TIME bundle

	Name: Date of birth: CHI number:		Zero tim	e: / / e: :
	ctitioner name: F	Practitioner sigr	nature:	
	itiate TIME within 2 hours itial and write time of completion)	Assessed/ sent	Results seen	Abnormality found
	Think exclude and treat possible triggers			
	NEWS (think sepsis six)			
T	Blood glucose			
	Medication history (identify new medications/change of dose/medication recently stopped)			
	Pain review (Abbey Pain Scale)			
	Assess for urinary retention			
	Assess for constipation			
	Investigate and intervene to correct underlying causes			
	Assess Hydration and start fluid balance chart			
	Bloods (FBC, U&E, Ca, LFTs, CRP, Mg, Glucose)			
1	Look for symptoms/signs of infection (skin, chest, urine, CNS) and perform appropriate cultures/imaging depending on clinical assessment (see sepsis six)			
	ECG (ACS)			
м	Management Plan			Completed
	Initiate treatment of ALL underlying causes fo	und above		
	Engage and Explore (complete within 2 hours or if family/carer not present within 24 hours)			
E	Engage with patient/family/carer – explore if this is usual behaviour. Ask: How would you like to be involved?			
	Explain diagnosis of delirium to patient and family/carers (use delirium leaflet)			
	Document diagnosis of delirium			