

GUIDELINES FOR MANAGEMENT OF HARMFUL ALCOHOL USE FOR PATIENTS HAVING PLANNED PROCEDURES

Objective

To prevent:

- Cancellations and other problems that occur as a result of patients attending for a procedure under the influence of alcohol
- Alcohol withdrawal problems during and after surgery
- Unsafe consumption of alcohol

Brief Guidelines

- Patient drinks on most days, but **less** than 8/day for Men or 6/day for Women.
(Standard Drinks = 10gm alcohol)
 - Educate regarding recommended drinking levels (*less than 4/day for Men & less than 2/day for Women plus 2 alcohol free days/week*)
 - Advise no consumption of alcohol 24 hours pre procedure
- Patient drinks on most days, **and more** than 8/day for Men or 6/day for Women*
- OR Has been diagnosed as having an existing alcohol related medical condition and still drinks
- OR Has a recent history of alcohol withdrawal
 - Educate and advise as above
 - Refer to D&A nurse/counsellor for further assessment and possible de-tox
 - Pre-op Liver Function Test and Full Blood Count
 - Chart IMI Thiamine 100mg for the first 2 days after admission
 - On admission monitor for withdrawal using Alcohol Withdrawal Scale
- If patient arrives at pre-procedural clinic, or on day of procedure, noticeably affected by alcohol.
 - Defer admission if possible
 - Refer to Drug & Alcohol Service

Rationale

- Preparing for admission to hospital is a good time to prompt sensible drinking.
- Hospital admission can be a time of enforced abstinence. High risk drinkers may experience alcohol withdrawal which can result in poorer surgical outcomes and increased costs and length of stay
- Patients who arrive for surgery under the influence of alcohol will often have their surgery cancelled, resulting in expensive surgery down time
- Adequate pre surgical intervention, including de-tox can reduce these problems

Exceptions/Issues

- Each facility will need to develop protocols for accessing HAHS Drug and Alcohol Services (DACS). DACS central intake number is 49232060. DACS will provide rapid response for elective procedure patients so as to allow safe de-tox. This is a self-referral service that can be initiated at first point of contact.
- Alcohol Withdrawal Scale (CIWAA-R) is available from HAHS Drug & Alcohol Services
- Patients that do not come through the pre-procedure clinic will need to be contacted once the planned procedure booklet has been triaged by a nurse. The above steps should be followed for these patients.

References

NSW Health Alcohol and Other Drugs Policy for Nursing Practice in NSW: clinical guidelines 2000-2003, 2003, p39
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