

 <p style="text-align: center;">DIVISION OF ADULT INSTITUTIONS</p> <p style="text-align: center;">POLICY AND PROCEDURES</p>	DAI Policy #: 500.30.66	Page 1 of 4
	Original Effective Date: 04/07/14	New Effective Date: 10/01/16
	Supersedes: 500.30.66	Dated: 10/30/14
	Last Reviewed, No Changes: 06/20/17	
	Administrator's Approval: Jim Schwochert, Administrator	
Required Posting or Restricted:		
<input checked="" type="checkbox"/> Inmate <input checked="" type="checkbox"/> All Staff <input type="checkbox"/> Restricted		
Chapter: 500 Health Services		
Subject: Intoxication and Withdrawal		

POLICY

Division of Adult Institution facilities shall ensure all inmate patients are screened for alcohol and other drug use history on intake and during incarceration. Inmate patients are assessed and treated for intoxication and/or withdrawal when identified.

REFERENCES

Standards for Health Services in Prisons – National Commission on Correctional Health Care, 2014, P-G-07 – Intoxication and Withdrawal
DAI Policy 500.30.49 – Initial Health Assessment
DAI Policy 500.30.56 – Receiving Screening
DAI Policy 500.80.14 – Methadone/Buprenorphine Treatment

DEFINITIONS, ACRONYMS, AND FORMS

Advanced Care Provider (ACP) – A provider with prescriptive authority.

DOC-3021 – Progress Notes

DOC-3023G – Prescriber's Orders – Standard Orders – Opiate/Methadone Withdrawal

DOC-3023H – Prescriber's Orders – Standard Orders – Alcohol Withdrawal

DOC-3464 – Opioid Withdrawal Assessment

DOC-3465 – Alcohol Withdrawal Assessment

Synthetic Cannabis (synthetic marijuana) – Technically synthetic cannabinoid receptor agonists, is any drug that mimics the effects of cannabis sprayed onto an herbal base material. There are several psychoactive artificial cannabinoid families that are used as designer drugs sprayed on herbs and sold as natural highs under brand names like K2 and Spice.

PROCEDURE

- I. **Identification and Management of Inmate Patients with Alcohol/Benzodiazepine, Narcotic, Synthetic Cannabis, or other Sedative Intoxication or Withdrawal Symptoms**

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- A. Inmate patients shall be screened immediately upon arrival to a facility consistent with DAI Policy 500.30.56 and 500.30.49.
- B. Inmate patients experiencing severe, life-threatening intoxication, overdose or withdrawal shall be sent immediately to the local emergency department for care and treatment.
- C. Any DOC staff who encounters an inmate who appears to be experiencing altered mental status shall promptly notify HSU.
- D. Licensed nursing staff shall promptly complete assessment and ensure effective monitoring of the inmate patient in a safe location.
 - 1. The assessment shall be documented on DOC-3464 – Opioid Withdrawal Assessment and/or DOC-3465 – Alcohol Withdrawal Assessment.
 - 2. Additional notes shall be documented in the DOC-3021 – Progress Notes as needed.
- E. Licensed nursing staff shall consult with an ACP any time there is a concern or abnormal shift in the assessment/monitoring findings.
- F. Treatment orders for alcohol/benzodiazepine and/or opioid withdrawal require an ACP order to implement. These include:
 - 1. DOC-3023G – Prescriber’s Orders – Standard Orders-Opiate/Methadone Withdrawal.
 - 2. DOC–3023H – Prescriber’s Orders – Standard Orders – Alcohol Withdrawal.
 - 3. Additional treatment orders after consultation with an ACP.
- G. Inmate patients at risk for progression to more severe levels of intoxication or withdrawal shall be kept under ongoing observation by licensed health care staff. When severe withdrawal symptoms are observed, an ACP shall be immediately consulted, or the inmate patient shall be immediately sent to the local emergency department.
- H. In situations where there is no HSU staff on site, activate EMS and notify the on-call nurse.
- I. If a pregnant inmate patient is admitted with a history of opiate (or other similar substance) dependence, an ACP shall be contacted so the dependence can be assessed and treated. The ACP shall consult with a specialty provider for appropriate treatment plan.
- J. Pregnant females on methadone, buprenorphine, or naloxone shall have their therapy continued per DAI Policy 500.80.14. After delivery, an appropriate treatment and medical support for withdrawal of the methadone, buprenorphine, or naloxone shall be followed.

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Bureau of Health Services: _____ **Date Signed:** _____
James Greer, Director

_____ **Date Signed:** _____
Ryan Holzmacher, MD, Medical Director

_____ **Date Signed:** _____
Mary Muse, Nursing Director

Administrator's Approval: _____ **Date Signed:** _____
Jim Schwochert, Administrator

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

Facility: Name		
Original Effective Date:	DAI Policy Number: 500.30.66	Page 4 of 4
New Effective Date: 00/00/00	Supersedes Number:	Dated:
Chapter: 500 Health Services		
Subject: Intoxication and Withdrawal		
Will Implement <input type="checkbox"/> As written <input type="checkbox"/> With below procedures for facility implementation		
Warden's/Center Superintendent's Approval:		

REFERENCES**DEFINITIONS, ACRONYMS, AND FORMS****FACILITY PROCEDURE**

I.

A.

B.

1.

2.

a.

b.

c.

3.

C.

II.

III.

RESPONSIBILITY

I. Staff

II. Inmate

III. Other