Clinical Institute Withdrawal Assessment - Alcohol Scale Revised (CIWA - AR)

Agitation 0 - Normal activity 1 - Somewhat more than normal activity 2 - (More severe symptoms) 3 - (More severe symptoms) 4 - Moderately fidgety and restless 5 - (More severe symptoms) 6 - (More severe symptoms) 7 - Paces back and forth, or constantly throughout the interview or constantly thrashes about	Anxiety 0 - No anxiety, at ease 1 - Mildly anxious 2 - (More severe symptoms) 3 - (More severe symptoms) 4 - Moderately anxious, or guarded, so anxiety is inferred 5 - (More severe symptoms) 6 - (More severe symptoms) 7 - Equivalent to acute panic stares as seen in severe delirium or acute schizophrenic reactions
Auditory disturbances Ask, "Are you more aware of sounds around you? Are they harsh? Do they startle you? Do you hear anything that disturbs you or that you know isn't there?" 0 - Not present 1 - Very mild harshness or ability to frighten 2 - Mild harshness or ability to frighten 3 - Moderate harshness or ability to frighten 4 - Moderately severe hallucinations 5 - Severe hallucinations 6 - Extremely severe hallucinations 7 - Continuous hallucinations	Clouding Of Sensorium/Orientation Ask, "What day is this? Where are you? Who am I?" 0 - Oriented 1 - Can't do serial additions or is uncertain about date 2 - Disoriented to date by no more than 2 calendar days 3 - Disoriented to date by more than 2 calendar days 4 - Disoriented to place or person
Headache/Fullness in head Ask, "Does your head feel different than usual? Does it feel like there is a band around your head?" Do not rate dizziness or lightheadedness. 0 - Not present 1 - Very mild 2 - Mild 3 - Moderate 4 - Moderately severe 5 - Severe 6 - Very severe 7 - Extremely severe	Nausea/Vomiting 0 - None present 1 - Mild nausea and no vomiting 2 - (More severe symptoms) 3 - (More severe symptoms) 4 - Intermittent nausea with dry heaves 5 - (More severe symptoms) 6 - (More severe symptoms) 7 - Constant nausea, frequent dry heaves and vomiting
Paroxysmal sweats 0 - No sweat visible 1 - Barely perceptible sweating, palms moist 2 - (More severe symptoms) 3 - (More severe symptoms) 4 - Beads of sweat obvious on forehead 5 - (More severe symptoms) 6 - (More severe symptoms) 7 - Drenching sweats	Tactile disturbances Ask, "Have you experienced any itching, pins & needles sensation, burning or numbness, or a feeling of bugs crawling on or under your skin?" 0 - none 1 - very mild itching, pins & needles, burning, or numbness 2 - mild itching, pins & needles, burning, or numbness 3 - moderate itching, pins & needles, burning, or numbness 4 - moderate hallucinations 5 - severe hallucinations 6 - extremely severe hallucinations 7 - continuous hallucinations
Tremor Arms extended and fingers spread apart 0 - No tremor 1 - Not visible, but can be felt fingertip to fingertip 2 - (More severe symptoms) 3 - (More severe symptoms) 4 - Moderate, with patient's arms extended 5 - (More severe symptoms) 6 - (More severe symptoms) 7 - severe, even with arms not extended	Visual disturbances Ask, "Does the light appear to be too bright? Is its color different from normal? Does it hurt your eyes? Are you seeing anything that disturbs you or that you know isn't there?" 0 - Not present 1 - Very mild sensitivity 2 - Mild sensitivity 3 - Moderate sensitivity 4 - Moderately severe hallucinations 5 - Severe hallucinations 6 - Extremely severe hallucinations 7 - Continuous hallucinations

Scale for Scoring: 0-9:Absent or minimal withdrawal, 10 – 19: Mild to moderate withdrawal, > 20: Severe withdrawal