

# State of Iowa Department of Corrections

## Policy and Procedures

Policy Number: HSP-607  
Applicability: DOC  
Policy Code: Public Access  
Iowa Code Reference: N/A  
Chapter 6: Health Services  
Sub Chapter: Acute/Specialty Services  
Related DOC Policies: N/A  
Administrative Code Reference: N/A  
Subject: Substance Withdrawal Management  
ACA Standards: 5-ACI-6A-41  
Responsibility: Dr. Jerome Greenfield  
Effective Date: March 2021  
Authority:

### 1. PURPOSE

To define and initiate initial management of patients within the Iowa Department of Corrections (IDOC) demonstrating signs of withdrawal to substances of abuse.

### 2. POLICY

It is the policy of the Iowa Department of Corrections (IDOC) to identify patients with substance withdrawal to ensure appropriate withdrawal management including medical detoxification. **(5-ACI-6A-41)**

### 3. DEFINITIONS

- A. Intoxication – a state of physiological impairment caused by substance usage.
- B. Withdrawal – an acute physiological and/or psychological disturbance resulting from the reduction or discontinuation of substances of abuse.
- C. See IDOC Policy **AD-GA-16** for additional Definitions.

### 4. PROCEDURE

- A. Initial evaluation of patients thought to be experiencing signs or symptoms of substance withdrawal.

1. The initial health screening and initial health appraisal identifies patients suspected to be experiencing substance withdrawal. A licensed medical practitioner shall be notified for orders.
2. If immediate notification is not necessary, the patient shall be scheduled for a high priority physical or physician encounter so he or she may be seen within 24 hours of intake.
3. At a minimum, nursing staff shall initiate vital sign checks each shift until evaluated by a practitioner.

B. Clinical assessment of the patient with substance withdrawal.

1. Vital signs
2. Past Medical History – date of last substance use, current medications, psychiatric history, previous withdrawal history, i.e. previous withdrawal seizures or DT's.
3. Social history – substance use, living situation, date of incarceration.
4. Physical Exam – evidence of intoxication, fluid and nutritional status, mental status.
5. Licensed medical practitioner determines that the patient has substance withdrawal requiring medical intervention.

C. Medical detoxification.

1. The severity of the withdrawal shall determine the intensity of service interventions.
2. Individualized treatment plans for withdrawal management shall be documented.
3. Patients undergoing medical detox shall be housed on a designated unit.
4. Symptom-triggered is the preferred form of treatment.
5. Alcohol/Benzodiazepine detoxification

a. *Initiate Detoxification Protocol, HSF-607 F-A*

- b. Determine the severity of the withdrawal by scoring the Clinical Institute Withdrawal Assessment of Alcohol Scale (CIWA-AR)
- c. Patients shall be referred to the nearest emergency department for management of complicated withdrawal, as defined by any one of the following:
  - 1) CIWA score > 15
  - 2) Hallucinosiis
  - 3) Seizures
  - 4) Delirium Tremens
  - 5) Severe somatic disease, especially infection

6. Opiate detoxification

- a. *Initiate Detoxification Protocol, HSF-607 F-O*
- b. Determine the severity of the withdrawal by scoring the Clinical Opiate Withdrawal Scale (COWS)
- c. Patients shall be referred to the nearest emergency department for management of COWS score > 36.