



COHESIVE HEALTHCARE MANAGEMENT & CONSULTING

**Mangum Regional Medical Center
ALCOHOL INTOXICATION & WITHDRAWAL PROTOCOL**

*****All Items With a Box Must Be Checked by the Provider*****

Date:	Time:
Patient Name:	
Allergies:	
Protocol Orders	
1. Nursing Orders	
a) Place in quiet room, low light, minimal stimulation	
b) Safety Precautions: Assess fall risk, suicide/self-harming behaviors (clear room of all objects that may cause harm, one-on-one observation if required). Implement safety precautions as indicated. <i>If patient suicidal/homicidal ideation; use the ASQ Suicide Risk Screening Tool & if positive see Care & Treatment of the Psychiatric Patient Policy.</i>	
2. Insert Peripheral IV. Sodium Chloride 0.9% 10mL flush prn for line patency	
3. Vital Signs & Monitoring	
Alcohol Intoxication	
<ul style="list-style-type: none"> • Every hour until patient shows signs of returning to baseline; then every hour until patient shows signs of returning to baseline; then • Every 4 hours • As needed (PRN) • At discharge or transfer 	
Alcohol Withdrawal	
<ul style="list-style-type: none"> • Mild withdrawal every 4 hours • Moderate withdrawal every 2 hours • Severe withdrawal every hour • As needed (PRN) • At discharge or transfer 	
4. Assess patient (in withdrawal) response using the CIWA-Ar Assessment Tool as follows:	
<input type="checkbox"/> If an IV Benzodiazepine is administered, perform CIWA-Ar assessment 15 minutes after dose <input type="checkbox"/> If a PO/IM Benzodiazepine is administered, perform CIWA- Ar assessment 2 hours after dose <input type="checkbox"/> If no treatment provided, perform CIWA-Ar assessment every 4 hours	
5. FSBS immediately. If FSBS 60 mg/dL or less, recheck FSBS. If FSBS less than 40 mg/dL obtain serum glucose and select appropriate treatment sequence from options below:	
Patient Conscious & Able to Swallow	Patient Unable to Swallow
Administer one of the following: <input type="checkbox"/> 3 Glucose Tablets <input type="checkbox"/> 4 ounces orange juice (if not renal patient) <input type="checkbox"/> 8 ounces of skim/2% milk <input type="checkbox"/> 4 ounces of regular soft drink <input type="checkbox"/> Repeat FSBS 15 minutes post treatment. If FSBS still 60 mg/dL or less, repeat treatment above and notify provider for additional orders	If patient has IV access: <input type="checkbox"/> Administer D50W 50 (25 grams) IV push. Recheck Blood Glucose in 10 minutes. <input type="checkbox"/> If FSBS 60 mg/dL or less give D50W (25 grams) IV push and notify provider for additional orders If patient has NO IV access: <input type="checkbox"/> Administer glucagon 1mg subcutaneously. Repeat FSBS 15 minutes post treatment <input type="checkbox"/> If FSBS 60 mg/dL or less and IV access obtained, give D50W (25 grams) IV push and notify provider for additional orders

6. Labs if indicated: <input type="checkbox"/> CBC <input type="checkbox"/> CMP <input type="checkbox"/> Ethanol Level <input type="checkbox"/> Amylase <input type="checkbox"/> Lipase <input type="checkbox"/> PT/INR <input type="checkbox"/> PTT <input type="checkbox"/> UA <input type="checkbox"/> Lactate <input type="checkbox"/> ABGs <input type="checkbox"/> Urine Drug Screen <input type="checkbox"/> Blood Cultures <input type="checkbox"/> FSBS every 6 hours <input type="checkbox"/> FSBS AC&HS
7. Diagnostics if indicated: <input type="checkbox"/> ECG <input type="checkbox"/> Chest X-ray <input type="checkbox"/> Non-contrast Head CT
8. IV fluids (check box as applicable): <input type="checkbox"/> Normal Saline 0.9% 1000mL 999mL/hr bolus <input type="checkbox"/> Normal Saline 0.9% 1000mL at _____/hr <input type="checkbox"/> Lactated Ringers 1000mL 999mL/hr bolus <input type="checkbox"/> Lactated Ringers 1000mL at _____/hr <input type="checkbox"/> Banana Bag at _____/hr (NS 1000mL with Multivitamin 10mL, Folic acid 1mg) x1 <input type="checkbox"/> D5W 50mL with Thiamine 100 mg IV x1. Infuse over 30 minutes; rate = 50mL/hr <input type="checkbox"/> Magnesium sulfate 1 gram IV x1. Infuse over 60 minutes; rate = 100mL/hr
9. Maintenance Banana Bag(s): Daily for 3 days only: <input type="checkbox"/> D5W 50mL with Thiamine 100 mg IV x1. Infuse over 30 minutes; rate = 50mL/hr <input type="checkbox"/> Magnesium sulfate 1 gram IV x1. Infuse over 60 minutes; rate = 100mL/hr <input type="checkbox"/> NS 0.9% 500mL with Folic acid 1 mg IV x 1. Infuse over 5 hours; rate = 100mL/hr <input type="checkbox"/> NS 0.9% 500 mL with Multivitamin 10mL IV x 1. Infuse over 5 hours; rate = 100mL/hr
10. Additional Medications to start on day 4 or after Banana Bag discontinued: <input type="checkbox"/> Thiamine 100 mg PO daily <input type="checkbox"/> Folic acid 1 mg PO daily <input type="checkbox"/> Multivitamin 1 tab PO daily
11. Alcohol Withdrawal Prophylaxis Medications: <input type="checkbox"/> Baclofen 10mg PO TID <input type="checkbox"/> Chlordiazepoxide 25 mg PO TID <input type="checkbox"/> Chlordiazepoxide 50 mg PO TID <input type="checkbox"/> Diazepam 5 mg PO TID <input type="checkbox"/> Diazepam 5 mg PO every 6 hours prn agitation/withdrawal symptoms <input type="checkbox"/> Diazepam 10 mg PO TID <input type="checkbox"/> Diazepam 10 mg PO every 6 hours prn agitation/withdrawal symptoms <input type="checkbox"/> Diazepam 5 mg IV every 6 hours prn agitation/withdrawal symptoms <input type="checkbox"/> Diazepam 10 mg IV every 6 hours prn agitation/withdrawal symptoms <input type="checkbox"/> Lorazepam 1 mg PO QID <input type="checkbox"/> Lorazepam 1 mg PO every 4 hours prn agitation/withdrawal symptoms <input type="checkbox"/> Lorazepam 2 mg PO every 4 hours prn agitation/withdrawal symptoms <input type="checkbox"/> Lorazepam 2 mg IV every 6 hours prn agitation/withdrawal symptoms if unable to take PO <input type="checkbox"/> Lorazepam 2 mg IM every 6 hours prn agitation/withdrawal symptoms if unable to take PO or IV
ADDITIONAL ORDERS

Severe Withdrawal- Borgundvaag, B. MD.; and Kahan, M. MD. (2016). Alcohol Withdrawal and Delirium Tremens: Diagnosis and Management. Emergency Medicine Cases. [Electronic Version] Retrieved on 01/17/20 from <https://emergencymedicinecases.com/alcohol-withdrawal-delirium-tremens/> [Fluid recommendations](#)

American Society of Addiction Medicine. (2020). *The ASAM Clinical Practice Guideline on Alcohol Withdrawal Management*. Retrieved on 07/01/20 from https://www.asam.org/docs/default-source/quality-science/the_asam_clinical_practice_guideline_on_alcohol-1.pdf?sfvrsn=ba255c2_2

Nurse Signature: _____ **Date:** _____ **Time:** _____

Provider Signature: _____ **Date:** _____ **Time:** _____