



Clinical IS Update

Topic: Alcohol Withdrawal PowerPlan System-Wide Processes

Facility: All IU Health Facilities

Audience: Inpatient Providers

Effective Date

January 11, 2017

Contact

IU Health Help Desk
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Overview: *The following document is to present an overview of the consolidation of system-wide processes associated with identification and management of Alcohol Withdrawal in regard to both the Assessment and Treatment PowerPlans.*

Key Points

- Beginning January 2017, all of IU Health will use one standard tool, the Alcohol Withdrawal Assessment Tool (AWAT) to assess for symptoms of alcohol withdrawal.

Note: IU Health does not use the CIWA-Ar

- In 2016, treatment PowerPlans were consolidated to align with best practice approaches to care for these patients; there is one standard PowerPlan / Order Set titled **Alcohol Withdrawal** (available January 2017)

The Alcohol Withdrawal Assessment Tool (AWAT)

- Assesses 4 signs/symptoms (categories)
 - ◆ Pulse and BP, Agitation/Tremors, Confusion/Hallucinations, Diaphoresis
- Used in conjunction with Alcohol Withdrawal power plan to guide symptom triggered treatment (STT)
- Assessment/medication frequency based on TOTAL AWAT score

Alcohol Withdrawal Assessment Score	Reassess	Medication Frequency
0-1	Every 4 hours	None
2-4	Every 4 hours	Every 4 hours
5-7	In 2 hours	Every 2 hours
8 or more	In 15 minutes	Every 30 minutes
8 or more X 2	Call physician	

View Patient Results in Cerner

Go to Results Review, Alcohol Withdrawal Assessment

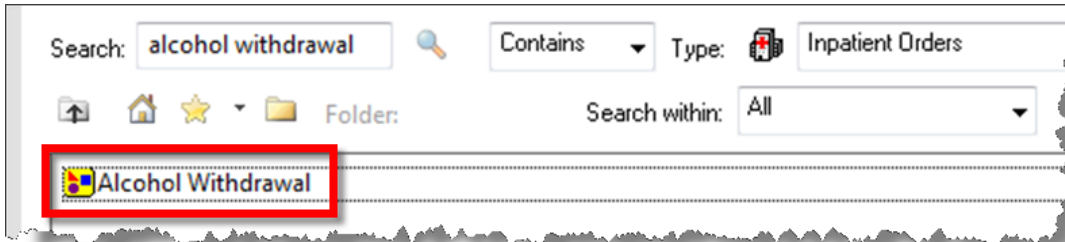
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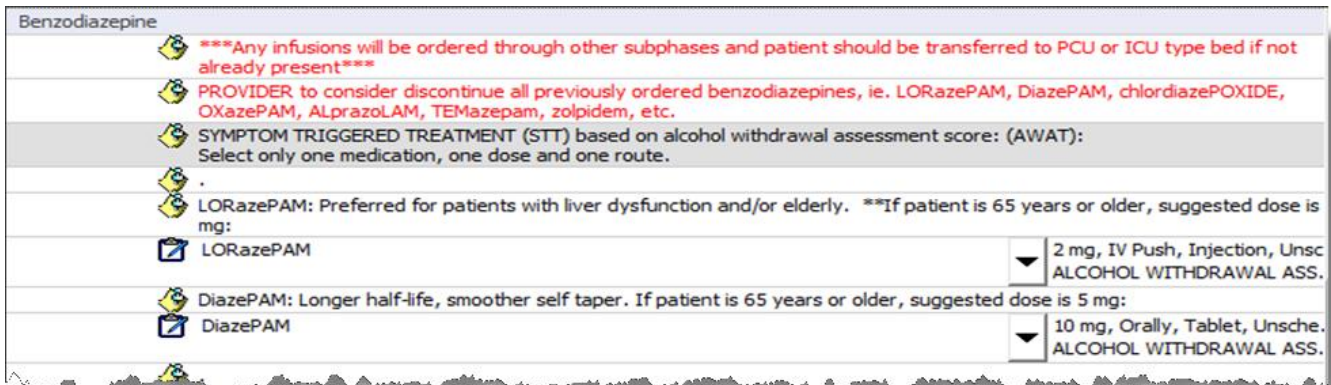
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Guidelines for Initiation of PowerPlan / Order Set

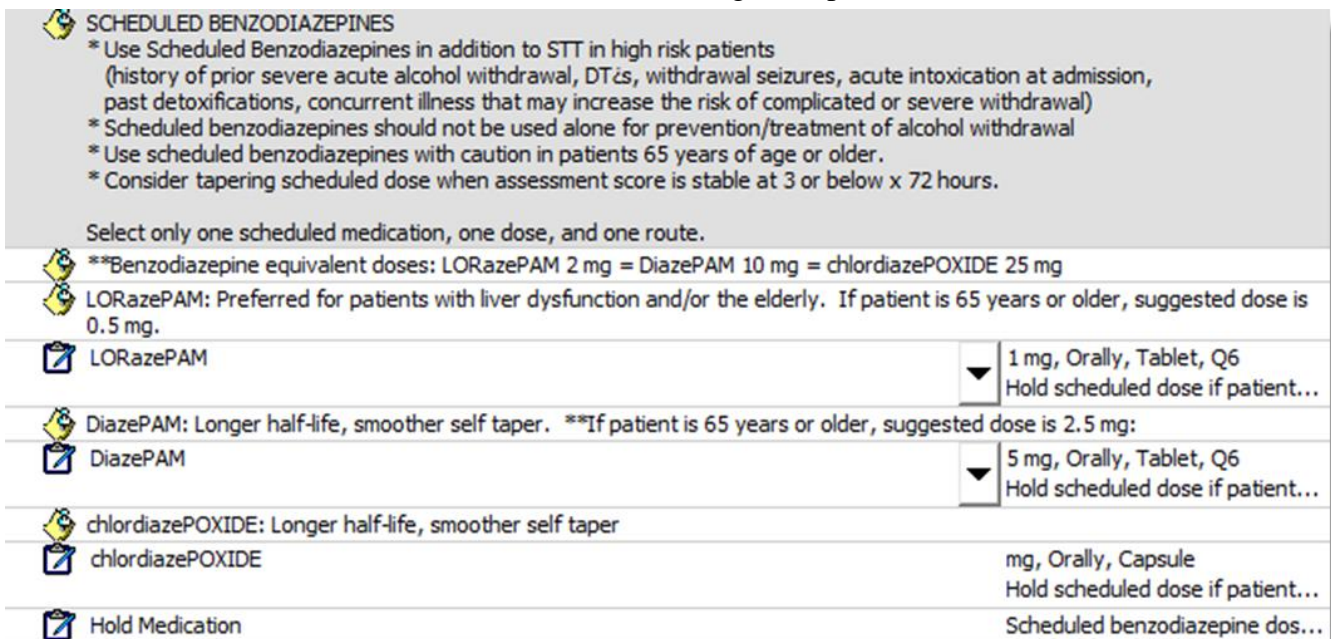
- 1 Use in combination with standard admitting order set.
- 2 Initiate EARLY, for suspected or active alcohol withdrawal.



- 3 Select BZD most appropriate, with route and dose.



- 4 Consider use of scheduled BZD, in addition to STT in high risk patients.



- 5 For refractory withdrawal consider transfer to higher level of care for continuous drips and/or other adjuvant medications to manage moderate to severe symptoms.
- 6 Consider tapering BZD when assessment score is stable at 3 or below.

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