

## **Appendix E: Weaning Guidelines for Haloperidol (Haldol)**

### **Weaning after acute and brief episode of delirium (ICDSC 0-1 < 72 hours from onset of haloperidol)**

- Reduce dose of regular haloperidol to maintain ICDSC 0-1 and VAMASS 3
- Begin weaning to off when patient's ICDSC is 0-1 and VAMASS is 3 for > 24 hours (and not requiring PRN boluses)
- Wean total daily dose by 25% per day until off (divided reduction of regular dose haloperidol; consider higher HS dose)
- If patient exhibits symptoms of delirium during dose reduction:
  - Notify physician to review Appendix A and B for treatable causes
  - Ensure Appendix C is implemented
  - Return to previous dose when patient was symptom free

### **Weaning if > 72 hours of uncontrolled delirium**

- Begin weaning to off when patient's ICDSC is 0-1 and VAMASS is 3 for > 48 hours
- Wean total daily dose by 25% Q 2 days until off (divided reduction of regular dose haloperidol; consider higher HS dose)
- If patient exhibits symptoms of delirium during dose reduction:
  - Notify physician to review Appendix A and B for treatable causes
  - Ensure Appendix C is implemented
  - Return to previous dose when patient was symptom free
  - Consult psychiatry
- If psychiatry has been involved in the management/stabilization of delirium, consult psychiatry for weaning recommendations