Improving Identification and Management of Admitted Patients at High Risk for Moderate to Severe Alcohol Withdrawal Syndrome (AWS).

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The Inspiration

PATIENT STORY

B.T. 57 y.o male with history of HIV, depression, polysubstance abuse (ETOH, cocaine), admitted with left arm numbness.

- On admission has elevated troponin, concerned for coronary vasospasm after cocaine use
- CIWA protocol not initiated on admission
- No alcohol level ordered
- 1 day post admission- 2 behavioral calls called due to severe agitation
- Patient received multiple doses of Ativan and Haldol + patient placed on restraints
- Patient transferred to the ICU for precedex drip

PROVIDER'S PERSPECTIVE

Importance

Why does this project matter?

- Alcohol withdrawal syndrome often not recognized until patients displayed severe symptoms that resulted in adverse outcomes and safety concerns.

- Severe AWS more than doubles the length of stay and frequently requires treatment at the ICU.
- Delayed diagnosis and treatment of alcohol withdrawal syndrome will result in several adverse patient and staff outcomes.
- Standardization of care

Aim

What are we trying to accomplish?

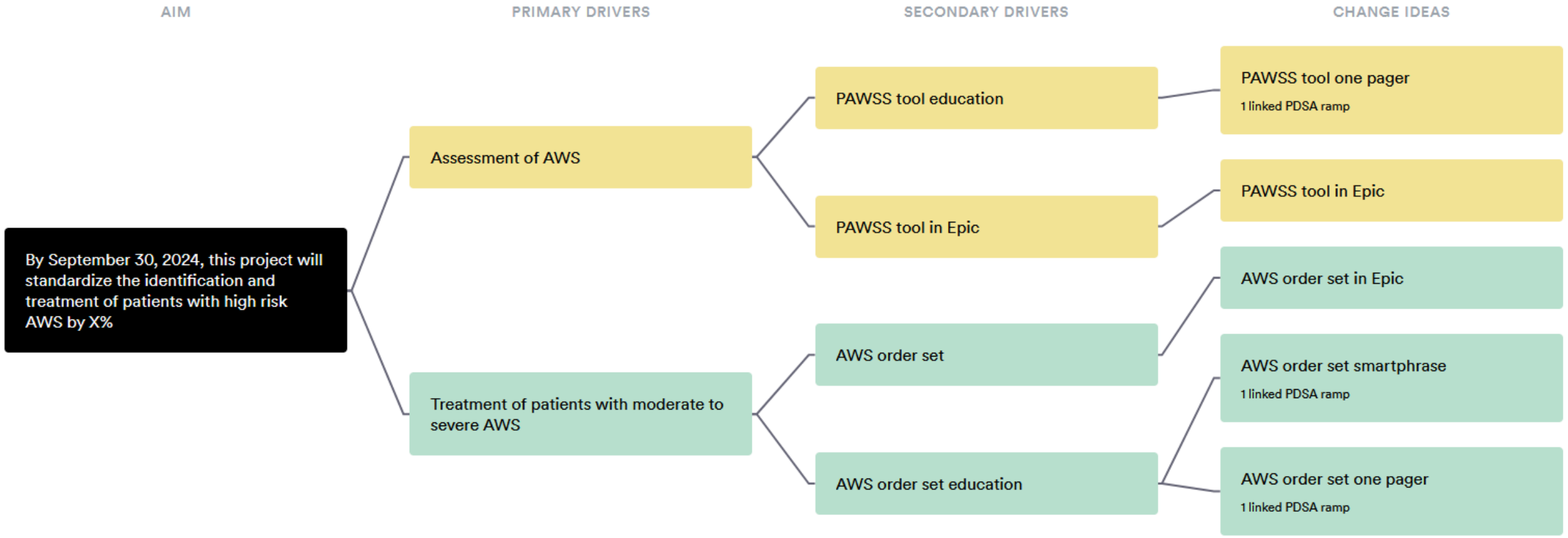
- To improve identification of patients admitted with high risk of AW by using a PAWSS calculator that will be integrated in Epic.

- Standardization of care of our patients with alcohol use disorder (develop a protocol/guideline/addition of Phenobarbital therapy).

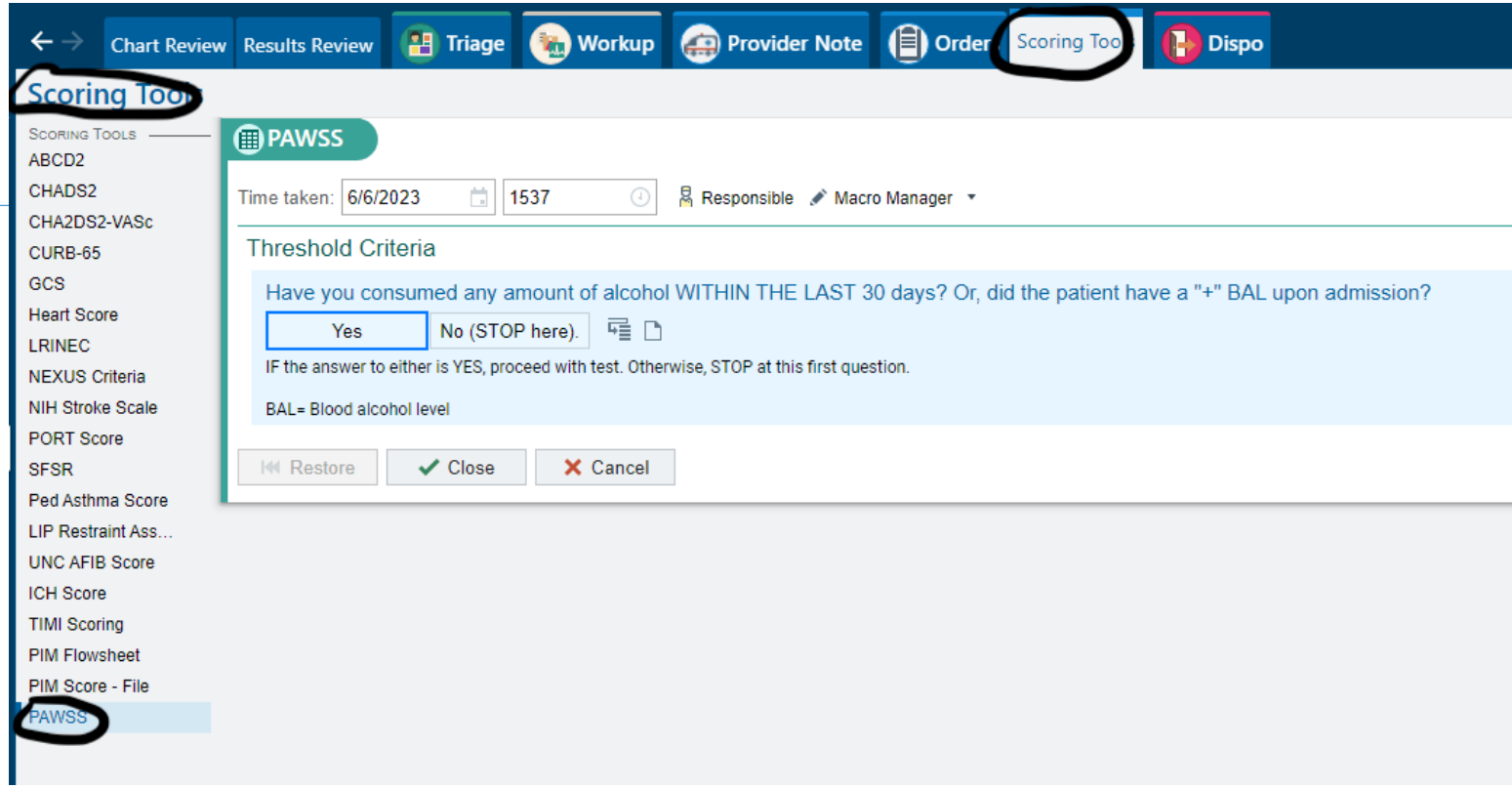
- **SMART AIM:** By September 30, 2024, this project will improve the standardization and treatment of patients with high-risk AWS (with the use of Phenobarbital monotherapy protocol) by 70%

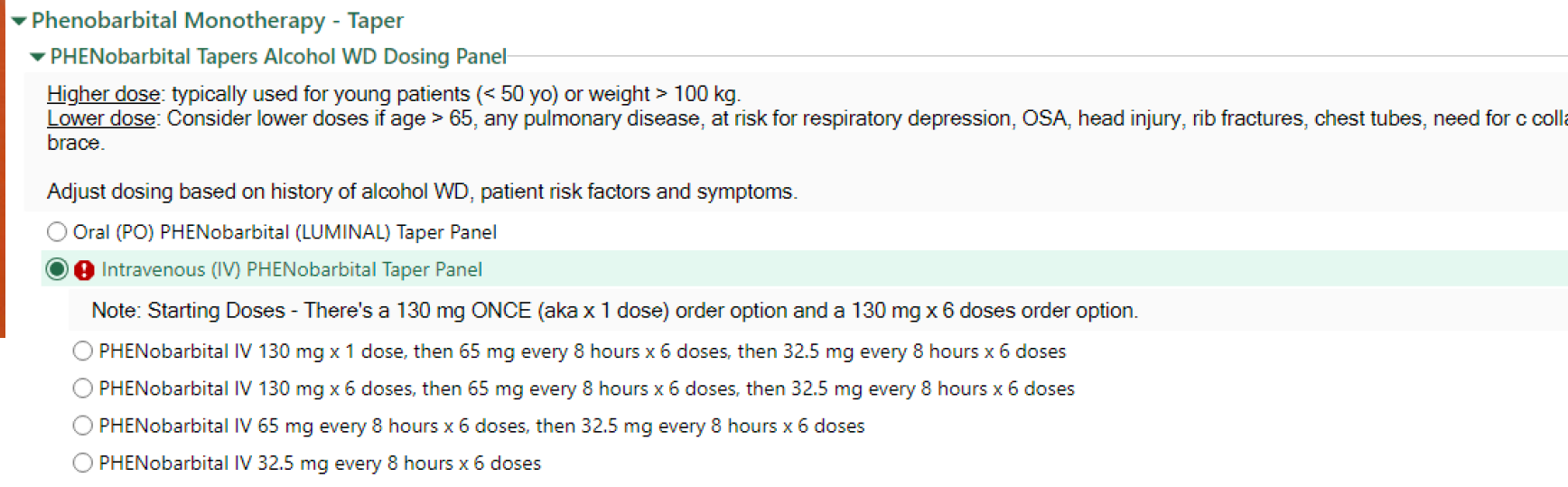
- Why phenobarbital?
  - shown to be effective not only for treatment, but for prevention in patients at risk for AWS
  - has a much longer half-life than Benzodiazepine (ideal choice for patients at risk for not completing the taper)

Driver Diagram

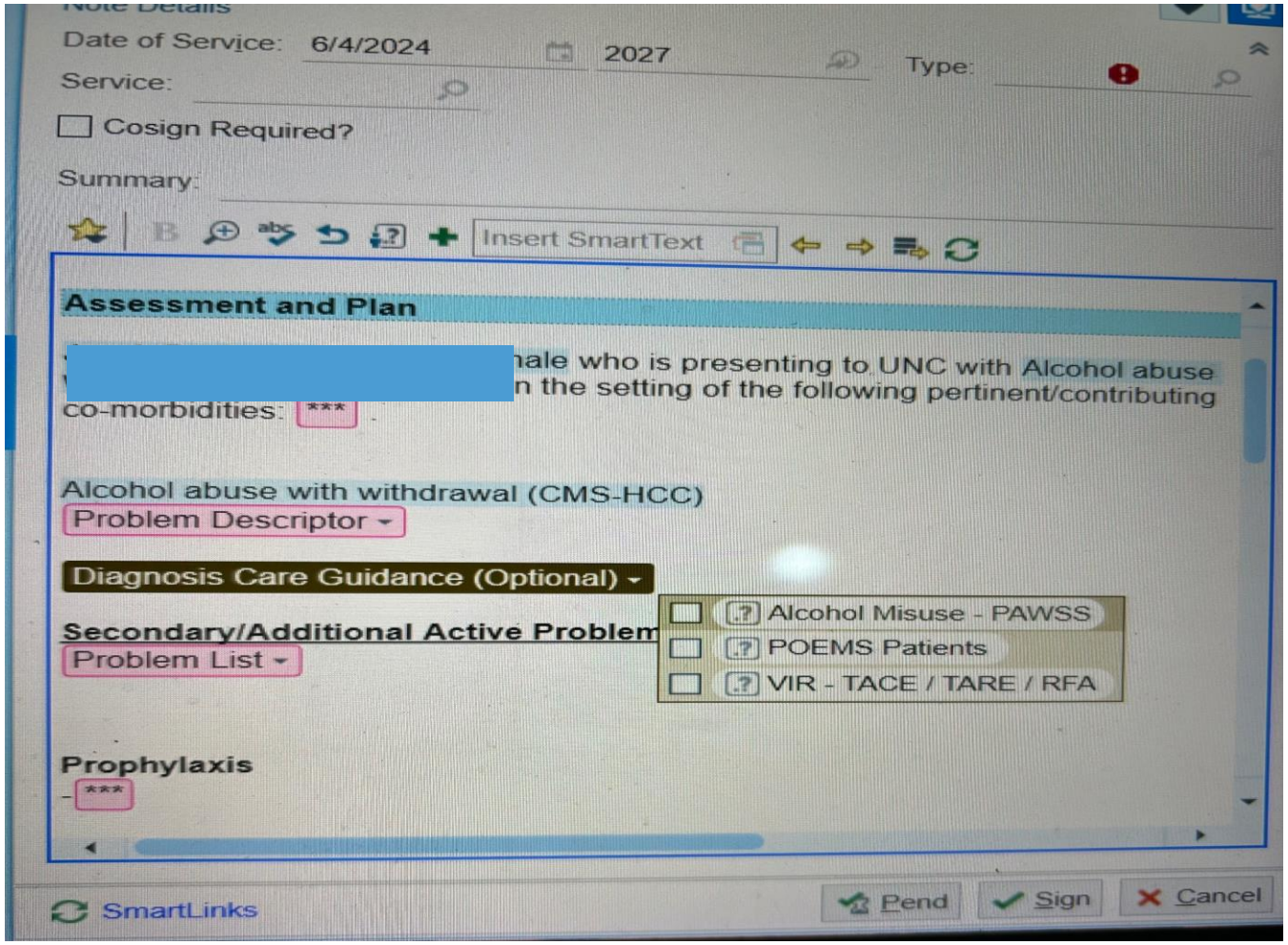


Our Interventions





Creation of new Smartphrase-.Imnotegeneral



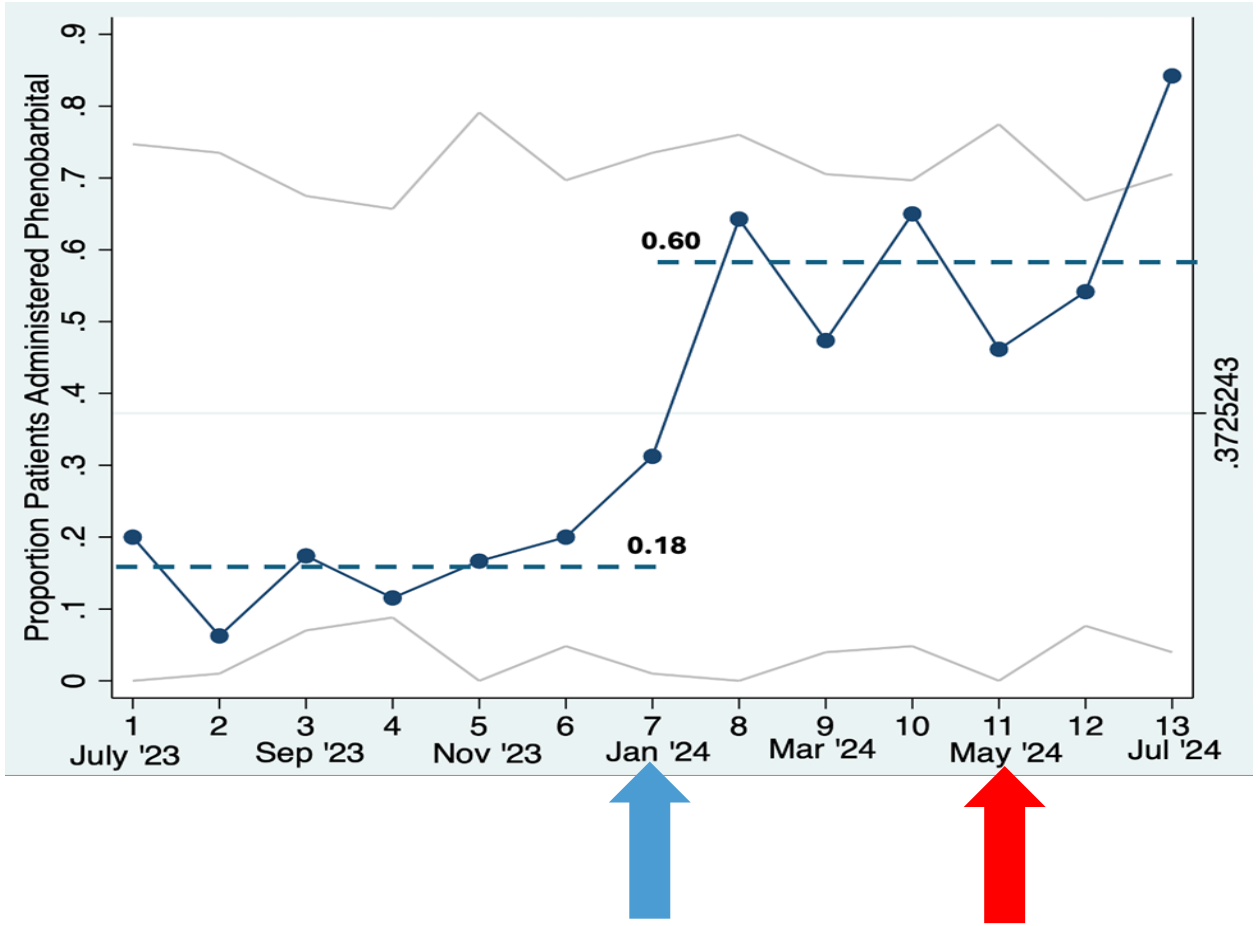
Results

Patient demographics

Characteristic	Value
Median age, years (range)	47 (21 – 78)
Male, %	73.8
Race, %	
• White	78.1
• Black	11.8
• other race	7.2
Self-pay, %	23.6
Median length of stay, days (range)	4 (1 – 228)
Discharge disposition, %	
• Home with self-care	72.6
• Home with home health	6.8
• Left against medical advice	6.3
• Psychiatric hospital	2.1

DATA

Use of Phenobarbital

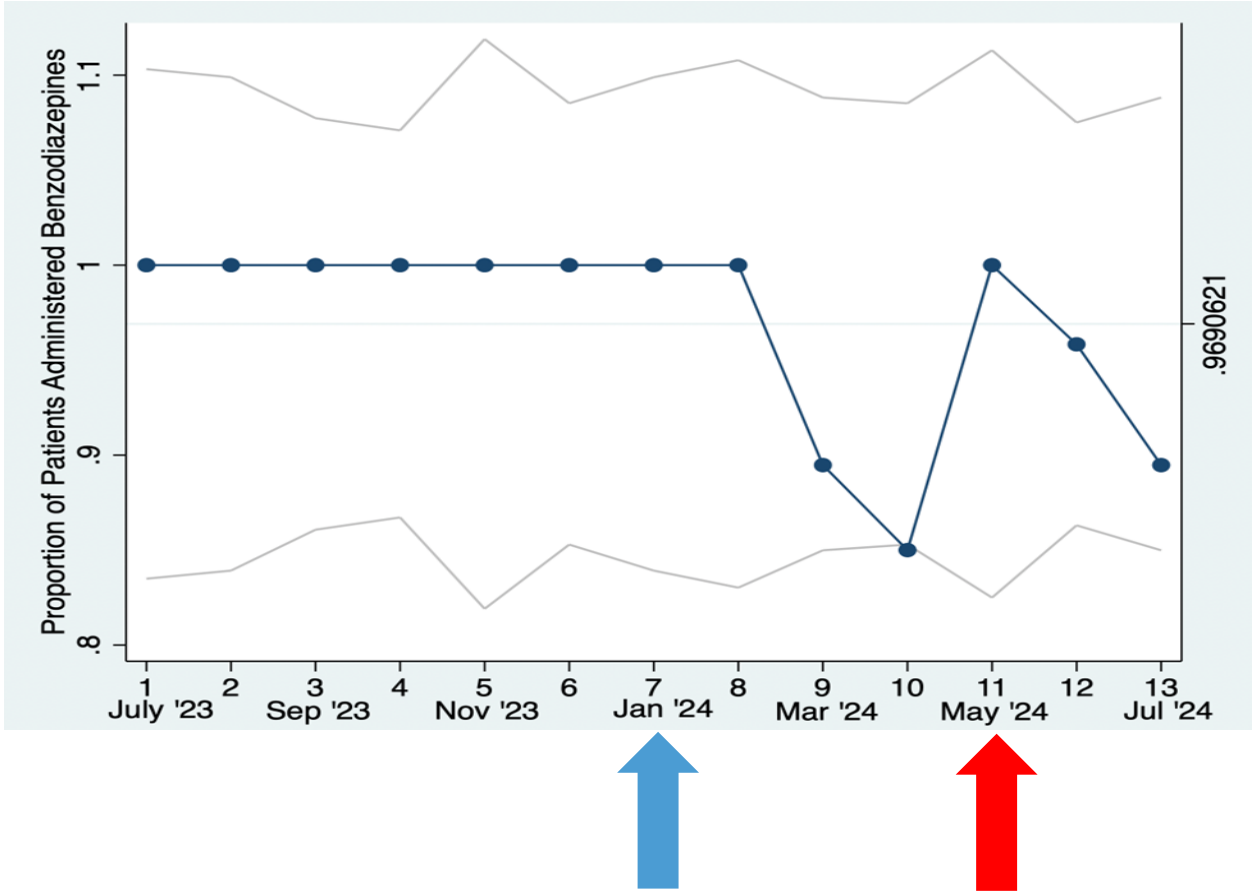


Blue- Education re: orderset and PAWSS score calculator

Red- Epic dotphrase go live

DATA

1. Use of Benzodiazepine



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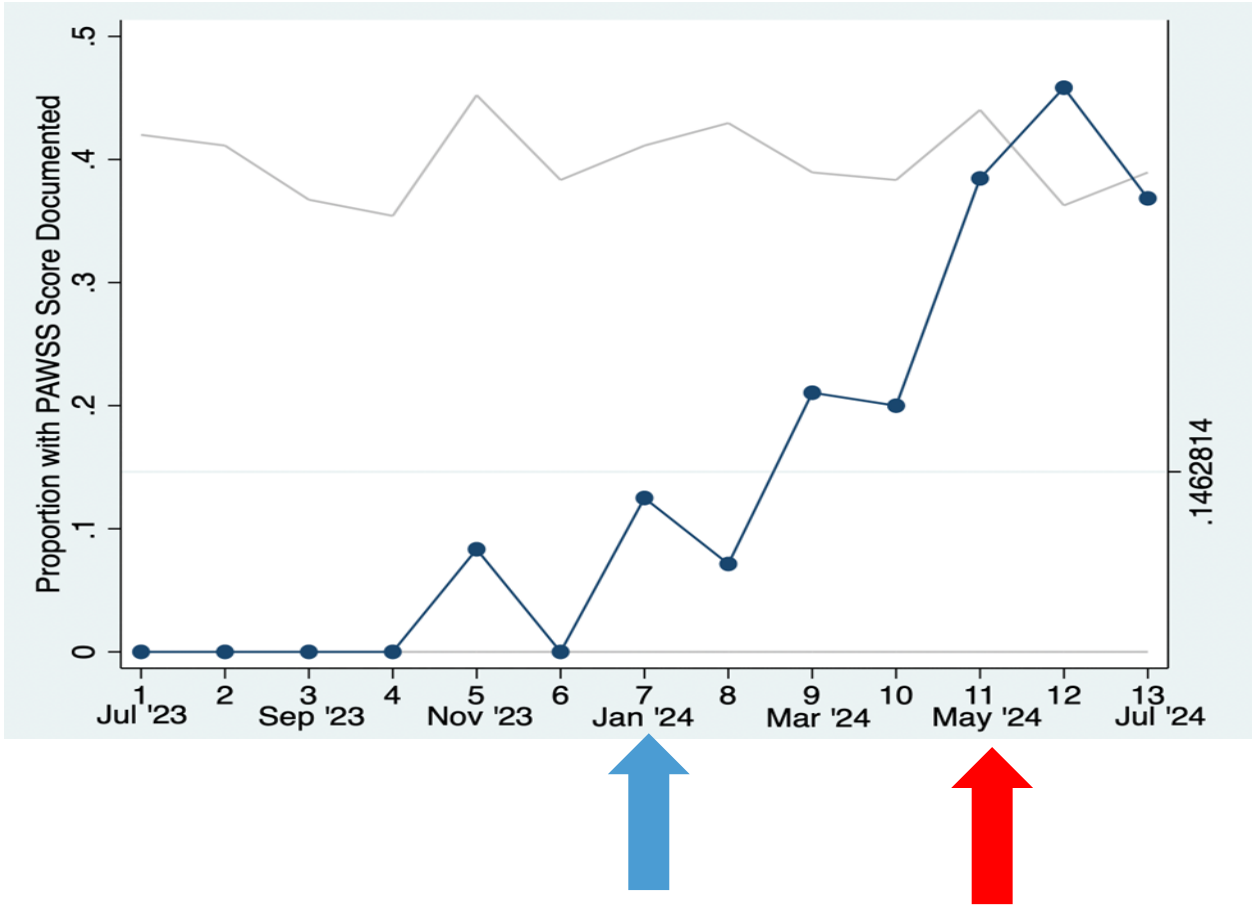
DATA

1. Utilization of PAWSS tool



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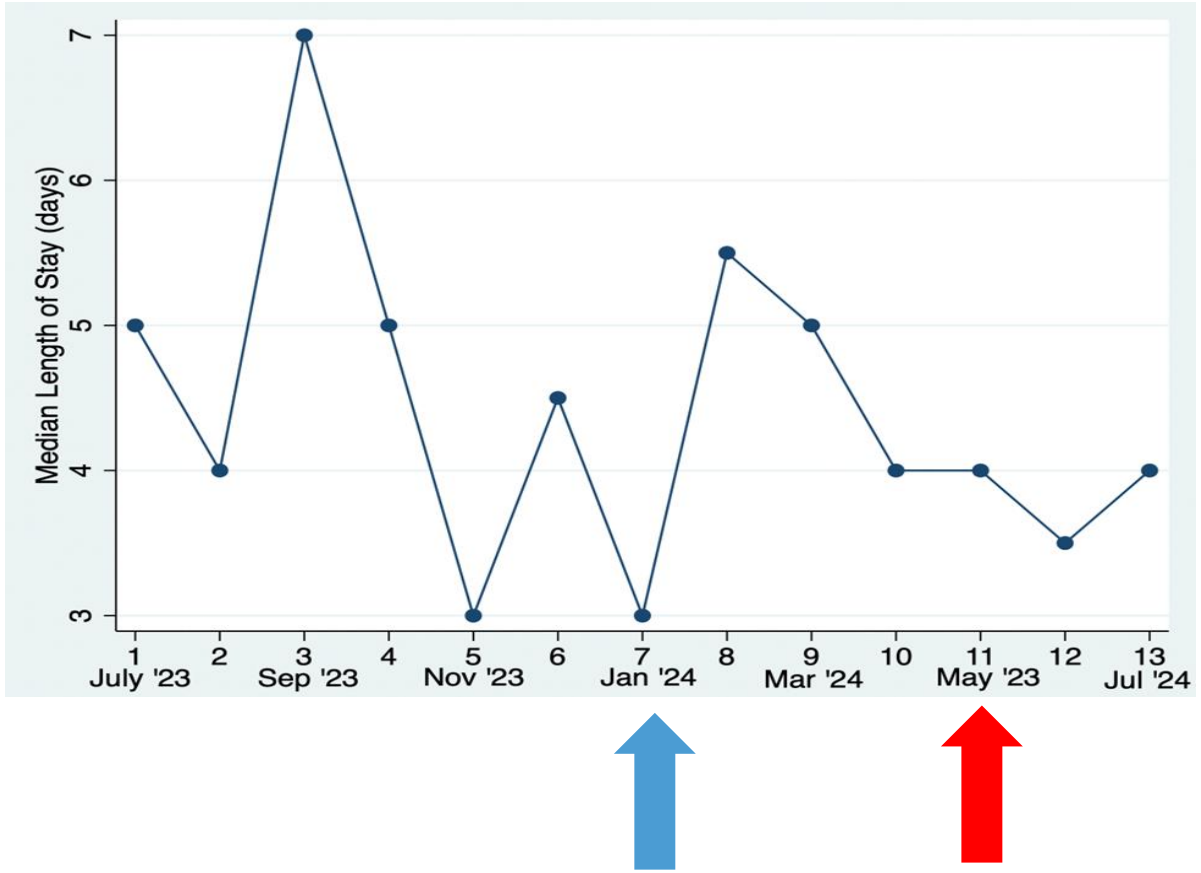
DATA

1. Length of Hospital stay



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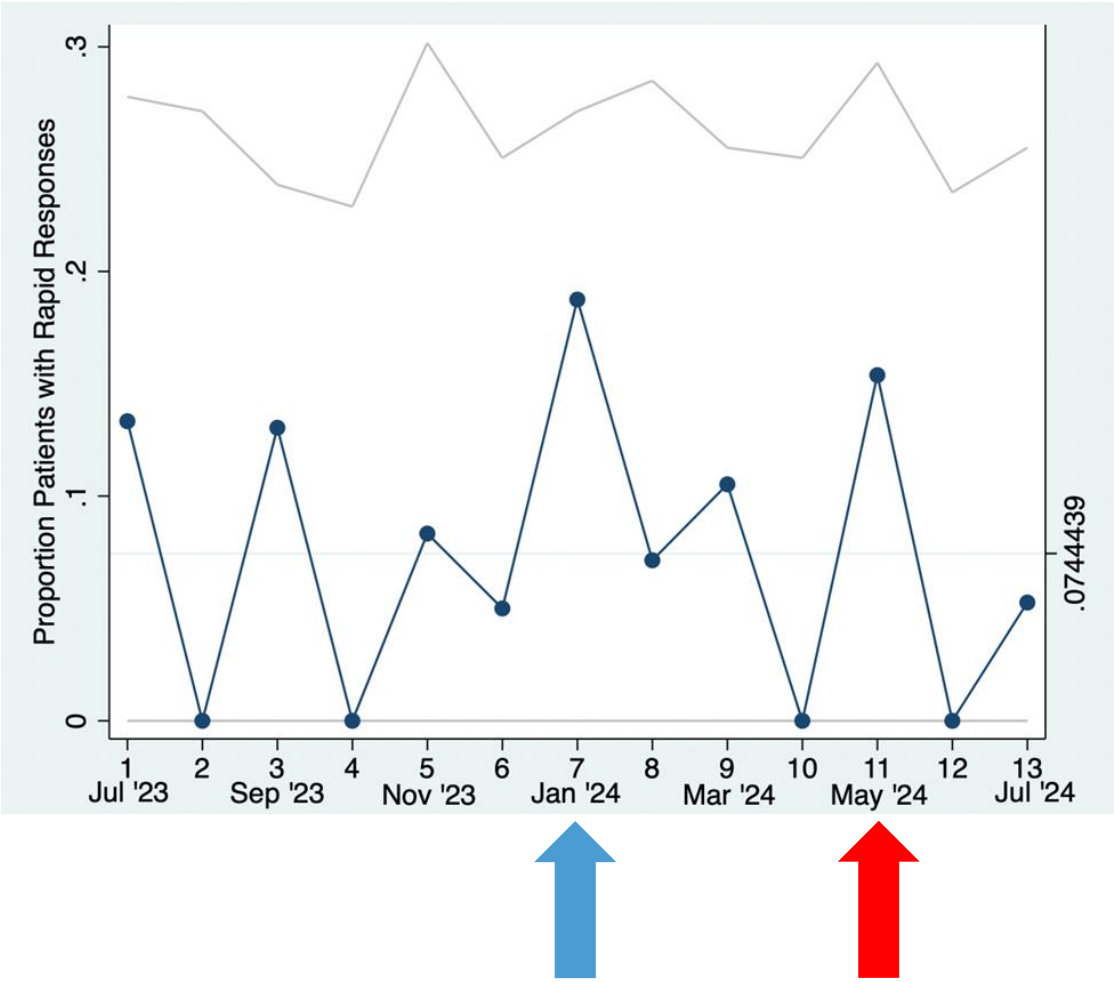
DATA

1. Rapid responses



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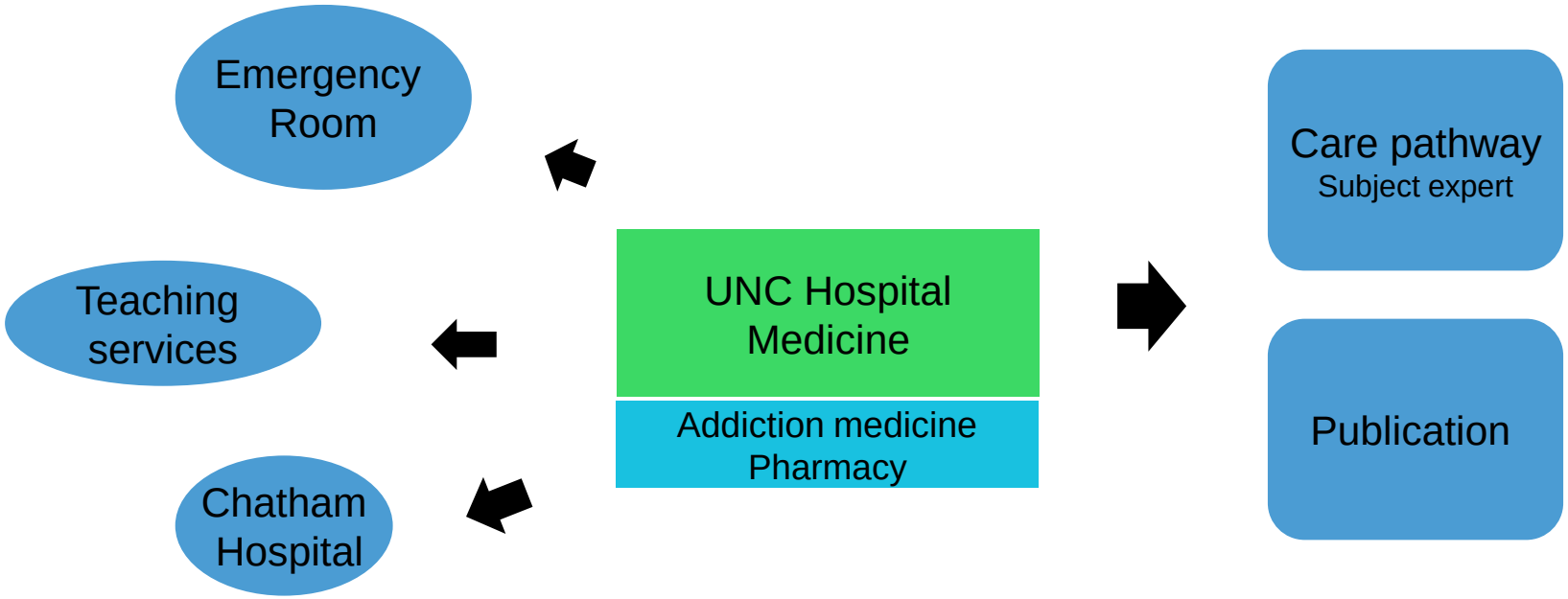
Next Steps Toward Sustainment and Spread



Thank You!

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