

Richmond Agitation-Sedation Scale (RASS)

Level	Options	Score
RASS level	Combative: Openly combative or violent, immediate danger to staff	+4
	Very agitated: Pulls or removes tubes or catheters, aggressive	+3
	Agitated: Frequent purposeless movement, fights the ventilator	+2
	Restless: Anxious, but movements are not aggressive or vigorous	+1
	Alert and calm: Awake and calm without stimulation	0
	Drowsy: Not fully alert, but stays awake to voice with eye contact for 10 seconds or more	-1
	Light sedation: Wakes briefly to voice with eye contact for less than 10 seconds	-2
	Moderate sedation: Moves or opens eyes to voice, but no eye contact	-3
	Deep sedation: No response to voice, but moves or opens eyes to physical stimulation	-4
	Unarousable: No response to voice or physical stimulation	-5

Interpretation

-5 to -4	Deep sedation / unarousable. Deeply sedated or unarousable. Unless the team ordered deep sedation, notify the provider, review sedatives and opioids, and check for neurological or metabolic causes. Delirium cannot be screened at this level.
-3	Moderate sedation. Deeper than most light-sedation targets. Compare with the ordered goal and discuss adjusting sedation with the team.
-2 to 0	Calm to lightly sedated. Within the range many ICU protocols target for light sedation. Keep reassessing and screen for delirium (for example with the CAM-ICU).
+1–+2	Restless / agitated. Look for causes such as pain, hypoxia, full bladder, withdrawal or delirium before adding sedation. Notify the provider if agitation persists or threatens lines or the ventilator.
+3–+4	Very agitated / combative. Immediate risk to the patient and staff. Call for help, protect the airway and lines, and follow your facility's agitation and safety protocol.

Total score: _____ Date: _____ Assessed by: _____

Sessler, Gosnell, Grap, et al., 2002 (Virginia Commonwealth University). Sources: Sessler et al. 2002, The Richmond Agitation-Sedation Scale (PubMed); RASS tool and assessment procedure (Minnesota Hospital Association); Richmond Agitation-Sedation Scale - Merck Manual Professional.
Free calculator and full guide: nursingscales.com/rass-scale/ · Educational material; does not replace clinical judgment or facility protocols.