

# UW Medicine | VALLEY MEDICAL CENTER

## Alcohol Withdrawal: Inpatient Management

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

### RISK OF SAWS\*

#### +4 Points

- Active severe SAWS (CIWA  $\geq 20$ )
- History of ICU admissions for SAWS
- History of alcohol withdrawal seizures or delirium tremens (DTs)
- BAL  $>0.1$  g/dL with signs of withdrawal AND elevated MCV or AST:ALT ratio

#### +1 Point

- Recent and chronic active alcohol use
- Binge drinking about 3x per week (men:  $>5$  or women:  $>4$  drinks in 2hrs)
- BAL  $>0.1$  g/dL with signs of withdrawal
- Elevated MCV or AST:ALT ratio
- History of alcohol related injuries (falls, head injury, bone fractures, etc.)
- Age  $>40$

### RISK OF SEDATION OR RESPIRATORY COMPROMISE\*\*

- Greater than 10mg of lorazepam equivalents in the last 12 hours
- Current PNA or other respiratory issue
- Rib fractures or chest wall injury
- Current opiate administration
- Administration of general anesthesia in the last 12 hours
- Cirrhosis or Child-Pugh Score of  $>8$

### CONTRAINDICATIONS TO CIWA-Ar

- Current delirium/encephalopathy/AMS
- History of alcohol withdrawal delirium (delirium tremens)
- History of alcohol withdrawal seizures (or primary seizure disorder)
- History of ICU admission for SAWS
- Risk for or current active opioid withdrawal
- Active psychosis
- Severe anxiety disorder

