

SBIRT Practice: Scenario 1
PROVIDER BACKGROUND, page 1

This is meant to practice performing the AUDIT to screen for alcohol abuse.

PROVIDER: Your office utilizes the AUDIT to screen for alcohol problems. You are seeing a 57-year-old female for an annual CPE and perform the AUDIT. Use the form below, score it (next page), and determine level of risk (next page). Be sure the patient is told what you are about to do, in a friendly, non-judgmental way.

1. U.S. Alcohol Use Disorders Identification Test (AUDIT)

Instructions: Alcohol can affect your health and treatment. We ask all clients these questions. Your answers will remain confidential. Circle the best answer to each question. Think about your drinking in the past year. A drink means one beer, one small glass of wine (5 oz.), or one mixed drink containing one shot (1.5 oz.) of spirits.

1. How often do you have a drink containing alcohol? (0) Never [Skip to Questions 9 and 10] (1) Less than monthly (2) Monthly (3) Weekly (4) 2 to 3 times a week (5) 4 to 6 times a week (6) Daily	6. How often during the last year have you needed an alcoholic drink first thing in the morning to get yourself going after a night of heavy drinking? (0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily
2. How many drinks containing alcohol do you have on a typical day when you are drinking? (0) 1 (1) 2 (2) 3 (3) 4 (4) 5 to 6 (5) 7 to 9 (6) 10 or more	7. How often during the last year have you had a feeling of guilt or remorse after drinking? (0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily
3. How often do you have X (5 for men; 4 for women and men over age 65) or more drinks on one occasion? (0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) 2-3 times a week (5) 4-6 times a week (6) Daily [Skip to Questions 9 and 10 if total score for Questions 2 and 3 = 0]	8. How often during the last year have you been unable to remember what happened the night before because you had been drinking? (0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily
4. How often during the last year have you found that you were not able to stop drinking once you had started? (0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily	9. Have you or someone else been injured as a result of your drinking? (0) No (2) Yes, but not in the last year (4) Yes, during the last year

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Questions 5 and 10 on next page

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<p>5. How often during the last year have you failed to do what was normally expected from you because of drinking?</p> <p>(0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily</p>	<p>10. Has a relative, friend, doctor, or another health professional expressed concern about your drinking or suggested you cut down?</p> <p>(0) No (2) Yes, but not in the last year (4) Yes, during the last year</p>
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Scoring			
Risk Level	Intervention	USAUDIT Score	Possible AUD (DSM-5, ICD-10)
Zone I	Feedback	0–6/7 (Women/Men)	None
Zone II	Feedback/brief intervention	7/8–15 (Women/Men)	Mild AUD, hazardous use
Zone III	Feedback/monitoring/brief outpatient treatment	16–24	Moderate AUD, harmful use
Zone IV	Referral to evaluation and treatment	25+	Moderate/severe AUD, alcohol dependence
<p>Note: Questions 1 to 3 of U.S. AUDIT have been modified to reflect standard drink size in the United States and differences for men, women, and older adults.</p>			

Source: Babor, Higgins-Biddle, & Robaina, 2016. Adapted from material in the public domain.

AUDIT and Scoring Sheet From:
Substance Abuse and Mental Health Services Administration. Enhancing Motivation for Change in Substance Use Disorder Treatment. Treatment Improvement Protocol (TIP) Series No. 35. SAMHSA Publication No. PEP19-02-01-003. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2019.

SBIRT Practice: Scenario 1
PATIENT BACKGROUND

This is meant to practice performing the AUDIT to screen for alcohol abuse.

PATIENT: You are a 57-year-old female for an annual CPE. Your provider wants to assess you for alcohol problems. If the provider makes you uncomfortable, let them know (that is, if you feel “judged” or singled out, give them feedback as to why).

Three nights per week, you have 2-3 glasses of wine. You have never missed work, isolated, or – from your point of view – never had other adverse effects from this; you never drink more than that at one time. About 2 years ago you had some fights with your husband about this, as he thought it was too much. You admit that a few times in the last year, you do feel bad the next day about the wine.

SBIRT Practice: Scenario 2

PROVIDER BACKGROUND

This is meant to practice brief interventions.

PROVIDER: You are seeing a 57-year-old female for an annual CPE. She scored in the zone 2 (feedback/brief intervention) range via the AUDIT screener. You are reviewing the results with her, and you will try to do a “brief intervention.”

Be sure to:

- Keep it brief (< 5 min) and focused
- Get permission/make clear what you are doing. Examples:
 - “Thank you for answering those questions for me. I appreciate your openness. Would it be alright if I provided some feedback?”
 - “Would it be alright with you if I explained more about why I’m concerned?”
 - “Based on your answers to the questions I asked about your alcohol use, it appears that you are at slight risk of experiencing health, social, and other problems due to the amount of alcohol you drink.”
- Use questions to assess where she is regarding desire to stop drinking, and to help her open up about it. Examples:
 - “What are your thoughts about this?”
 - “I’m curious to know how ready you feel you are to cut back or quit drinking. On a scale of zero to ten – zero being not ready at all and ten being extremely ready, how ready would you say you are?”
 - “What would be reasons to cut back on the drinking?”
 - “What barriers are there to you cutting back on drinking?”
 - “Tell me more about that . . .”
- When feasible, use “reflective” statements based on the patient’s responses. Examples:
 - “So, this discussion comes as a surprise and you’re unclear about how alcohol could put you at risk for any problems?”
 - “It sounds like boredom is a trigger for you to drink.”
 - “You drink because you are bored, especially when your husband isolates upstairs.”
- When feasible, use language that creates ambivalence in the patient. Examples:
 - “You don’t want to cut back, but when you drink you get headaches.”
 - “You don’t think the drinking is the cause of friction in the relationship, but your husband says he watches TV because of the drinking?”
- When feasible, use affirming language. Examples:
 - “You are proud that you are exploring how your behaviors may affect the marriage.”
 - “You took a big step, being so open about these challenges.”

SBIRT Practice: Scenario 2

PATIENT BACKGROUND

This is meant to practice brief interventions.

PROVIDER: You are a 57-year-old female for an annual CPE. You completed the AUDIT screener, and your provider wants to review results with you.

Background:

- Three nights per week, you have 2-3 glasses of wine
- You have never missed work, or had other adverse effects
- You are married, overall things are good, but at night your husband goes upstairs and watches TV; that makes you feel lonely and bored, and sometimes you drink because of this
- You sometimes feel bad about drinking, almost guilty, because you feel if you didn't drink the wine you would do other things, including go watch TV with your husband
- In fact, your husband had complained that you drink too much; he was upset as he thought you did that instead of spend time together (but he goes and watches TV, so you think it's his fault you don't spend enough time together
- You did try and cut back to 1 glass in the past, but you seem to be stuck at 2-3; it has never progressed thankfully
- You don't see the drinking as a problem, but you have noticed trouble sleeping due to headaches and upset stomach when you drink 3 glasses
- There is no history of drugs or previous issues with alcohol