



**CORRECTIONS MEDICINE**  
**Withdrawal for Alcohol and Chemically Dependent Patients**  
**ACA Standard: 4 ALDF – 4C – 36**

Effective: January 1994  
Revised: Aug 2001, Apr 2016, Jan 2017, Jan 2019, Aug 2019  
Reviewed: Aug 2001, May 2013, Aug 2014, May 2018

Policy Number:  
CM – 55

- I. **PURPOSE:** To provide a systemic mechanism for symptoms of withdrawal for the newly incarcerated patients at the Buzz Westfall Justice Center.
  
- II. **POLICY:** All newly incarcerated patients who report use of alcohol, benzodiazepine or opioids, or have a positive urine drug screen (UDS) for such substances shall be medically evaluated, observed for symptoms of withdrawal, and medicated for symptoms of withdrawal, when indicated.
  
- III. **RESPONSIBILITY:** All staff working in the Corrections Medicine program are responsible for the content of this policy and procedure as well as adherence to the policy.
  
- IV. **PROCEDURE:**
  - 1. Evaluation Upon Intake
    - a. A nurse shall assess the patient for a history of alcohol and drugs of abuse. If the patient reports a history of use or abuse, the nurse shall complete a detailed assessment of the patient’s history.
  
    - b. An opt-out UDS shall be performed on all patients.
  
  - 2. Treatment
    - a. All patients undergoing withdrawal shall be placed on bottom bunk/bottom tier with a cell mate for five (5) days.
  
    - b. Oral fluids shall be encouraged to prevent complications of dehydration.
  
    - c. All patients who report or have a history of regular alcohol use, current withdrawal symptoms from alcohol or exhibit symptoms concerning alcohol use shall be placed on the Clinical Institute Withdrawal Assessment for Alcohol (CIWA-Ar) scale. The patient shall be monitored for seven (7) days or until symptoms are no longer present.
  
    - d. All patients who report having a history of benzodiazepine use or abuse will have a UDS to evaluate for the presence of benzodiazepines.
      - i. When benzodiazepines are present, the patient shall be started on the CIWA-Ar assessment and nurse shall contact the provider for further orders. If the UDS is negative the patient shall be started on CIWA-Ar assessment for observation for symptoms for withdrawal. The patient shall be continued on the CIWA-Ar assessment for seven (7) days or until symptoms of withdrawal are no longer present.

- ii. CIWA-Ar scores shall be monitored and providers will be contacted according to the withdrawal protocols if additional orders are needed, including infirmary care, medications, IV fluids, or transferred to a hospital.
  
- e. Patients who report or have a history of opiate use or abuse or have a positive UDS for opioids shall be placed on the Clinical Opiate Withdrawal Scale (COWS).
  - i. COWS scores will be monitored and a provider shall be notified if scores are elevated, according to the withdrawal scoring protocols. Provider orders may include medications, infirmary care, IV fluids, or transfer to a hospital.

V. **REFERENCES:**

American Correctional Association; Performance-Based Standards for Adult Local Detention Facilities, fourth edition; 2004; Standard 4-ALDF-4C-36

National Commission on Correctional Health Care; Standards for Health Services in Jails; 2018