Subject Number: \_\_\_\_\_ Therapist's Name OR Code: \_\_\_\_\_ Date of Evaluation: \_\_\_/\_\_/ Time: \_\_\_\_ AM PM

# DISORDERS OF CONSCIOUSNESS SCALE-25 © 2014 US Dept. of Veterans Affairs

### **BASELINE OBSERVATIONS CHECKLIST**

Is the DOCS being co-administered: Yes or No Discipline(s)(circle all indicated): SLP PT C Location of Baseline Observation & Nature of Evaluation was broken into 2 sessions: Yes c Noise Level of Environment (Circle): Noisy Heart Rate: Lowest reading: Highest Read Blood Oxygen Level (via pulse oximetry): Lowe	(if yes remer T Psycholog <b>Previous Act</b> ion T No If Yes Quiet Inte ding: est reading:	mber to score se y Nursing Re ivity (specify): s, is this the: 1 ermittent Noise I _ Highest Readi	parately) esearch <sup>st</sup> session or 2 <sup>nd</sup> s nterruptions ng:	session			_
<b>POSITION OF PATIENT</b> (check position that paties         □ in bed lying on back       □ in bed between 45 & 9	entisinduring 90 degrees □	the baseline ob Iside-lying in be	servations): d □upright in ch	air 🗆 reclined	in chair		
SPONTANEOUS & RANDOM MOVEMENTS: (cf eyebrow movement (circle one: right left both) mouth twitching or tremors LLE movement	eck all that are □frown or gri □tongue mo □RLE mover	e observed) imace vement ment	□smiling □lip movement □LUE movemer	□biting □head nt □RUE m	or grinding o movement novement	f teeth ∃none	
<b>RESPIRATION:</b> (check the appropriate boxes)	⊇quiet □	shallow	□stric	derous	□fast	□othe	er
SWALLOWING: Check the amount of drooling Check location of drooling: Number of spontaneous swallows observed:	: □constan □left corner 	t □occasiona □midli	I □not observed ne □all o	□none f these locati	ons	none	
POSTURE:       Describe the following as: tense, relative following as: tense, relativ	axed, spastic, f Neck Post osture: RLE Post	ilexed, extended ure:	or describe other	posturing: _ LUE .E 			
VISUAL: Does patient wear eye glasses? Yes No	No If y	es, were they we	orn during this obs	ervation? Ye	es		
Level of illumination in room (check only one): <u>Duration &amp; Frequency of Eye Opening</u> : (check on one):	⊡dark Iy	⊡dim □ one eye	□brigl open Right or	ht · Left			
<ul> <li>eyes closed; no spontaneous eye opening</li> <li>eyes closed initially; spontaneous eye opening</li> <li>&lt; 1 minute</li> <li>eyes closed initially; spontaneous eye opening</li> <li>&gt; 1 minute</li> <li>eyes open initially; spontaneously close after _ seconds and remain closed</li> </ul>	for for	<ul> <li>eyes op seconds</li> <li>eyes sp through</li> <li>partially</li> <li>eyes ren any blin</li> </ul>	en initially; sponta s, but reopened fo ontaneously open out the observatio open nain open all the t king or with bl	neously close r second and remain o n period ime (circle or inking)	e after is open ne: without		
Eve Positioning & Movement: (check all that are a both eyes deviated left  left eye deviated constricted	appropriate) □right eye c	□could not obs deviate right p	erve eyes ⊡both pupil: □dilated□	eyes deviate constricted	ed right left pupil:	∃dilated □	
□nystagmus (i.e., rhythmical oscillation of the eye	balls- either p	endular or jerky)					
□ptosis (i.e., drooping of the upper eyelid): left e	ye right eve	bilateral					

left pupil: dilated constricted

#### Source:

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- Pape, T. L.-B., Heinemann, A., Kelly, J.P., Hurder, A, G, Lundgren, S. (2005). A Measure of Neurobehavioral Functioning after Coma-Part I: 1. Theory Reliability and Validity of the Disorders of Consciousness Scale, Journal of Rehabilitation Research and Development, Jan/Feb, 42 (1) 1-18.
- Pape, T. L.-B., Senno, R., Guernon, A. Kelly, J. (2005). A Measure of Neurobehavioral Functioning after Coma-Part II: Detection and 2. Measurement of Meaningful Effects during Coma Recovery, Journal of Rehabilitation Research and Development, Jan/Feb, 42 (1) 19-28.
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DIRECTIONS: PRIOR to Administering Test Items use the clinical definitions and criteria below to classify the patient's state of altered consciousness. CHECK ONLY ONE. **Vegetative State** Minimally Conscious State Conscious Coma Check  $\square$  $\square$ ONE: A state of arousal without A state of A condition in which minimal Consciousness is behavioral evidence of but definite evidence of self or inferred when a unarousable Definitions awareness of self or capacity to neurobehavioral environmental awareness is person adaptively interact with the environment demonstrated. responsiveness responds to ongoing sensory input in a manner that is not reflexic, stereotypical or automatic. 1. Does not: No evidence of sustained, One or more of the following Reliable and reproducible, purposeful or must be clearly discernible and consistent occur on a reproducible basis: 1. follow voluntary behavioral demonstration of at responses to visual, 1. Follows simple commands; commands, least one of the Clinical 2. demonstrate auditory, tactile, or noxious 2. Gestural or verbal "yes/no" following: Criteria volitional stimuli; responses (regardless of 2. No evidence of language behavior, accuracy); 1. Functional 3. verbalize, or comprehension or interactive expression: 4. mouth words 3. Intelligible verbalization; 3. Intermittent wakefulness communication; manifested by the 4. Movements of affective preservation of sleep-wake 2. Functional use of behaviors that occur in cycles: one or more objects; contingent relation to relevant 4. Sufficiently preserved environmental stimuli and are hypothalamic and brain 3. Clearly discernable not attributable to reflexive stem autonomic functions (able to be activity to permit survival with documented) medical and nursing care; behavioral 5. Bowel and bladder manifestation of sense incontinence: of self 6. Variably preserved cranial nerve and spinal reflexes If applicable then briefly describe behavior in this space:

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# **TEST STIMULI BY SUBSCALE**

**DIRECTIONS**: Administer each item and circle the score based on the patient's response to the stimulus. Remember to score the **BEST** response. The subscales can be administered in any order. The only item that must be administered 1<sup>st</sup> is the Social Greeting from the Auditory Language Subscale.

Auditory Language Subscale				
Test Item	No Response	Generalized Response	Localized Response	
Social Greeting "Hi, I'm (say your name), How is it going?"	0	1	2	
Follow 1-Step Command (Document command used here)	0	1	2	
Follow 1-Step Command (Document command used here)	0	1	2	
Name Called	0	1	2	
Orientation to Self (Document questions used here) "Is your name?"(gender opposite name) "Is your name?" (correct name) OR "What is your name?"	0	1	2	
Orientation to Environment (Document question here) Yes/no question related to immediate environment.	0	1	2	
Toothbrush "This is a toothbrush. Brush your teeth."	0	1	2	

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Gustation/Olfaction Subscale				
Test Item	No Response	Generalized Response	Localized Response	
Juice to Lips and Tongue	0	1	2	
Odor 1 (Document Odor used here)	0	1	2	
Odor 2 (Document Odor used here)	0	1	2	
Masseter Massage	0	1	2	
Sweet/Sour Taste	0	1	2	

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Visual Subscale				
Test Item	No Response	Generalized Response	Localized Response	
Focus on Face (Was mirror used instead of familiar face? Yes No)				
Upper>	0	1	2	
Middle>	0	1	2	
Lower>	0	1	2	
Left>	0	1	2	
Right>	0	1	2	
Focus on Object				
FUpper>	0	1	2	
FMiddle>	0	1	2	
FLower>	0	1	2	
FLeft>	0	1	2	
FRight>	0	1	2	
Tracking Face (Was mirror used instead of familiar face? Yes No)				
Horizontal>	0	1	2	
Vertical>	0	1	2	
Tracking Object				
Horizontal>	0	1	2	
Vertical>	0	1	2	

Source:

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Somatosensory Subscale			
Test Item	No Response	Generalized Response	Localized Response
Cold Spoon	0	1	2
Vibration to Toe	0	1	2
Cube to Toe	0	1	2
Feather	0	1	2
Joint Range of Motion	0	1	2
Air	0	1	2
Hand Massage	0	1	2
Heat	0	1	2
Scrub to Arm	0	1	2
Swab to Toe	0	1	2
Hair	0	1	2

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TESTING READINESS ITEMS: Circle score or response for each test item 1. Is a third nerve palsy (i.e. third cranial nerve damage-inability to lift eyelids) suspected? YES or NO 2. Is cortical blindness (i.e. optic nerve damage) suspected? YES or NO 3. Is bilateral ptosis (i.e. drooping of the upper eyelid) suspected? YES or NO 4. Auditory Stimuli: □ Patient required their name to be spoken to re-establish "testing readiness". □ Patient did not require their name to be spoken to re-establish "testing readiness". 5. Tactile/ Deep Pressure Stimuli: □ Patient required deep pressure re-establish "testing readiness". □ Patient did not require deep pressure to re-establish "testing readiness". 6. Passive Movement Stimuli □ Patient required passive movement to re-establish "testing readiness". □ Patient did not require passive movement to re-establish "testing readiness". 7. Rolling Stimuli □ Patient required rolling to re-establish "testing readiness". □ Patient did not require rolling to re-establish "testing readiness". 8. Rocking Stimuli: □ Patient required rocking to re-establish "testing readiness". □ Patient did not require rocking to re-establish "testing readiness". 9. Maintaining State of Testing Readiness:

Did the patient require stimulation throughout the evaluation to maintain a state of testing readiness?

□ YES

DOCS-25 Raw Score: To obtain the raw score for the DOCS-25 evaluation, sum the response numbers based on quality of response (0,1 or 2) for each item. For the odor, focus on face, focus on object, track face and track object items the best response from multiple trials or directions is used. The raw score will range from 0 -50.

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