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**

| Date | Time | Tremors | Movement 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 | S sleeplessness | H hypertension | T tachycardia | F facial grimacing | P poor social interaction | V poor visual tracking | D dystonic posture | G tongue thrusting – give details | A anxiety (communicated by older children) | O other |
|------|------|---------|-------------------|-----------------------------|------------------------------------------|-------------|-----------------------------------------------|----------|--------------------------------------|-------------|-----------------------------------|----------------|---------------|--------------|----------------|----------------------|----------------|----------------|----------------|------------------------|-----------------|---|
|      |      |         |                   |                             |                                          |             |                                               |          |                                      |             | In withdrawal? Yes/No | S sleeplessness | H hypertension | T tachycardia | F facial grimacing | P poor social interaction | V poor visual tracking | D dystonic posture | G tongue thrusting – give details | A anxiety (communicated by older children) | O other |

**Comments**

Write letter corresponding to symptom(s) present e.g. S.D.T
## Opioid & Benzodiazepine Withdrawal Observation Chart

### Guidelines

<table>
<thead>
<tr>
<th>Use of Form</th>
<th>To assess signs and symptoms of opioid and benzodiazepine withdrawal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligibility</td>
<td>Any extubated patient who exhibits signs of withdrawal</td>
</tr>
<tr>
<td></td>
<td>Potentially any neonate, infant or child who has received opioids and/or benzodiazepines for more than 5 days</td>
</tr>
</tbody>
</table>

### Scoring interval

**Every 6 hrs** Score any signs observed within the period

Write the score in the box for each scoring interval

### SYMPTOMS

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tremors</td>
<td>1</td>
</tr>
<tr>
<td>Movement disorder</td>
<td>1</td>
</tr>
<tr>
<td>Hallucinations</td>
<td>1</td>
</tr>
<tr>
<td>Crying or agitation</td>
<td>1</td>
</tr>
<tr>
<td>Eyes (pupils &gt; 4 mm)</td>
<td>1</td>
</tr>
<tr>
<td>Sweating (unexplained)</td>
<td>1</td>
</tr>
<tr>
<td>Diarrhoea</td>
<td>1</td>
</tr>
</tbody>
</table>

### TOTAL SCORES

Add the points for the scoring period. Write in the ‘Total Score’ box. **Maximum total points = 7**

### Clinical judgement

(Withdrawal Yes/No)

- Mark ‘Y’ if overall clinical judgement is that the child is experiencing withdrawal
- Mark ‘N’ if overall clinical judgement is that the child is not experiencing withdrawal

This independent judgement may or may not match the ‘Total Score’. If it does not, please add comments.

### Comments

(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).

### TREATMENT

Provide environmental and psychological support for all patients:

- Rocking/ rhythmic movement quiet, darkened room, reassurance, swaddling and sucking for babies

**If score ≥ 3 consider**

- 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

**If score ≤ 2 consider**

- Continuing to reduce opioid or benzodiazepine as per regime
- If score < 2 for more than 48 hours, consider increasing speed of withdrawal

---

Used with permission Pain Control service GOSH NHS trust

---

\[\text{Addressograph label}\]

\[\text{Used with permission Pain Control service GOSH NHS trust}\]