

Further assessment checklist

Withdrawal Management

- Physical and mental health assessment (including PAWSS)
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Substance Use

- Substance use history (including assessment for tobacco and other substance use disorders)
 - Concurrent use of CNS depressants (e.g., opioids, benzodiazepines, Z-drugs, other sedatives, etc.)
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Medications

- Medication review of all prescriptions to assess for potential drug–drug interactions and contraindications

*Include medications that may be prescribed for withdrawal management or ongoing care.

Driving Risks

- Identify and address the risk of impaired driving.

*Patients undergoing withdrawal management should be advised not to drive or operate machinery until treatment is complete and symptoms are resolved.

In line with guidance from the [Canadian Medical Protective Administration](#), prescribers should be familiar with the [CMA Driver's Guide](#) and use it as a guideline when determining a patient's fitness to drive and any duty to report, and comply with all standards, limits, conditions and responsibilities as set out by relevant regulatory bodies.

Nutritional Assessment

- Nutritional assessment (advise on supplementation)
 - Fluid and electrolyte imbalances (correct fluid imbalances and electrolyte deficiencies)
- * All patients with AUD should receive multivitamin supplementation including thiamine (200mg), folic acid (1mg) and vitamin B6 (2mg).

Note: Public prescription medication coverage generally does not provide benefit coverage for over-the-counter vitamins or supplements.

Laboratory Investigations

The following tests may be ordered to assess general health, alcohol-related comorbidities, and other conditions that could impact treatment:

- Complete blood count (CBC), serum electrolytes, glucose, liver function and renal function panels
- Pregnancy test (for patients of childbearing capacity)
- Sexually transmitted and blood-borne infection testing
- Electrocardiogram (ECG) (for patients with cardiac disease or a history of arrhythmia or syncope)
- Chest x-ray (for patients with chronic respiratory problems or respiratory symptoms)

Note: Treatment should be initiated immediately whenever possible and should not be delayed by waiting for laboratory test results unless patient safety would be compromised.
