## SHOT scale

| Sweating | 0 – No visible sweating  
| Palms moderately moist  
| Visible beads of sweat on forehead |
| Hallucinations | 0 – No hallucinations  
| 1 – Tactile hallucinations only  
| 2 – Visual and/or auditory hallucinations |
| “Are you feeling, seeing, or hearing anything that is disturbing to you? Are you seeing or hearing things you know are not there?” |
| Orientation | 0 – Oriented  
| 1 – Disoriented to date by one month or more  
| 2 – Disoriented to place or person |
| “What is the date, month, and year? Where are you? Who am I?” |
| Tremor | 0 – No tremor  
| 1 – Minimally visible tremor  
| 2 – Mild tremor  
| 3 – Moderate tremor  
| 4 – Severe tremor |
| Extend arms and reach for object.  
| Walk across hall (optional). |

### Protocol
- Reassess every 1-2H.  
- Discontinue when total score is 0 or 1 on two consecutive occasions.  
- Alert physician if score ≥ 4.

### Dose
- Diazepam 10-20 mg (PO/IV) or lorazepam 2-4 mg (SL/PO/IM/IV) for SHOT ≥ 2.

### False positives
- Interpret SHOT with caution if patient has a febrile illness, cerebellar disease or benign essential tremor, psychosis, dementia, impaired consciousness, or delirium not related to alcohol.

### Discontinuation
- Discontinue H and O if zero at baseline. If either H or O are greater than zero, assess and treat for delirium, encephalopathy, and/or psychosis.

### Liver dysfunction/failure
- Use lorazepam rather than diazepam if the patient has jaundice, ascites, low albumin, high bilirubin, or high INR. If encephalopathy is present, avoid benzodiazepines or use low doses (e.g., lorazepam 0.5 mg).

### History of seizures
- Diazepam 20 mg (PO/IV) or lorazepam 2-4 mg (SL/PO/IM/IV) q 1-2H x 3 doses, regardless of SHOT score.