SAM CASE INFORMATION

Clinical Summary

- 37 y.o. patient with hypertension and 10 days of shoulder pain after trimming trees.
- Brief screen results: smokes 1/2 pack cigarettes/day, positive on NIAA single question screen, negative on single drug screen.
- Audit score is 10 (at-risk) --> needs Brief Intervention.

AUDIT RESULTS: The Alcohol Use Disorders Identification Test: Self-Report Version

Patient Name: Sam

PATIENT: Because alcohol use can affect your health and can interfere with certain medications and treatments, it is important that was ask some questions about your use of alcohol. Your answers remain confidential so please be honest. Place an X in one box that best describes your answer to each question.

One drink equals:



Questions	0	1	2	3	4	
How often do you have a drink containing alcohol?	Never	Monthly or less	2-4 times a month	2-3 times a week	4 or more times a week	4
2. How many drinks containing alcohol do you have on a typical day when you are drinking?	1 or 2	3 or 4	5 or 6	7 to 9	10 or more	0
3. How often do you have four or more drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	3
4. How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	0
5. How often during the last year have you failed to do what was normally expected of you because of drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	0
6. How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	0
7. How often during the last have you had a feeling of guilt or remorse after dinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	0
8. How often during the last year have you been unable to remember what happened the night before because of your drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	1
9. Have you or someone else been injured because of your drinking?	No		Yes, but not in the last year		Yes, during the last year	2
10. Has a relative, friend, doctor, or other health care worker been concerned about your drinking or suggested you cut down?	No 💥		Yes, but not in the last year		Yes, during the last year	0
					Total	10

ASSIGN ROLES

You will be placed in small groups within Zoom breakout rooms to assign roles in the role play.

Roles needed to be filled by volunteers for exercise:

- (1) Volunteer to Role-Play "Sam" the patient
- (1) Volunteer to Role-Play "Healthcare Provider"
- (1) Volunteer to be the Brief Intervention Debrief Leader
- Observer(s) Everyone remaining in group

PERFORM ROLE-PLAY EXERCISE

Instructions for How to Role-Play "Sam"

You are Sam, age 37. You present to your PCP, who manages your hypertension, with ongoing right shoulder pain after trimming your trees 10 days ago. You smoke 1/2 pack of cigarettes/day and use no illicit drugs. You drink two (12 oz) cans of beer after work most workdays and 1 to 2 six-packs of beer on the weekend while watching sports. You've taken ibuprofen for your shoulder, but your pain is still 6-7 out of 10 on most days.

- Family History: You have an uncle who "drinks too much."
- Your AUDIT score is a 10.

Details for AUDIT questions 8 and 9:

- -Q8. "can't remember": you drank a lot during New Year's bowl games and don't remember anything after 8 PM.
- -Q9. "injured: 2 yrs. ago you slipped coming out of a bar after drinking. You sustained a severe ankle sprain and wore a boot for several weeks.

During each step of the brief intervention that the clinician addresses, respond as follows:

Brief Intervention Step	Sam's Response	
1. Ask Permission	If the clinician asks for your permission to provide feedback, give permission.	
2. Provide Feedback	As the clinician starts to give you feedback, act surprised by the information you are receiving. "Most of my friends drink a lot more than I do." If the clinician says you are at-risk, ask "At risk for what?"	
3. Enhance Motivation	If the clinician asks about your readiness to change, reply that your readiness to change is a 6. You are surprised to find you are classified as "at risk" because many of your friends drink more than you. You chose a 6 instead of a 5 because your health is important to you and the memory blackout you had at New Year's was embarrassing and concerning to you.	
4. Negotiate a Plan	You decide to limit your drinking to no more than 2 beers per day on both workdays and weekends.	

Instructions for How to Role-Play "Healthcare Provider"

Briefly review Sam's AUDIT information. Clarify the quantity and frequency of his alcohol use, verifying the size of the drinks and whether they may actually be more than 1 standard drink each. Ask for more information about any consequences the patient disclosed in Questions 4-10. Then lead a brief intervention with Sam, modeling what you have seen demonstrated. As part of your intervention, offer alternative approaches for evaluating and treating the shoulderpain. The healthcare provider should begin the conversation.

Remember to address each of the 4 steps of a Brief Intervention:

- 1. Ask Permission to talk about alcohol.
- 2. Provide Feedback. Make sure to mention Sam is in the "at-risk" category, mention some risks that might be relevant to him/her, provide education about the link between alcohol and elevated blood pressure, and provide education about what safer drinking limits would be for him/her.
- 3. Enhance Motivation using the readiness ruler. Make sure you ask, "Why not a lower number?"
- 4. Negotiate a plan. Resist the temptation to jump in with your own plan and try asking your patient what a reasonable first step might be. Encourage him/her to choose a specific goal for number of days per week and number of drinks per drinking day. Close with a positive, affirming statement and schedule a follow-up visit.

Instructions for "Brief Intervention Debrief Leader" and "Observers"

The Brief Intervention Debrief Leader and observers should pay close attention to what is happening during the role-play exercise by writing notes on what is being observed from "Sam" and the "Healthcare Provider" by addressing the following question that you will be asked to report on concluding the role-play in the Brief Intervention Debrief.

Brief Intervention Debrief Questions

- 1. Which of the 4 steps of the BNI did the clinician carry out?
 - a. Ask Permission
 - b. Provide feedback
 - c. Enhance motivation
 - d. Negotiate aplan
- 2. What was particularly well done?
- 3. What suggestions do you have for improvement?
- 4. What, if anything, do you find helpful about the Brief Negotiated Interview approach?
- 5. What partsare challenging?
- 6. Other comments or suggestions?

BRIEF INTERVENTION DEBRIEF DISCUSSION

Instructions for "Brief Intervention Debrief Leader" and "Observers"

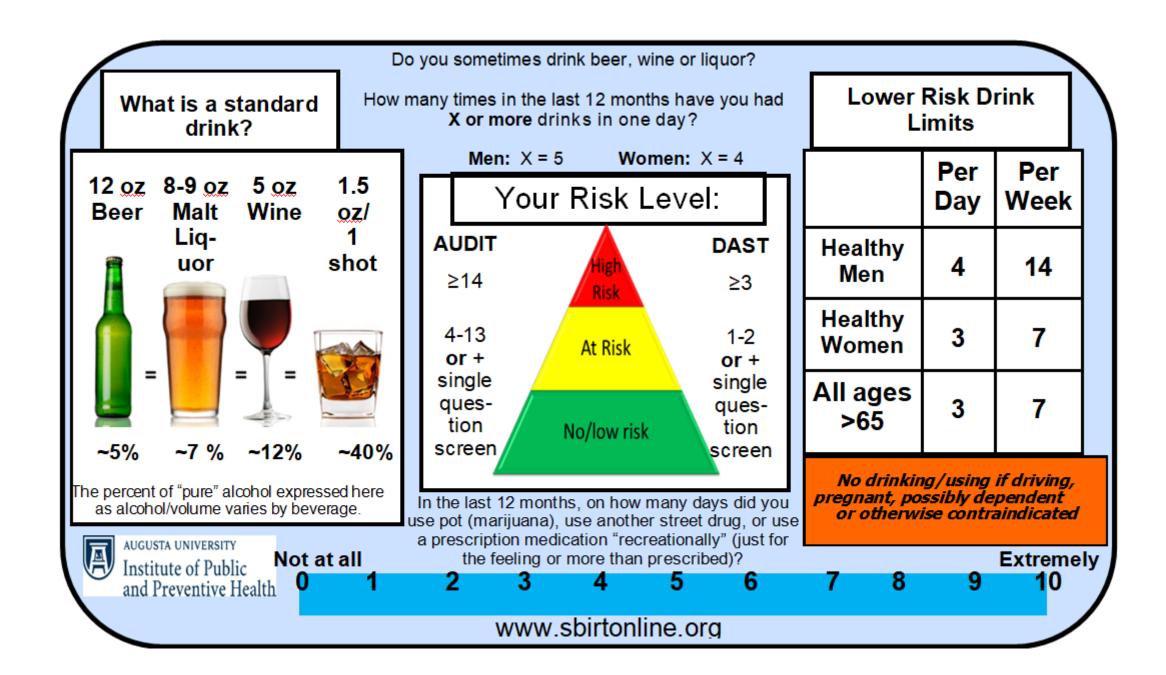
The Brief Intervention Debrief Leader will facilitate a discussion within their small group about what the "observers" had observed from the role-play exercise. The Brief Intervention Debrief Leader will the following questions for group to respond to.

Brief Intervention Debrief Questions

- 1. Which of the 4 steps of the BNI did the clinician carry out?
 - a. Ask Permission
 - b. Provide feedback
 - c. Enhance motivation
 - d. Negotiate aplan
- 2. What was particularly well done?
- 3. What suggestions do you have for improvement?
- 4. What, if anything, do you find helpful about the Brief Negotiated Interview approach?
- 5. What parts are challenging?
- 6. Other comments or suggestions?

Identify One Observer Notetaker

Identify one notetaker to synthesize what was shared from your group to provide a report out in the large group discussion if asked upon by faculty.



Zone II: At Risk AUDIT 4-13; DAST 1-2 or Positive Single-Question Screen

Schedule follow-up.

Zone III: High Risk AUDIT ≥ 14; DAST 3+

Raise the Subject	Ask permission: "I appreciate you answering our health questionnaire Could we take a minute to discuss your results? Additional Steps: Ask: "If you go a day or 2 without drinking/using do you ever get sick, shaky, have tremors/seizures/cramps, or see/hear things that are not there?"					
Provide Feedback	1.Identify risk level: refer to pyramd & provide patient's AUDIT/DAST score & risk level(s). "What do you make of this? 2.Explain any connection between substance use and the reason(s) for patient's current medical visit. 3.Educate regarding low risk drinking limits 4.Give recommendation to quit or cut back.	Offer menu of options for more help: ► Medication (naltrexone, acamprosate, disulfiram, methadone, Suboxone) ► Referral • Counseling/Brief treatment • Support group (e.g., AA, NA, Celebrate Recovery) • Treatment or substance abuse program **Treatment or substance abuse program**				
Enhance Motivation	On a scale of 0-10, how ready are you to cut back or quit your alcohol/drug use?" If >0, "Why that number and not a lower one? [If time allows, also use rulers to ask about importance, confidence] Use OARS: Open-ended questions, Affirmations, Reflections, Summaries. Look for and reflect change talk. If readiness is low, ask about good & not so good aspects of substance use.					
Negotiate Plan	If you were to make a change, what would be your first step?" Encourage a specific plan/goal to reduce use, abstain and/or seek referral.					

Support patient autonomy & make an affirming statement.