



After delirium: preparing for recovery and follow-up

To help patients and families know what to ask, what may help and when a new change is urgent.

Recovery is individual

Recovery is different for each person. Some people have gaps in memory or remember frightening experiences. Attention, sleep, mood, confidence, appetite, movement or everyday tasks may also be affected. Do not expect recovery to follow a fixed timetable.

Before leaving hospital or care

Ask for:

- A clear explanation of the likely causes, treatment given and any unresolved questions
- Confirmation that delirium is written in the clinical record and discharge information
- An up-to-date medicines list and explanation of any changes
- A plan for follow-up and help with strength, movement, food, drink or everyday tasks
- A contact point for questions or continuing concerns

Supporting recovery at home

- Return to a calm, familiar routine where possible.
- Keep glasses, hearing aids, a clock and a calendar available.
- Follow the agreed plan for medicines, food, fluids, activity and rest.
- Notice and record any important changes to discuss with the healthcare team.
- Arrange practical support if the person is not yet managing their usual tasks safely.

Talking about what happened

If the person wants to talk, listen without forcing them to remember. Acknowledge that the experience may have felt real and frightening. The clinical team may be able to help explain events and fill in gaps.

When to ask for help

Contact the GP or relevant healthcare team about concerns that continue or get worse but are not sudden. Ask who will review thinking and memory, mood, sleep, movement or daily tasks if these remain affected.

Urgent action A new episode of sudden confusion needs immediate assessment, even after a previous delirium. In the UK, call 999 or go to A&E now and do not drive yourself. If the person is already in hospital or a care home, tell staff immediately. Outside the UK, call your local emergency number or use your local emergency service.

Verified sources

- [NHS inform: Treatment and recovery from delirium](#)
- [NICE CG103: Information, support and documentation](#)
- [SIGN 157: Risk reduction and management of delirium](#)
- [NHS: Sudden confusion \(delirium\)](#)

Use and review: UK-focused general education. This resource supports but does not replace clinical assessment, individual advice or current local guidance. Prepared from source materials curated by Professor Alasdair MacLulich, University of Edinburgh; AI-assisted production. Professor MacLulich led development of the 4AT and reports no financial interest in its uptake. Final named human clinical approval is required before use in patient care. Independent resource; not an official University of Edinburgh or NHS publication.