

COLUMBIA UNIVERSITY

IN THE CITY OF NEW YORK

Columbia Health

Columbia University Emergency Medical Service Alcohol Intoxication Policy and Checklist

Purpose:

The purpose of this policy is to provide a framework for assessment of patients with acute alcohol intoxication and to screen patients with a relatively high sensitivity to identify patients at a low risk of adverse events who can refuse care beyond assessment by CU-EMS in order to decrease unnecessary ambulance transports and Emergency Department visits.

Sources:

1. Cornwall A, Zaller N, et al. A pilot study of emergency medical technicians' field assessment of intoxicated patients' needs for ED care. Am J Emerg Med 2012 Sep; 30(7): 1224-8
2. Flower K, Post A, et al. Validation of triage criteria for deciding which apparently inebriated persons require emergency department care. Emerg Med J. 2011 Jul; 28(7):579-84
3. Ross DW, Schullek JR, et al. EMS triage and transport of intoxicated individuals to a detoxification facility instead of an emergency department. Ann Emerg Med. 2013 Feb; 61(2):175-84.

Policy: Inclusion criteria (all criteria must be met for inclusion):

- ✓ Patient between 17 and 35 years old with reported or suspected alcohol use
- ✓ Chief complaint is primarily alcohol intoxication
- ✓ Suspected nature of illness is primarily alcohol intoxication
- ✓ Patient meets all standard refusal criteria as specified in NYC REMSCO BLS Protocol (as assessed and documented on the CU-EMS Refusal Form) except alcohol intoxication
- ✓ Patient is requesting to refuse transport to an Emergency Department

Exclusion criteria (any one of these excludes the patient):

- ✗ Patient is unable to or unwilling to cooperate with exam
- ✗ Patient is combative or agitated
- ✗ Patient wants to be transported to an Emergency Department



If patient meets any of the **exclusion** criteria, then CU-EMS will transport patient to Mt Sinai-St Luke's Emergency Department or other indicated emergency department according to NYC REMSCO BLS protocols.

If patient does not meet all of the inclusion criteria follow Standard NYC REMSCO BLS Protocols.

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If a patient who has imbibed alcohol meets all policy inclusion criteria and has no exclusion criteria then the Crew Chief, caring for the patient, can allow the patient to refuse care if:

- † The patient agrees to have no additional alcohol-containing drinks for the next 12 hours.
- † Crew Chief performs a consult with Medical Control and receives physician approval for the refusal of care.



If either of the above criteria are not met, then CU-EMS will transport the patient to Mt Sinai-St Luke's ED.

We would like to express our acknowledgment and appreciation to Dr. Michael Hilton, a former Captain of CU-EMS, who developed this protocol for Carnegie Mellon University Emergency Medical Service.

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Checklist for Alcohol Use Refusal:

Alcohol use assessment:

Large quantity of alcohol use in past 2 hours: Yes No

Subjective assessment:

Any other drug suspected or reported: Yes No

Suspected seizure: Yes No

Inability to sit or stand without assistance: Yes No

Inability to walk without assistance: Yes No

History of present illness assessment:

Any of the following medical complaints: Yes No

Chest pain, abdominal pain, syncope, shortness of breath, headache with altered mental status, seizure

Any psychiatric complaint suspected/reported: Yes No

Suicidal ideation/plan, homicidal ideation/plan, psychotic/hallucinating

Head trauma within past 24 hours: Yes No

Mechanism of injury beyond ground level fall: Yes No

Persistent active vomiting: Yes No

Past medical history assessment:

History of diabetes: Yes No

Pregnancy suspected by provider: Yes No

Pregnancy admitted by patient: Yes No

Medications: Yes No

Insulin, Glipizide, Glyburide, Coumadin (Warfarin), Plavix, Xarelto (Rivaroxaban), Oxycodone, Percocet, Norco, Vicodin, OxyContin, MS Contin, Methadone, Ativan, Xanax/Alprazolam, Klonopin (Clonazepam)

Objective assessment:

Age <17 or >35: Yes No

Pulse rate <50 or >100: Yes No

Systolic BP <100 or >200: Yes No

SpO2 <95%: Yes No

GCS ≤ 14: Yes No

Pupils not equal, round and reactive: Yes No

Suspected acute fracture or major lacerations: Yes No

Signs of trauma superior to clavicles: Yes No

Gravid abdomen (in female patient): Yes No



If any shaded answers are checked and if the patient wants to refuse transport, CU-EMS must contact Medical Control, address any of the shaded answers above, and receive Medical Control Physician approval for refusal.