

Mathers Clinic

COWS: Clinical Opiate Withdrawal Scale

Name: _____ Date: _____ Time: _____

Place the value for each question in the box. Add all 11 values for the total score.

Resting Pulse Rate: _____ beats/minute

Measured after patient is sitting or lying for one minute

- | | |
|--|-------------------------------|
| | 0 pulse rate 80 or below |
| | 1 pulse rate 81-100 |
| | 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 |
| | 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 |
| | 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 |
| | 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 opiates withdrawal is scored

- | | |
|--|---|
| | 0 not present |
| | 1 mild diffuse discomfort |
| | 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 |

Add all of the numbers in each column for the total score.

Total Score: _____

Runny Nose Or Tearing:

Not accounted for by cold symptoms or allergies

- | | |
|--|--|
| | 0 not present |
| | 1 nasal stuffiness or unusually moist eyes |
| | 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 |
| | 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 |
| | 2 slight tremor observable |
| | 4 gross tremor or muscle twitching |

Yawning:

Observation during assessment

- | | |
|--|---|
| | 0 no yawning |
| | 1 yawning once or twice during assessment |
| | 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 |
| | 2 patient obviously irritable or 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 |
| | 5 prominent piloerection |

Value Meaning: 5-12 = mild 13-24 = moderate 25-36 = moderately severe >36 = severe withdrawal

Reference: California Society of Addiction Medicine



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