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**Policy:** 500.610  
**Title:** Intoxication/Withdrawal  
**Effective Date:** 3/6/18

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**PURPOSE:** To provide guidelines for the treatment and observation of offenders/residents manifesting symptoms of intoxication or withdrawal from alcohol and other mood-altering chemicals.

**APPLICABILITY:** All facilities

**DEFINITIONS:**

Detoxification – the medically-managed withdrawal of individuals from a substance on which they are physically dependent.

Huffing – inhaling of chemicals to obtain a euphoric sensation.

Intoxication – a state of physiological impairment caused by opiate, stimulant, inhalant, or depressant usage.

Withdrawal – a physiological and/or psychological process an addicted individual experiences after ending the use of alcohol or mood-altering chemicals.

**PROCEDURES:**

The following guidelines must be implemented for the treatment and observation of individuals manifesting mild or moderate symptoms of intoxication withdrawal from alcohol and other drugs.

- A. When nursing staff are on duty, the watch commander must request that nursing staff assess any offender/resident who is suspected of withdrawal or to have ingested an intoxicating substance(s).
  1. A registered nurse assesses the offender/resident including:
    - a) Blood pressure;
    - b) Pulse;
    - c) Respirations;
    - d) Temperature;
    - e) Behavior;
    - f) Pupil check;
    - g) Level of consciousness; and
    - h) Review of breathalyzer results if done by security staff.
  2. A registered nurse also assesses the offender/resident to determine whether the offender is at risk to progress to a more serious level of intoxication or withdrawal, which may include the following:
    - a) Nausea and/or vomiting;
    - b) Tremors or agitation;
    - c) A past history of seizure and drug abuse;
    - d) Auditory and/or visual hallucinations;
    - e) Sweating, fever, fast pulse;
    - f) Seizures; and/or
    - g) Confusion.

3. The registered nurse notifies the practitioner if any of the above symptoms are present.
  4. Detoxification is done only under medical supervision in accordance with local, state, and federal laws. Detoxification from alcohol, opiates, hypnotics, other stimulants, and sedative hypnotic drugs is conducted in a hospital or community detoxification center. If the practitioner determines detoxification is required, the level of medically-indicated monitoring is not possible, or the offender/resident is experiencing severe, life-threatening withdrawal symptoms or intoxication (an overdose), the offender/resident is transferred under appropriate security condition to a facility where specialized care is available.
  5. Nursing staff must record all evaluations on the Withdrawal Flow Sheet (attached) and place a narrative entry in the progress notes of the medical record. Withdrawal Flow Sheets must be retained in the offender's/resident's medical file.
- B. When nursing staff are not on duty, the watch commander/designee must contact the on-call practitioner and inform the practitioner of the watch commander's/designee's observations. According to the determination of the practitioner on-call, the watch commander
1. Sends the offender/resident to the emergency room via ambulance for evaluation if the offender/resident appears impaired (such as staggered gait, slurred speech, decreased level of consciousness); and
  2. Per Division Directive 500.012, "Offender Emergency Health Care," notifies nursing staff the following shift via the After Hours Medical Emergency Form for Non-Medical Staff (attached)

**INTERNAL CONTROLS:**

- A. Withdrawal flow sheets are retained in the offender's/resident's medical file.

**ACA STANDARDS:** 4-4348, 4-4376, and 1-ABC-4E-46

**REFERENCES:**

[Minn. Stat. §241.01](#)  
[Federal Bureau of Prisons, Clinical Practice Guidelines: Detoxification of Chemically-Dependent Inmates, February 2014](#)  
[Division Directive 500.180 "Medical Transfer Process"](#)  
[Division Directive 301.092 "International Prisoner Transport"](#)  
[Division Directive 500.010, "Health Services"](#)  
[Division Directive 500.012, "Offender Emergency Health Care"](#)  
[Minn. Stat. §254A.08 \(Detoxification Centers\)](#)

**REPLACES:**

Policy 500.610, "Intoxication/Withdrawal," 10/4/16.  
All facility policies, memos, or other communications whether verbal, written, or transmitted by electronic means regarding this topic.

**ATTACHMENTS:**

[Withdrawal Flow Sheet](#) (500.610A)  
[After-Hours Medical Emergency Form for Non-Medical Staff](#) (500.010B)

**APPROVED BY:**

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