
Definitie	Root concept of the DOSScore information model. This root concept contains all data elements of the DOSScore information model.	
Datatype		
DCM::ConceptId	NL-CM:18.7.1	
DCM::DefinitionCode	SNOMED CT: 160591000146109 Delirium observation screening assessment scale	
Opties		

«data»	DOSScoreTotal	
Definitie	The total score for this shift (minimum 0 and maximum 13).	
Datatype	INT	
DCM::ConceptId	NL-CM:18.7.3	
DCM::DefinitionCode	SNOMED CT:	
	55681000146102 Delirium	
	observation score	
Opties		
Constraint	Range: 0-13	

«data»	DOSScoreDateTime
Definitie	The date on which the DOS score is registered.
Datatype	TS
DCM::ConceptId	NL-CM:18.7.5
Opties	

«data»	DozesOff	
Definitie	DOS observation: patient dozes off during conversation or activities.	
	Score:	
	0: never	
	1: sometimes-always	
	(is the answer "don't know" then don't instantiate this concept)	
Datatype	INT	
DCM::ConceptId	NL-CM:18.7.6	
DCM::DefinitionCode	ScoreObservaties: 18007006	OID: 2.16.840.1.113883.2.4.3.11.60.40.4.0.1
	DOSScore DozesOff	
Opties		

«data»	EasilyDistracted	
Definitie	DOS observation: patient is earnironment.	asily distracted by stimuli from the
	responds verbally or non-verb	by stimuli from the environment when he/she bally to sounds or movements that have no ature of which does not make you expect a
	Score:	
	0: never	
1: sometimes-always		
	(is the answer "don't know" then don't instantiate this concept)	
Datatype	INT	
DCM::ConceptId	NL-CM:18.7.7	
DCM::DefinitionCode	ScoreObservaties: 18007007	OID: 2.16.840.1.113883.2.4.3.11.60.40.4.0.1
	DOSScore EasilyDistracted	
Opties		

«data»	MaintainsAttention		
Definitie	DOS observation: patient maintains attention to conversation or action		
	Someone is maintaining attention to a conversation or action if he/she verbally or non-verbally shows that they are following the conversation or action.		
	Score:		
	1: never		
	0: sometimes-always		
	(is the answer "don't know" then don't instantiate this concept)		
Datatype	INT		
DCM::ConceptId	NL-CM:18.7.8		
DCM::DefinitionCode	ScoreObservaties: 18007008	OID: 2.16.840.1.113883.2.4.3.11.60.40.4.0.1	
	DOSScore		
	MaintainsAttention		
Opties			

«data»	UnfinishedQuestionAnswer	
Definitie	DOS observation: patient doe	s not finish question or answer.
	Score: 0: never 1: sometimes-always (is the answer "don't know" tl	nen don't instantiate this concept)
Datatype INT		
DCM::ConceptId	NL-CM:18.7.9	
DCM::DefinitionCode	ScoreObservaties: 18007009 DOSScore UnfinishedQuestionAnswer	OID: 2.16.840.1.113883.2.4.3.11.60.40.4.0.1
Opties		

«data»	AnswersNoFit	
Definitie	DOS observation: patient give	s answers that do not fit the question.
	Score: 0: never 1: sometimes-always	aon don't instantiate this consent
Datatype	(is the answer "don't know" then don't instantiate this concept) INT	
DCM::ConceptId	NL-CM:18.7.10	
DCM::DefinitionCode	ScoreObservaties: 18007010	OID: 2.16.840.1.113883.2.4.3.11.60.40.4.0.1
	DOSScore AnswersNoFit	
Opties		

«data»	ReactsSlowly	
Definitie	DOS observation: patient read	cts slowly to instructions.
	Someone reacts slowly to instructions when acting is delayed and/or there are moments of stillness/inactivity before moving into action.	
	Score:	
	0: never	
	1: sometimes-always	
	(is the answer "don't know" then don't instantiate this concept)	
Datatype	INT	
DCM::ConceptId	NL-CM:18.7.11	
DCM::DefinitionCode	ScoreObservaties: 18007011	OID: 2.16.840.1.113883.2.4.3.11.60.40.4.0.1
	DOSScore ReactsSlowly	
Opties		

«data»	ThinksSomewhereElse	
Definitie	DOS observation: patient thinks they are somewhere else.	
	Someone thinks they are somewhere else when he/she shows this in words or actions.	
	Score:	
	0: never	
	1: sometimes-always	
	(is the answer "don't know" then don't instantiate this concept)	
Datatype	INT	
DCM::ConceptId	NL-CM:18.7.12	

DCM::DefinitionCode	ScoreObservaties: 18007012	OID: 2.16.840.1.113883.2.4.3.11.60.40.4.0.1
	DOSScore	
	ThinksSomewhereElse	
Opties		

«data»	KnowsPartDay				
Definitie	DOS observation: patient knows which part of the day it is.				
	Someone knows what part of the day it is when he/she shows such in words or actions.				
	Score:				
	1: never				
	0: sometimes-always				
	(is the answer "don't know" then don't instantiate this concept)				
Datatype	INT				
DCM::ConceptId	NL-CM:18.7.13				
DCM::DefinitionCode	ScoreObservaties: 18007013	OID: 2.16.840.1.113883.2.4.3.11.60.40.4.0.1			
	DOSScore KnowsPartDay				
Opties					

«data»	RemembersRecent				
Definitie	DOS observation: patient remembers recent events.				
	Someone remembers recent events when he/she can for example tell whether they had visitors or what he/she ate.				
	Score:				
	1: never				
	0: sometimes-always				
	(is the answer "don't know" then don't instantiate this concept)				
Datatype	INT				
DCM::ConceptId	NL-CM:18.7.14				
DCM::DefinitionCode	ScoreObservaties: 18007014	OID: 2.16.840.1.113883.2.4.3.11.60.40.4.0.1			
	DOSScore				
	RemembersRecent				
Opties					

«data»	Restless			
Definitie	DOS observation: patient is picking, disorderly, restless.			
	Score:			
	0: never			
	1: sometimes-always			
	(is the answer "don't know" then don't instantiate this concept)			
Datatype	INT			
DCM::ConceptId	NL-CM:18.7.15			
DCM::DefinitionCode	ScoreObservaties: 18007015 OID: 2.16.840.1.113883.2.4.3.11.60.40.4.0.1			
	DOSScore Restless			
Opties				

«data»	PullsWires
Definitie	DOS observation: patient pulls IV tubing, feeding tubes, catheters, etc.
	Score:
	0: never

	1: sometimes-always				
	(is the answer "don't know" then don't instantiate this concept)				
Datatype	INT				
DCM::ConceptId	NL-CM:18.7.16				
DCM::DefinitionCode	ScoreObservaties: 18007016	OID: 2.16.840.1.113883.2.4.3.11.60.40.4.0.1			
	DOSScore PullsWires				
Opties					

«data»	EasilyEmotional				
Definitie	DOS observation: patient is easily or suddenly emotional.				
	Someone is easily or suddenly emotional when he/she responds with a fierce emotion without provocation or when the fierceness of the emotion does not seem to match the provocation.				
	Score:				
	0: never				
	1: sometimes-always				
	(is the answer "don't know" then don't instantiate this concept)				
Datatype	INT				
DCM::ConceptId	NL-CM:18.7.17				
DCM::DefinitionCode	ScoreObservaties: 18007017	OID: 2.16.840.1.113883.2.4.3.11.60.40.4.0.1			
	DOSScore EasilyEmotional				
Opties					

«data»	Hallucinations				
Definitie	DOS observation: patient sees/hears things which are not there.				
	Someone sees/hears things which are not there when he/she shows this verbally (ask!) or non-verbally.				
	Score:				
	0: never				
	1: sometimes-always				
	(is the answer "don't know" then don't instantiate this concept)				
Datatype	INT				
DCM::ConceptId	NL-CM:18.7.18				
DCM::DefinitionCode	ScoreObservaties: 18007018	OID: 2.16.840.1.113883.2.4.3.11.60.40.4.0.1			
	DOSScore Hallucinations				
Opties					

«data»	Comment
Definitie	Comment on the DOS score.
Datatype	ST
DCM::ConceptId	NL-CM:18.7.2
DCM::DefinitionCode	LOINC: 48767-8 Annotation
	comment
Opties	

	Legend
Definitie	
Datatype	
Opties	

### 1.8 Example Instances

DOSScore	
ZaktWeg	1
SnelAfgeleid	1
HeeftAandacht	0
VraagAntwoordNietAf	-
AntwoordenNietPassend	1
ReageertTraag	-
DenktErgensAnders	0
BeseftDagdeel	0
HerinnertRecent	0
Rusteloos	0
TrektDraden	0
SnelGeemotioneerd	1
Hallucinaties	0
DOSScoreTotaal	4
DOSScoreDatumTijd	19-12-2016 10:35
Toelichting	-

#### 1.9 Instructions

### 1.10 Interpretation

#### 1.11 Care Process

## 1.12 Example of the Instrument

#### 1.13 Constraints

#### **1.14** Issues

#### 1.15 References

- 1. DOS vragenlijst. Beschikbaar op: <a href="https://www.vmszorg.nl/wp-content/uploads/2017/07/DOSS-observatieschaal.pdf">https://www.vmszorg.nl/wp-content/uploads/2017/07/DOSS-observatieschaal.pdf</a> [Geraadpleegd: 11 juli 2023].
- 2. Richtlijn Delier Volwassenen. Beschikbaar op: <a href="https://www.venvn.nl/media/gteiurur/richtlijn-delier.pdf">https://www.venvn.nl/media/gteiurur/richtlijn-delier.pdf</a> [Geraadpleegd: 11 juli 2023].

#### 1.16 Functional Model

## 1.17 Traceability to other Standards

#### 1.18 Disclaimer

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