Physician Orders ADULT: BEH Withdrawal Syndrome Protocol Plan

Initiate Orders Phase
Care Sets/Protocols/PowerPlans

☑️ Initiate Powerplan Phase
  
  Phase: BEH Withdrawal Syndrome Protocol Phase, When to Initiate: ________________

BEH Withdrawal Syndrome Protocol Phase

Patient Care

☑️ Delirium Tremens Precautions
☑️ Sedation Goal per Riker Scale
  
  Goal: 4 (Calm/Cooperative)

☑️ Nursing Communication
  
  BEH Withdrawal Syndrome Protocol: Assess and document Riker scale prior to administration of each scheduled or PRN dose of lorazepam and haloperidol. Hold dose if Riker score less than 4.

☑️ Nursing Communication
  
  BEH Withdrawal Syndrome Protocol: Document date and time of DT onset.

Medications

☑️ +1 Hours thiamine
  
  100 mg, Tab, PO, QDay, Routine, (for 3 day )

☑️ +1 Hours folic acid
  
  1 mg, Tab, PO, QDay, (for 3 day )

☑️ +1 Hours multivitamin
  
  1 tab, Tab, PO, QDay, Routine

If patient unable to tolerate PO, order Thiamine and Folic Acid IM below:(NOTE)*

☐️ +1 Hours thiamine
  
  100 mg, Injection, IM, QDay, PRN If unable to take PO, Routine, (for 3 day )

☐️ +1 Hours folic acid
  
  1 mg, Injection, IM, QDay, PRN If unable to take PO, Routine, (for 3 day )

If patient is low risk for DT, has COPD or other respiratory illnesses, order lorazepam 1mg from the following orders below:(NOTE)*

☑️ +1 Hours LORazepam
  
  1 mg, Tab, PO, q1h, PRN Alcohol Withdrawal Symptoms, Routine
  
  Comments: HOLD if Riker score less than 4, for low risk DT to maintain a calm awake state Riker = 4

☑️ +1 Hours LORazepam
  
  1 mg, Injection, IM, q1h, PRN Alcohol Withdrawal Symptoms, Routine
  
  Comments: HOLD if Riker score less than 4, may give if unable to tolerate PO for low risk DT to maintain a calm awake state Riker = 4

If patient is High Risk for DT which is defined as: Prior history of alcohol withdrawal or DT, history of withdrawal seizures, daily consumption of large quantities (more than 2 drinks per day) of alcohol, patient exhibits signs/symptoms of early alcohol withdrawal, Order additional scheduled Lorazepam PO or IM below:(NOTE)*

Lorazepam PO for High Risk DT Prophylaxis, place BOTH orders below:(NOTE)*

☐️ +1 Hours LORazepam
  
  2 mg, Tab, PO, q4h, Routine, (for 12 dose )
  
  Comments: HOLD if Riker score less than 4

☐️ LORazepam
  
  1 mg, Tab, PO, q6h, Routine, (for 6 dose )
  
  Comments: HOLD if Riker score less than 4

Lorazepam IM for High Risk DT Prophylaxis, place BOTH orders below:(NOTE)*

☐️ +1 Hours LORazepam
  
  2 mg, Injection, IM, q4h, Routine, (for 12 dose )
  
  Comments: HOLD if Riker score less than 4
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1 mg, Injection, IM, q6h, Routine, (for 6 dose )
Comments: HOLD if Riker score less than 4
Alternative regimen for chlordiazepoxide for High Risk DT Prophylaxis (not recommended for use in hepatic impairment), place ALL three orders below:(NOTE)*

☐ +1 Hours chlordiazePOXIDE

50 mg, Tab, PO, q4h, PRN Alcohol Withdrawal Symptoms, Routine, (for 2 dose )
Comments: MAX DOSE 300 mg in 24 hours, Notify MD if patient requires more than MAX DOSE

☐ +1 Hours chlordiazePOXIDE

50 mg, Tab, PO, q6h, Routine, (for 4 dose )
Comments: HOLD if Riker score less than 4, MAX DOSE 300 mg in 24 hours, Notify MD if patient requires more than MAX DOSE

☐ chlordiazePOXIDE

25 mg, Tab, PO, q6h, Routine, (for 8 dose )
Comments: HOLD if Riker score less than 4, MAX DOSE 300 mg in 24 hours, Notify MD if patient requires more than MAX DOSE

Consults/Notifications/Referrals
☐ Notify Physician-Continuing
Notify For: at onset or if patient in DTs.

__________________________________________   ______________________________________
Date                        Time                   Physician’s Signature   MD Number

*Report Legend:
DEF - This order sentence is the default for the selected order
GOAL - This component is a goal
IND - This component is an indicator
INT - This component is an intervention
IVS - This component is an IV Set
NOTE - This component is a note
Rx - This component is a prescription
SUB - This component is a sub phase, see separate sheet
R-required order