

# Rancho Los Amigos Scale-Revised

Patient's name: Alex Green

Date: Oct. 29, 2024

Clinician's name: Dr. Taylor Morgan

<input type="checkbox"/>	<b>Level I – No response: total assistance</b> Your patient did not respond to external stimuli and may appear to be asleep.
<input type="checkbox"/>	<b>Level II – Generalized response: total assistance</b> Your patient reacts to external stimuli in non-specific, inconsistent, and non-purposeful manners. Their responses are limited and typically the same even if the stimuli are different.
<input type="checkbox"/>	<b>Level III – Localized response: total assistance</b> Your patient responds specifically and inconsistently with delays to stimuli. Their responses are directly related to stimuli and may respond more to people they know than strangers.
<input type="checkbox"/>	<b>Level IV – Confused/agitated: maximal assistance</b> Your patient exhibits bizarre, non-purposeful, incoherent, or inappropriate behaviors. Their agitation appears more from internal confusion than external factors. They have no short-term recall, and their attention is short and non-selective.
<input type="checkbox"/>	<b>Level V – Confused, inappropriate non-agitated: maximal assistance</b> Your patient gives random, fragmented, and non-purposeful responses to complex or unstructured stimuli. They are able to follow simple commands consistently, but their memory and selective attention are impaired, and new information is not retained. Behavior and verbal responses are often inappropriate, and patient may appear confused and often talks. However, the patient does not seem agitated by internal factors, unlike Level IV, but may still be agitated by unpleasant external stimuli.
<input type="checkbox"/>	<b>Level VI – Confused, appropriate: moderate assistance</b> Your patient gives context-appropriate, goal-directed responses, and is dependent upon external input for direction. They are capable of retaining learning for tasks before the injury, and there is carry-over for relearned tasks, but not for new tasks. They have some awareness of self, situation, and environment, but not of specific impairments and safety concerns. Memory problems persist.
<input type="checkbox"/>	<b>Level VII – Automatic, appropriate: minimal assistance for daily living skills</b> Your patient behaves appropriately in familiar settings, is able to perform daily routines automatically, and shows carry-over for new learning at lower than normal rates. They are able to initiate social interactions and shows interest in social and recreational activities in structured settings, but their judgment remains impaired. They still need minimal supervision for learning and safety.
<input checked="" type="checkbox"/>	<b>Level VIII – Purposeful, appropriate: stand by assistance</b> Your patient is consistently oriented to person, place, and time. They independently perform familiar tasks in non-distracting environments. They show emerging awareness of their impairments and how these affect performance, but they need stand-by assistance to compensate. The patient uses memory aids for daily schedules and acknowledges the emotions of others, requiring only minimal help to respond appropriately. They demonstrate improved memory for past and future events but often experience depression, irritability, and a low frustration threshold.

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<input type="checkbox"/>	<p><b>Level IX – Purposeful, appropriate: stand-by assistance on request</b></p> <p>Your patient can switch between different tasks and complete them independently. They acknowledge impairments that interfere with tasks and use compensatory strategies. However, they struggle to anticipate challenges without assistance. With help, they can consider the consequences of actions and decisions. They recognize others' emotional needs with stand-by assistance and continue to experience depression and low frustration tolerance.</p>
<input type="checkbox"/>	<p><b>Level X – Purposeful, appropriate: modified independent</b></p> <p>Your patient can multitask across different environments using extra time or assistive devices. They independently develop tools and methods for memory retention. They anticipate and manage obstacles from impairments and make appropriate decisions, although they may require more time or compensatory strategies. They interact appropriately in social situations but may show intermittent depression and low frustration tolerance under stress.</p>

### Additional notes

Patient demonstrates consistent orientation and recognizes emotional cues but occasionally requires reminders for compensation strategies when navigating new tasks. Intermittent frustration is observed under stress, yet social interactions remain appropriate.