

Glasgow Coma Scale (GCS) Chart

Use the number that correlates with the patient's absolute best response for all three categories when performing these checks.

Eye opening (E)

- 4 Spontaneous (opens eyes on their own without any interaction)
- 3 To sound (call the patient's name, if unknown, use sir or ma'am)
- 2 To pressure (use painful stimuli such as rubbing their sternum or pinching their fingernail)
- 1 None (does not open eyes at all)

NT Not testable (if patient has edema/swelling around the eyes or the eyes aren't visible)

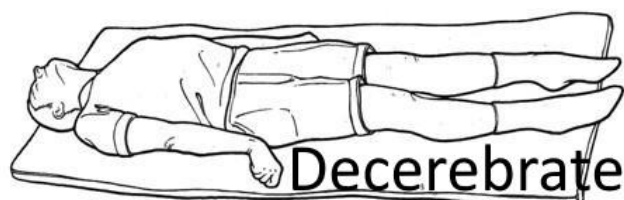
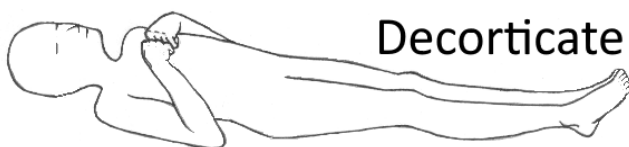
Verbal Response (V)

- 5 Oriented (talks normally, knows who they are (person), where they are (place), and the month/year (time))
- 4 Confused (disoriented, responds appropriately but does not know one of the following: person, place, time)
- 3 Inappropriate words (talks in a way that doesn't make sense such as stringing together random phrases)
- 2 Incomprehensible sounds (mumbling, moaning, sighing, screaming)
- 1 No verbal response (makes no sounds whatsoever)

NT not testable (intubated)

Motor Response (M)

- 6 Obeys commands (will move limbs, shake head, smile, etc. when asked)
- 5 Localizes pain (moves towards body part where painful stimulus is applied)
- 4 Withdrawal from pain (attempts to move away hand when fingernail is pinched)
- 3 Flexion to pain (decorticate posturing: see picture below)
- 2 Extension to pain (decerebrate posturing: see picture below)
- 1 No motor response (does not move at all)



Result and Interpretation

The result is calculated by adding up all three of the numbers giving a total score ranging from 3 to 15. The injury is then classified into one of these three categories.

Minor: Greater than or equal to 13

Moderate: 9 to 12

Severe: Less than or equal to 8