

BRAIN INJURY CAREGIVER GUIDE

LEVELS OF RECOVERY AND MENTAL FUNCTION

LEVEL 4: CONFUSED AND AGITATED

Patients with this level of brain injury often are very confused and agitated. They may become overstimulated easily, possibly leading to outbursts that seem threatening or aggressive. This behavior is a result of the injury and not a reflection of their personality. Patients often become fixated on personal needs/wants and cannot understand why they aren't allowed to have or do them. Patients do not understand that staff/family are trying to help them, and they often need physical restraints in bed to avoid harming themselves due to confusion.

LEVEL 5: CONFUSED AND INAPPROPRIATE

Patients with this level of brain injury often have limited memory or recall of events. They are often confused and easily distracted. The outbursts common in level 4 may have improved, but they may still make inappropriate comments to family/staff. Their confusion may worsen if they become overstimulated or tired from the day's activities.

LEVEL 6: CONFUSED BUT APPROPRIATE

Attention and concentration are improving, but patients at this level may still be limited in how long they can focus. They may be able to remember general conversations or topics but forget small details. Patients often can follow a simple schedule for day-to-day activities, but they may struggle with unexpected changes. They may not be aware of mental issues that could cause safety concerns.

SUGGESTIONS FOR INTERACTING WITH PATIENTS AT LEVELS 4-6:

1. Limit the number of visitors, and keep the environment calm and quiet. Only one person should speak to the patient at a time.	2. Speak to the patient in a calm, slow, normal voice . Do NOT argue with the patient, and do not speak to them in a childlike voice . This only increases confusion/frustration.
3. Show the patient familiar pictures, such as photos of their friends and family, special events, or other memories. Hang pictures of the patient at the bedside .	4. Ask the music therapist for advice about playing music, which should be quiet and calming . Limit the amount of TV they watch, and keep the volume low.
5. Ask the patient to follow simple instructions , such as "raise your arm", "close your eyes", "stick out your tongue", or "show me your teeth". Give one direction at a time in a calm voice , and allow plenty of time for the response . Limit their choices .	6. Repeat information often, to help them recognize the place/time/situation. Patients with brain injuries often do not remember. However, do NOT ask/quiz the patient on this information.
7. Avoid talking on the phone at the bedside. Encourage the patient to avoid extended screen time with devices such as phones, tablets, and TV. Keep the blinds open to allow natural light in.	8. Do NOT respond to outbursts of bad language or threatening behaviors . If needed, reduce stimulation and consider removing yourself from view.
9. A diary or notebook can be used by visitors to record events of the patient's day. Later, this diary can be helpful in improving memory. The diary can also be a way for the family and the health care team to communicate.	10. Meet with the hospital staff to ask questions about the brain injury, and take notes to help you remember. They may not be able to give you specific answers about recovery time, especially when it is soon after the injury.
11. Look after yourself and the family by accepting help from friends and relatives , even with small things. Establish a routine, and stick to it.	12. Signs of overstimulation include, sweating, restlessness, agitation, more confusion than usual, short attention span, and inappropriate language. Allow the patient time to rest/nap.