London North West Healthcare



CIWA-m

Place patient sticker here

ALCOHOL WITHDRAWAL OBSERVATIONS CHART

Update (28/02/19)

Ref. Foy A. (2006) Clinical use of a shortened alcohol withdrawal scale in a general hospital

NAME: DOB:

Hospital Number:

WARD:								Date admitted:	:			110	spitai ivi	ullibei.			
001 0110	0	1	2	3	4	5	6	D	ATE								
COLOUR KEY							TIME										
									!4! - ! -								
One hourly on admission, then if there have been no positive scores									itials								
hav				•		ores		FREQUE	NCY:								
	STOP after 72hrs. 1hrly, 2hrly, 6																
Respira		/ r	ate	20 or					0	0	0	0	0	0	0	0	0
(per minu	te)			<u> </u>					1	1	1	1	1	1	1	1	1
				- 1 - J - 1					2	2	2	2	2	2	2	2	2
Temper	ratui	re		<u> </u>					0 1	0	0	0	0	0	0	1	0
					37.6-37.9°C 38.0°C or higher					2	2	2	2	2	2	2	2
Heart R	ato			_	95 or less					0	0	0	0	0	0	0	0
		ute		96-10					2	2	2	2	2	2	2	2	2
(beats per minute)				106-120					4	4	4	4	4	4	4	4	
				121 or higher					5	5	5	5	5	5	5	5	
Tremor	,			No tr	No tremor					0	0	0	0	0	0	0	0
(arms ext		d,		Faint	Faint tremor, noticeable to touch				2	2	2	2	2	2	2	2	2
fingers sp	read)		Mode	Moderate with arms extended					4	4	4	4	4	4	4	4
				Seve	Severe even with arms not extended					6	6	6	6	6	6	6	6
Sweatir	าg			No s	weat vis	ible			0	0	0	0	0	0	0	0	0
(observat	ion)			Barel	Barely perceptible, palms moist					2	2	2	2	2	2	2	2
			Bead	Beads of sweat visible					4	4	4	4	4	4	4	4	
				Dren	ching s	weats	3		6	6	6	6	6	6	6	6	6
1 13 1 1 1 1 1				Normal activity					0	0	0	0	0	0	0	0	
(your observations, include anxiety)		_	Slightly more than normal activity					2	2	2	2	2	2	2	2		
			Moderately fidgety and restless Pacing, or thrashing about constantly					4	4	4	4	4	4	4	4		
<u> </u>							_	-	6	6	6	6	6	6	6	6	6
Orientation "What date is this?"		Time and place NO ERRORS					0	0	0	0	0	0	0	0	0		
"What is t				-	ONE error					1	1	1	1	1	1	1	1
What io t	ino pi	uo	.		TWO errors					2	2	2	2	2	2	2	2
		THREE errors					3	3	3	3	3	3	3	3	3		
		Disorientated for date & place					4	4	4	4	4	4	4	4	4		
Quality				,				nversation	0	0	0	0	0	0	0	0	0
interaction with						livious to stracted	2	2	2	2	2	2	2	2	2		
assess					uently b		•		4	4	4	4	4	4	4	4	4
(Attention	on)			Unab	le to ir	iterac	with	you	6	6	6	6	6	6	6	6	6
Though	nt			No di	sturbar	ice			0	0	0	0	0	0	0	0	0
disturb	ance	es		Low	control	over n	ature	of thoughts	2	2	2	2	2	2	2	2	2
	(your observation			Constantly has unpleasant thoughts						4	4	4	4	4	4	4	4
based on speech))	Thoughts come too rapidly and in a														
					onnect			-	6	6	6	6	6	6	6	6	6
Visual o				Not p	resent				0	0	0	0	0	0	0	0	0
disturbances			Mild sensitivity (eg bothered by lights)					2	2	2	2	2	2	2	2	2	
	(see over for guide to hallucinations)		le to	Intermittent hallucinations						4	4	4	4	4	4	4	4
nanucinal			(seeing or feeling things you cannot see) Continuous hallucinations (see over)					4									
			0.5.5					, ,	6	6	6	6	6	6	6	6	6
	ADD UP ALL SCORES TO CALCULATE TOTAL PLEASE CHECK YOUR CALCULATIONS! out of 49																
CHLORD	IAZE	PC	XIDI	GIVE	: N? (re	cord	detail	s overleaf)									

SCORE on admission	1 st 24 hours, regular meds plus PRN (see over)	SCORE after 24hrs *	Set regular dose from Day 1 total PRN doses triggered by CIWA
Below 10	No treatment, monitor CIWA hourly	Below 16	No treatment, step down to when NEWS is done
10-21	Give 30mg Chlordiazepoxide, monitor hourly	16-21	Give 20mg Chlordiazepoxide, monitor two hourly
>21	Give 40mg Chlordiazepoxide, monitor hourly	>21	Give 30mg Chlordiazepoxide, monitor two hourly

Initial dose and first full day's prescription (daily total includes diazepam & lorazepam equivalent)

CIWA = more than 21

SEVERE WITHDRAWALS PRN dose 40mg, as necessary when triggered by CIWA.

Consider more frequent doses

CIWA = 10 to 21

MODERATE WITHDRAWALS PRN dose 30mg, as necessary when triggered by CIWA.

Be aware of withdrawals increasing

CIWA = 0 to 9

No regular Chlordiazepoxide, but continue to monitor symptoms with CIWA during first 72 hrs.

Consider PRN doses* in case of uncertainty or inaccurate history.

First day's total should be divided by 4 regular doses from day 2 (0600-0800 1200 1800 2200-2400). If this would mean a regular dose >40mg, consider 5 to 6 doses (ie 4 hourly).

Example regimens (consider slower reduction if day 1 total> 200mg)

	Severe wi	thdrawals			Moderate withdrawals					
	0600	1200	1800	2200	0600	1200	1800	2200		
Day 1		Total eg	. 160mg		Total eg. 80mg					
Day 2	40mg	40mg	40mg	40mg	20mg	20mg	20mg	20mg		
Day 3	30mg	30mg	30mg	30mg	20mg	10mg	10mg	20mg		
Day 4	20mg	20mg	20mg	20mg	10mg	10mg	10mg	10mg		

Note that to facilitated discharge day, doses can be combined to morning and lunch, eg in the above example, 20mg x2 rather than 10mg x4

Please record below details of additional Chlordiazepoxide taken, indicating PRN or STAT.

If patient becomes less responsive or over-sedated, note "CHLORDIAZEPOXIDE OMITTED" and enter 5 on drug chart. Inform medical team and ask to review.

Priority should be given to NEWS clinical response strategy. (First 3 here different scales to NEWS). NOTE that raised BP may be associated with increased anxiety, agitation and withdrawal state.

TIME & DATE	CIWA SCORE	COMMENTS (TO BE RECORDED ON NEW DRUG CHART IF AVAILABLE): CHLORDIAZEPOXIDE (REG, PRN, STAT, REFUSED)	SIGN or INITIALS

VISUAL DISTURBANCES: "Does the light appear too bright? Is its color different? Does it hurt your eyes?"

"Are you seeing anything disturbing to you? Are you seeing things you know are not there?" Commonly, alcohol withdrawal hallucinations involve crawling insects, snakes or spiders. Patients are often too disturbed to answer questions.

Occasionally, alcohol-related hallucinations involve the patient seeing someone who

is not there or appearing to carry out some unexplained task.

TACTILE DISTURBANCES: "Have you any itching, pins-and-needles sensation, burning or numbness?"

"Do you feel bugs crawling on or under your skin?"

AUDITORY DISTURBANCES: "Are you more sensitive to sounds around you?"

"Are you hearing things that distress you?"

"Are you hearing things you know are not there?"

ALCOHOL NURSE SPECIALISTS



See alcohol care team page on LNWUH intranet for contact details.