

Addressograph label



### Opioid & Benzodiazepine Withdrawal - Non-PICU Observation Chart

**Date** weaning commenced \_\_\_\_\_

NB: For further details see overleaf and patients weaning chart

**SCORE 1 POINT FOR EACH SYMPTOM**

**Comments**

Date	Time	Tremors	Movemen disorder	Hallucinations "bad dreams"	Crying / agitation more than 1 out of 4 hrs	Pupils >4 mm	Sweating not related to environment or pyrexia	Vomiting Diarrhoea unexplained by feeding	SCORE Max=7	Clinical judgement In withdrawal? Yes/No	Write letter corresponding to symptom (s) present e.g. S.D.T			
											S sleeplessness	P poor social interaction	G tongue thrusting –give details	

## Opioid & Benzodiazepine Withdrawal Observation Chart Guidelines

<b>Use of Form</b>	To assess signs and symptoms of opioid and benzodiazepine withdrawal
<b>Eligibility</b>	Any extubated patient who exhibits signs of withdrawal Potentially any neonate, infant or child who has received opioids and/or benzodiazepines for more than 5 days
<b>Scoring interval</b>	<b>Every 6 hrs</b> Score any signs observed within the period <input type="checkbox"/> Write the score in the box for each scoring interval
<b>SYMPTOMS</b>	
<b>◆ Tremors</b>	Score <b>1</b> if patient has tremors when disturbed
<b>◆ Movement disorder</b>	Score <b>1</b> if muscle twitches or choreoathetosis observed (i.e. involuntary, irregular, dance-like, movements of arms, legs and face, or slow, twisting movements of hands, fingers, toes or feet)
<b>◆ Hallucinations</b>	Score <b>1</b> if hallucinations are reported by the older verbal child <input type="checkbox"/> disoriented behaviour observed in non-verbal child
<b>◆ Crying or agitation</b>	Score <b>1</b> if continuous unexplained crying or agitated behaviour for 1 hr or more intermittent episodes that total 1 hour, <b>despite efforts to console</b>
<b>◆ Eyes (pupils &gt; 4 mm)</b>	Score <b>1</b> if average pupil size > 4 mm
<b>◆ Sweating (unexplained)</b>	Score <b>1</b> if sweating is <b>not</b> related to environment or pyrexia (ie. room temperature, lights, clothing, etc)
<b>◆ Diarrhoea</b>	Score <b>1</b> if patient has unexplained diarrhoea loose stools that appears unrelated to changes in feeding regimen (ie. do not score for 'breast milk stools') or infection
<b>TOTAL SCORES</b>	
<b>Clinical judgement</b> (Withdrawal Yes/No)	Add the points for the scoring period. Write in the 'Total Score' box. <b>Maximum total points = 7</b> Mark 'Y' if overall clinical judgement is that the child <b>is</b> experiencing withdrawal Mark 'N' if overall clinical judgement is that the child <b>is not</b> experiencing withdrawal This independent judgement may or may not match the 'Total Score'. If it does not, please add comments.
<b>Comments</b> (please specify)	Comment on other symptoms such as Sleeplessness, hypertension, tachycardia, facial grimacing, poor social interaction poor visual tracking, dystonic postures, tongue thrusting, any others you observe anxiety as communicated by the older child Parents' perceptions may be included. Also note signs of withdrawal related to clinical treatment (eg. drugs that affect CNS / GI function).
<b>TREATMENT</b>	
<b>If score ≥ 3 consider</b>	<b>Provide environmental and psychological support for all patients:</b> Rocking/ rhythmic movement quiet, darkened room, reassurance, swaddling and sucking for babies slowing down rate of reduction of opioid or benzodiazepine recommencing patient on an opioid or benzodiazepine (whichever was stopped most recently) increasing the dose of opioid or benzodiazepine
<b>If score ≤ 2 consider</b>	Continuing to reduce opioid or benzodiazepine as per regime If score < 2 for more than 48 hours, consider increasing speed of withdrawal