



**SUSPECTED OPIOID WITHDRAWAL (INCLUDING BUPRENORPHINE)**

**ADULT**

**Definitions**

**Opioid Withdrawal Disorder:** A life-threatening condition resulting from opioid dependence and the cessation or reduction in opioid use that has been heavy and prolonged; or the administration of an opioid antagonist (e.g., Naloxone) after a period of opioid use. Signs and symptoms include:

**Objective Signs:**

- Tachycardia
- Diaphoresis
- Restlessness and/or Agitation
- Dilated Pupils
- Rhinorrhea or Lacrimation
- Vomiting, Diarrhea
- Yawning
- Piloerection

**Subjective Symptoms:**

- Nausea
- Stomach/Abdominal cramps
- Body aches
- Achy bones/joints
- Restlessness
- Hot and Cold
- Nasal congestion



**MAT:** Medication-Assisted Treatment

**COWS:** Clinical Opioid Withdrawal Scale - <https://www.mdcalc.com/calc/1985/cows-score-opiate-withdrawal>

**ALS Standing Orders**

Suspected Opioid Withdrawal Disorder

- Provide supportive treatment and counseling
- Patient must have at least 2 objective signs of opioid withdrawal
- Assess patient interest in Buprenorphine
- Assess for COWS
- Verify patient contact information
- Inform the patient that the hospital’s navigator may initiate contact within 72 hours to offer additional treatment

**COWS ≥ 8 and Patient Agrees to Treatment**

Give water to moisten mucous membranes  
 Administer **16 mg Buprenorphine SL**  
 Reassess **COWS** after 10 minutes

If symptoms worsen or persist

Re-dose with **8 mg Buprenorphine SL**  
 Total max dose 24 mg SL

**COWS < 8 or Patient Denies Treatment or is Ineligible**

Recommend transport  
 Provide MAT brochure  
 Provide Naloxone

**Contraindications**

- Under 16 years of age
- Asymptomatic; No evidence or reported opioid withdrawal signs or symptoms
- Any methadone use within the last 10 days
- Altered mental status and unable to give consent
- Severe medical illness (sepsis, respiratory distress, etc.)

**Special Considerations**

**Base Hospital Orders Only**

- Contact Base Hospital for any treatment or transport concerns



### COWS Criteria

**Anxiety or Irritability**

- 0 None
- 1 Reports increasing irritability or anxiousness
- 2 Obviously irritable or anxious
- 4 Too irritable to participate or affecting participation

**Resting Heart Rate** *(Measured after sitting for 1 min)*

- 0 ≤ 80 BPM
- 1 81 – 100 BPM
- 2 101 – 120 BPM
- 4 ≥ 120 BPM

**Restlessness** *(Observed during assessment)*

- 0 Able to sit still
- 1 Reports difficult sitting still, but able to do so
- 3 Frequent shifting or extraneous leg/arm movement
- 5 Unable to sit still for more than a few seconds

**Tremor** *(Observation of outstretched hands)*

- 0 No tremors
- 1 Tremor can be felt but not observed
- 2 Slight observable tremors
- 4 Gross tremors or muscle twitching

**Bone or Joint Aches**

*(If patient was having pain previously, only additional pain attributed to withdrawal is scored)*

- 0 Not present
- 1 Mild diffuse discomfort
- 2 Reports sever diffuse aching of joints/muscles
- 4 Rubbing joints or muscles and unable to be still

**GI Upset** *(Over last half-hour)*

- 0 No GI Symptoms
- 1 Stomach cramps
- 2 Nausea or loose stool
- 3 Vomiting or diarrhea
- 5 Multiple episodes of diarrhea or vomiting

**Gooseflesh Skin**

- 0 Skin is smooth
- 3 Piloerection can be felt or arm hair standing up
- 5 Prominent piloerection

**Yawning** *(Observation during assessment)*

- 0 No yawning
- 1 Yawns once or twice during assessment
- 2 Yawns three or more times during assessment
- 4 Yawning several times per minute

**Pupil Size**

- 0 Pupils pinned or normal sized for ambient light
- 1 Pupils possibly larger than normal for ambient light
- 2 Pupils moderately dilated
- 5 Pupils very dilated

**Runny Nose or Tearing**

*(Not accounted for by cold symptoms nor allergies)*

- 0 Not present
- 1 Nasal stuffiness or unusually moist eyes
- 2 Nose running or eyes tearing
- 4 Nose constantly running, tears stream down face

**Sweating**

*(Over past half hour not accounted for by environment or activity)*

- 0 No report of chills or flushing
- 1 Subjective report of chills or flushing
- 2 Flushed or observable moistness to face
- 3 Beads of sweat on brow or face
- 4 Sweat streaming off face

**TOTAL COWS SCORE:**

- |         |                          |
|---------|--------------------------|
| 5 – 12  | <b>Mild</b>              |
| 13 – 24 | <b>Moderate</b>          |
| 25 – 36 | <b>Moderately Severe</b> |
| > 36    | <b>Severe Withdrawal</b> |



# Emergency Medical Services: Buprenorphine (Bup) Field Start Protocol



This treatment protocol can be used for patients experiencing opioid withdrawal symptoms and for patients recently administered naloxone.

Assess opioid withdrawal signs and symptoms.

**Opioid Withdrawal Signs & Symptoms:** Patient must present with  $\geq 2$  objective signs to be considered for bup treatment.

**Objective Signs**

- Yawning
- Rhinorrhea or lacrimation
- Dilated pupils
- Tachycardia
- Diaphoresis
- Restlessness and/or agitation
- Vomiting, diarrhea
- Piloerection

**Subjective Symptoms**

- Nausea
- Stomach/abdominal cramps
- Body aches
- Achy bones/joints
- Restlessness
- Hot and cold
- Nasal congestion

Assess for exclusion criteria.

**Exclusion Criteria:** Patient is not a candidate for buprenorphine treatment if any of the following are present.

- No opioid withdrawal signs or symptoms
- Under 16 years of age
- Any methadone use within last 10 days
- Severe medical illness (sepsis, respiratory distress, etc.)
- Altered mental status and unable to give consent or comprehend potential risks and benefits for any reason

Are any exclusion criteria present?

NO

YES

**Check for COWS Score  $\geq 8$**   
(Clinical Opioid Withdrawal Scale)



NO

**Not eligible for bup field start.**

YES

**Offer patient bup and counseling on treatment options.**

Consider MD Base contact for complex cases/additional support.

**PATIENT DENIES TREATMENT**

1. Provide medication for addiction treatment (MAT) brochure.
2. Provide naloxone.
3. Offer transport to Bridge hospital.

**PATIENT AGREES TO TREATMENT**

**Administer Buprenorphine.**

1. Administer buprenorphine 16 mg SL.
2. Reassess after 10 minutes.

**IF SYMPTOMS IMPROVE**

1. Verify patient contact information for hospital follow up, two phone numbers recommended.
2. Provide naloxone and MAT brochure.
3. Repeat and document second COWS.
4. Recommend transport to Bridge hospital.

**IF SYMPTOMS WORSEN OR PERSIST**

**Re-dose with bup 8 mg SL.**

Total maximum bup dose not to exceed 24 mg SL.

5. If patient declines transport, inform them that a navigator may initiate contact for further support.