## UW Medicine | VALLEY MEDICAL CENTER Alcohol Withdrawal: Inpatient Management

Questions? Contact 'Alcohol Withdrawal Consult Provider' via secure messaging

## **RISK OF SAWS\* RISK OF SEDATION OR RESPIRATORY COMPROMISE\*\*** +4 Points +1 Point • Greater than 10mg of lorazepam • Active severe SAWS (CIWA ≥ 20) • Recent and chronic active alcohol use equivalents in the last 12 hours • History of ICU admissions for SAWS • Binge drinking about 3x per week • Current PNA or other respiratory issue • History of alcohol withdrawal seizures (men: >5 or women: >4 drinks in 2hrs) • Rib fractures or chest wall injury • BAL >0.1 g/dL with signs of withdrawal or delirium tremens (DTs) • Current opiate administration • Elevated MCV or AST:ALT ratio • BAL >0.1 g/dL with signs of withdrawal • Administration of general anesthesia in AND elevated MCV or AST:ALT ratio • History of alcohol related injuries (falls, head injury, bone fractures, etc.) the last 12 hours Cirrhosis or Child-Pugh Score of >8 • Age >40 Assess for Patient Risk of Severe, Complicated **CONTRAINDICATIONS TO CIWA-Ar** Alcohol Withdrawal Current delirium/encephalopathy/AMS History of alcohol withdrawal delirium **High Risk of Severe** (delirium tremens) History of alcohol withdrawal seizures **Complicated Alcohol** YES (or primary seizure disorder) Withdrawal\*? • History of ICU admission for SAWS (SAWS RISK ≥ 4 points) Risk for or current active opioid NO withdrawal Active psychosis Contraindications to using Severe anxiety disorder YFS **STP CIWA-Ar?** NO Mild Withdrawal **Alcohol Withdrawal Severity? Severe Withdrawal** CIWA-Ar ≤10 (CIWA-Ar Score) CIWA-Ar ≥20 Moderate Withdrawal CIWA-Ar 11-19 Phenobarb Based Protocol (PBP) Phenobarb Based Protocol? • Discontinue Lorazepam YES-• Discontinue CIWA-Ar Mild Withdrawal • IVF Repletion NO • Recheck CIWA-Ar q4H • Initiate Phenobarbital Protocol • Contact provider if CIWA-Ar > 10 or • Loading dose: 15mg/kg IBW Symptom Triggered Protocol with CIWA-Ar CIWA-Ar < 10 for 24hrs (10mg/kg IBW if risk for sedation Lorazepam 1-2mg PO/IV q2H PRN or respiratory compromise\*\*) Recheck CIWA-Ar in q2H • Check phenobarbital serum Level 3 hours after loading dose

For questions please contact: CarePathways@ValleyMed.org

CIWA-Ar ≤10

for 24hrs?

YES

Discontinue CIWA-Ar

Protocol

This pathway is informational and for general guidance only. It is not intended to be used as or replace actual clinical judgment.

CIWA-Ar ≥20 or

Ensure serum phenobarb level checked

Ensure other primary medical issues addressed

Ensure PRN medications for agitation available

Consider transfer to CCU based on clinical

need or treatment with dexmedetomidine

Updated: September 26, 2023 Version: 3.0

-NO

• 12 hours later, initiate PHB

IBW PO BID x48 hours

YES-

maintenance dosing of 1mg/kg

**Increasing RASS score** 

4hrs after PBP load despite

appropriate interventions?