# WITHDRAWAL ASSESSMENT TOOL VERSION 1 (WAT - 1)

Patient Identifier													
	Date:												
	Time:												
Information from patient record, p	revious 12 hours	I					1	<u> </u>					
Any loose/watery stools	No = 0 Yes = 1												
Any vomiting, retching, gagging	No = 0 Yes = 1												
Temperature > 37.8 °C	No = 0 Yes = 1												
2 minute pre-stimulus observation													
State	$SBS^1 \le 0$ or asleep/awake calm = 0 $SBS^1 \ge +1$ or awake distressed = 1												
Tremor	None/mild = 0 Moderate/severe = 1												
Any sweating	No = 0 Yes = 1												
Uncoordinated/repetitive movement	None/mild = 0 Moderate/severe = 1												
Yawning or sneezing	None or 1 = 0 >2 = 1												
1 minute stimulus observation													
Startle to touch	None/mild = 0 Moderate/severe = 1												
Muscle tone	Normal = 0 Increased = 1												
Post-stimulus recovery				· · · · · ·									
Time to gain calm state (SBS¹ <u>&lt;</u> 0)	< 2 minutes = 0 2 - 5 minutes = 1 > 5 minutes = 2												
Total Score (0-12)													

#### WITHDRAWAL ASSESSMENT TOOL (WAT - 1) INSTRUCTIONS

- Start WAT-1 scoring from the first day of weaning in patients who have received opioids +/or benzodiazepines by infusion or regular dosing for
  prolonged periods (e.g., > 5 days). Continue twice daily scoring until 72 hours after the last dose.
- The Withdrawal Assessment Tool (WAT-1) should be completed along with the SBS<sup>1</sup> at least once per 12 hour shift (e.g., at 08:00 and 20:00  $\pm$  2 hours). The progressive stimulus for characteristic signs of withdrawal

# hours). The progressive stimulus used in the SBS<sup>1</sup> assessment provides a standard stimulus for observing signs of withdrawal.

#### Obtain information from the patient's record. (This can be done before or after the stimulation):

- Any loose or watery stools documented in the past 12 hours score as a 1. Score a 0 if none noted.
- Score 1 if any vomiting, spontaneous retching or gagging were documented in the past 12 hours; score 0 if none were noted.
- Score 1 if the modal (most frequently appearing) documented temperature was greater than 37.8 °C in the past 12 hours; score 0 if this was not the case.

## 2 minute pre-stimulus observation:

- ✓ State: Score 1 if awake and distress (SBS<sup>1</sup> ≥ +1) observed during the 2 minutes prior to stimulus; score 0 if asleep or awake and calm/cooperative (SBS<sup>1</sup> ≤ 0).
- Tremor: Score 1 if moderate to severe tremor observed during the 2 minutes prior to stimulus; score 0 if no tremor (or only minor, intermittent tremor).
- Sweating: Score 1 if any sweating during the 2 minutes prior to stimulus; score 0 if no sweating noted.
- Uncoordinated/repetitive movements: Score 1 if moderate to severe uncoordinated or repetitive movements such as head turning, leg or arm flailing or torso arching observed during the 2 minutes prior to stimulus; score 0 if no (or only mild) uncoordinated or repetitive movements.
- Yawning or sneezing: Score 1 if more than 1 yawn or sneeze observed during the 2 minutes prior to stimulus; score 0 if 0 to 1 yawn or sneeze.

## 1 minute stimulus observation:

- Startle to touch: Score 1 if moderate to severe startle occurs when touched during stimulus; score 0 if none (or mild).
- Muscle tone: Score 1 if tone increased during the stimulus; score 0 if normal.

#### Post-stimulus recovery:

✓ **Time to gain calm state (SBS¹ ≤ 0):** Score 2 if it takes greater than 5 minutes following stimulus; score 1 if achieved within 2 to 5 minutes; score 0 if achieved in less than 2 minutes.

## Sum the 11 numbers in the column for the total WAT-1 score (0-12).

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