

Subjective Opiate Withdrawal Scale (SOWS)

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1. Please enter the client's information:

First Name:

Last Name:

Client DOB:

2. Date:

Time:

3. Instructions: We want to know how you're feeling. In the column below today's date and time, use the scale to write a number from 0-4 about how you feel about each symptom.

	Not at all	A little	Moderately	Quite a bit	Extremely
1. I feel anxious					
2. I feel like yawning					
3. I am perspiring					
4. My eyes are tearing					
5. My nose is running					
6. I have goosebumps					
7. I am shaking					
8. I have hot flushes					
9. I have cold flushes					
10. My bones and muscles ache					
11. I feel restless					
12. I feel nauseous					
13. I feel like vomiting					
14. My muscles twitch					
15. I have stomach cramps					
16. I feel like using now					

Scoring and Developer (Office Use Only):

Scoring:

Clients score each SOWS item on a five-point scale (i.e., 0,1,2,3 & 4).

A total score is calculated by summing the responses to all 16 items. The minimum total score possible is 0, and the maximum total score possible is 64 (i.e. total score range: 0-64).

- **Score Interpretation**

- 1-10 Mild withdrawal
- 11-20 Moderate withdrawal
- 21 or more Severe withdrawal

Developer:

Handelsman, L., Cochrane, K., Aronson, M., et al. *Two new rating scales for opiate withdrawal*. American Journal of Drug and Alcohol Abuse, 1987. 13(3): 293-308.[2]