

CREDIT VALLEY

THE CREDIT VALLEY HOSPITAL

PHYSICIAN'S ORDERS ALCOHOL WITHDRAWAL EMERGENCY MANAGEMENT

Weight: _____ (kg)

Allergies: _____

To complete the order form, fill in the required blanks and/or check the appropriate boxes.
To delete orders, draw one line through the item and initial.

Initial Management:

Initiate Clinical Pathway Alcohol Withdrawal

Close Observation Area

Ambulation with assistance if Clinical Institute Withdrawal Assessment – Alcohol (CIWA-Ar) less than or equal to 10

Intake and Output

DAT, no caffeine beverages

Encourage oral fluids

Monitoring:

CIWA-Ar score q1h until CIWA-Ar score is less than or equal to 10 for two consecutive assessments and then CIWA-Ar score q2h prn

Vital signs q1h if on po diazepam until CIWA-Ar score is less than or equal to 10 for two consecutive assessments and then vital signs q4h

Vital signs q15-30 minutes if IV diazepam until CIWA-Ar score is less than or equal to 10 for two consecutive assessments and then vital signs q4h

SpO₂ q1h and prn

Notify physician if respirations are less than 10 per minute

Consult:

Crisis Team

Labwork:

CBC, lytes, glucose, urea, creatinine, gamma GT, magnesium, AST, ALT, ALP, albumin, Tbili

ETOH level, serum osmolality

Accucheck

Urine Drug Screen

INR, PT, PTT

CK

Other: _____

Medication: (see Dosing Guidelines on reverse)

Thiamine 100 mg x 1 IM **OR** IV in 50 mL NS or D5W over 30 minutes at initiation of IV

Multivitamins 10 mL/L to be added to main IV bag x 1

Magnesium sulfate 2 g IV in 100 mL IV NS or IV D5W over 1 hour x 1

D5NS IV at _____ mL/h **OR** D5W IV at _____ mL/h

Diazepam 10 mg po q1h x 3 until CIWA-Ar score less than or equal to 10

OR

Diazepam 20 mg po q1h x 3 until CIWA-Ar score less than or equal to 10 (for severe withdrawal or history of withdrawal seizures)

OR

Diazepam _____ mg IV q15 minutes x 3 while awake (recommended dose 5-20 mg IV q1h) until CIWA-Ar score less than or equal to 10

Other: _____

Date: _____ Time: _____

MD SIGNATURE

DOSING GUIDELINES

Diazepam Loading Protocol for Alcohol Withdrawal *

(Reference from Project CREATE: Treatment of substance use disorders, a pocket reference. 1998)

(Use if CIWA-Ar score equal to or greater than 10)

Basic protocol	<ul style="list-style-type: none">• Diazepam 20 mg po q1-2h until symptoms abate or CIWA-Ar score less than 10. Tapering doses not required after load. <i>(Some inpatients require several hundred milligrams).</i>• Observe for 1-2 hours after last dose.• Take-home medication for outpatients generally not required; if take home diazepam is necessary, give no more than two to three 10 mg tablets.• Thiamine 100 mg IM then 100 mg po for 3 days.
If history of withdrawal seizures	<ul style="list-style-type: none">• Diazepam 20 mg q1h for a minimum of three doses.
If can't tolerate oral diazepam	<ul style="list-style-type: none">• Diazepam 2-5 mg IV/min – maximum 10-20 mg q1h; or lorazepam sl.
If severe liver disease, severe asthma or respiratory failure	<ul style="list-style-type: none">• Lorazepam sl, po 1-2 mg tid-qid <i>or</i>• Oxazepam 15-30 mg po tid-qid.
If hallucinosis	<ul style="list-style-type: none">• Haloperidol 2-5 mg IM/po q1-4h – max. 5 doses/day <i>Note: Haldol lowers seizure threshold. Use with caution in first 3 days; give 3 doses of diazepam 20 mg as seizure prophylaxis.</i>
Admit to hospital if	<ul style="list-style-type: none">• Still in withdrawal after 80 mg or more of diazepam.• Delirium tremens, recurrent arrhythmias or multiple seizures.• Medically ill.

* Loading protocol will not prevent seizures in patients taking large doses of benzodiazepines or barbiturates in addition to alcohol. Careful monitoring is required with elderly patients. Consider lowering the diazepam dose or using lorazepam.

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