

Sedation Assessment: VAMAAS

Ventilator Adjusted: Motor Activity Assessment Scale

For unventilated patients, score MAAS only. If MAAS ≥ 2 , screen for delirium.

MAAS Score	Description of MAAS	VA Score	Description of VA
0	Unresponsive to pain Does not move to noxious stimulus.	A	Minimal coughing; few alarms; tolerates movement
1	Opens eyes and/or moves to pain only Opens eyes OR raises eyebrows OR turns head towards stimulus OR moves limbs with noxious stimulus.	B	Coughing, frequent alarms when stimulated; settles with voice or removal of stimulus
2	Opens eyes and/or moves to voice Opens eyes OR raises eyebrows OR turns head towards stimulus OR moves limbs when touched or name is spoken.	C	Distressed, frequent coughing or alarms; high RR with normal/ low PaCO ₂
3	Calm and cooperative No external stimulus is required to elicit movement AND patient is adjusting sheets or clothes purposefully and follows commands.	D	Unable to control ventilation; difficulty delivering volumes; prolonged coughing
4	Restless but cooperative; follows commands No external stimulus is required to elicit movement AND patient is picking at sheets or tubes OR uncovering self & follows commands		
5	Agitated; attempts to get out of bed; may stop behaviour when requested but reverts back No external stimulus is required to elicit movement AND patient is attempting to sit up OR moves limbs out of bed AND does not consistently follow commands (e.g. will lie down when asked but soon reverts back to the attempts to sit up or move limbs out of bed).		
6	Dangerously agitated; pulling at tubes or lines, thrashing about; does not obey commands No external stimulus is required to elicit movement AND patient is attempting to sit up OR thrashing side to side OR striking staff OR trying to climb out of bed AND doesn't calm down when asked.		