

Clinical Opiate Withdrawal Scale (COWS)

For each item, write in the number that best describes the patient's signs or symptom. Rate on just the apparent relationship to opiate withdrawal. For example: If heart rate is increased because the patient was jogging just prior to assessment, the increased pulse rate would not add to the score.

Patient Name: _____		Date: _____			
Buprenorphine Induction: _____					
Enter scores at time zero, 30 minutes after first dose, 2 hours after first dose, etc.		Times of Observation:			
Resting Pulse Rate: Record Beats per Minute					
Measured after patient is sitting or lying for one minute 0 = pulse rate 80 or below 1 = pulse rate 81-100		<ul style="list-style-type: none"> • 2 = pulse rate 101-120 • 4 = pulse rate greater than 120 			
Sweating: Over Past 1/2 Hour not Accounted for by Room Temperature or Patient Activity					
0 = no report of chills or flushing 1 = subjective report of chills or flushing 2 = flushed or observable moistness on face		<ul style="list-style-type: none"> • 3 = beads of sweat on brow or face • 4 = sweat streaming off face 			
Restlessness Observation During Assessment					
0 = able to sit still 1 = reports difficulty sitting still, but is able to do so		<ul style="list-style-type: none"> • 3 = frequent shifting or extraneous movements of legs/arms • 5 = Unable to sit still for more than a few seconds 			
Pupil Size					
0 = pupils pinned or normal size for room light 1 = pupils possibly larger than normal for room light		<ul style="list-style-type: none"> • 2 = pupils moderately dilated • 5 = pupils so dilated that only the rim of the iris is visible 			
Bone or Joint Aches if Patient was Having Pain Previously, only the Additional Component Attributed to Opiate Withdrawal is Scored					
0 = not present 1 = mild diffuse discomfort		<ul style="list-style-type: none"> • 2 = patient reports severe diffuse aching of joints/muscles • 4 = patient is rubbing joints or muscles and is unable to sit still because of discomfort 			
Runny Nose or Tearing Not Accounted for by Cold Symptoms or Allergies					
0 = not present 1 = nasal stuffiness or unusually moist eyes		<ul style="list-style-type: none"> • 2 = nose running or tearing • 4 = nose constantly running or tears streaming down cheeks 			
GI Upset: Over Last 1/2 Hour					
0 = no GI symptoms 1 = stomach cramps 2 = nausea or loose stool		<ul style="list-style-type: none"> • 3 = vomiting or diarrhea • 5 = multiple episodes of diarrhea or vomiting 			
Tremor Observation of Outstretched Hands					
0 = no tremor 1 = tremor can be felt, but not observed		<ul style="list-style-type: none"> • 2 = slight tremor observable • 4 = gross tremor or muscle twitching 			
Yawning Observation During Assessment					
0 = no yawning 1 = yawning once or twice during assessment		<ul style="list-style-type: none"> • 2 = yawning three or more times during assessment • 4 = yawning several times/minute 			
Anxiety or Irritability					
0 = none 1 = patient reports increasing irritability or anxiousness		<ul style="list-style-type: none"> • 2 = patient obviously irritable/anxious • 4 = patient so irritable or anxious that participation in the assessment is difficult 			
Gooseflesh Skin					
0 = skin is smooth 3 = piloerection of skin can be felt or hairs standing up on arms		<ul style="list-style-type: none"> • 5 = prominent piloerection 			
Score: 5-12 = Mild 13-24 = Moderate 25-36 = Moderately Severe More than 36 = Severe Withdrawal		Total score			
		Observer's initials			

