

Clinical institute withdrawal assessment for alcohol, revised

Date:

Name:

DOB:

Time of assessment				
HR				
BP				
Temp				
Nausea/vomiting (0-7)				
0- none; 1- mild nausea, no vomiting; 4- intermittent nausea; 7- constant nausea, frequent dry heaves & vomiting				
Tremors (0-7)				
0- no tremor; 1- not visible but can be felt; 4- moderate with arms extended; 7- severe, even with arms not extended				
Anxiety (0-7)				
0- none, at ease; 1- mildly anxious; 4- moderately anxious or guarded; 7- equivalent to acute panic state				
Agitation (0-7)				
0- normal activity; 1- somewhat normal activity; 4- moderately fidgety/restless; 7- paces or constantly thrashes about				
Paroxysmal sweats (0-7)				
0- no sweats; 1- barely perceptible sweating, palms moist; 4- beads of sweat obvious on forehead; 7- drenching sweat				
Orientation (0-4)				
0- oriented; 1- uncertain about date; 2- disoriented to date by no more than 2 days; 3- disoriented to date by > 2 days; 4- disoriented to place and/or person				
Tactile disturbances (0-7)				
0- none; 1- very mild itch, P&N 2- mild itch, burning, P&N 3- moderate itch, P&N, burning 4- moderate hallucinations; 5- severe hallucinations; 6- extremely severe hallucinations; 7- continuous hallucinations				
Auditory disturbances (0-7)				
0- not present; 1- very mild harshness/ability to startle; 2- mild harshness/ability to startle; 3- moderate harshness/ ability to startle; 4- moderate hallucinations; 5- severe hallucinations; 6- extremely severe hallucinations; 7- continuous hallucinations				
Visual disturbances (0-7)				
0- not present; 1- very mild sensitivity; 2- mild sensitivity; 3- moderate sensitivity; 4- moderate hallucinations; 5- severe hallucinations; 6- extremely severe hallucinations; 7- continuous hallucinations				
Headache (0-7)				
0- not present; 1- very mild; 2- mild; 3- moderate; 4- moderately severe; 5- severe; 6- very severe; 7- extremely severe				
TOTAL				