# Beaver College of Health Sciences

### **Screening Questions:**

Do you sometimes drink beer, wine or liquor?

How many times in the last 12 months have you had **X** or more drinks in one day? Men: X=5 Women: X=4

How many times in the past year have you used an illegal drug, marijuana, or prescription medication for nonmedical reasons?

### **Your Risk Level**



## **SBIRT**

Screening, Brief Intervention & Referral to Treatment

www.sbirtonline.org

No drinking/using if driving, pregnant, possibly dependent or otherwise contraindicated

Low-Risk Drinking Limits	Men	Women
No more than _ in a single day	YYYY <sup>4</sup>	TTT <sup>3</sup>
	and	and
No more than _ per Week	14	7 <b>YYY</b> YYY

## Intervention

1. Raise the Subject	Is it OK if we talk about your substance use? Tell me about your	
2. Provide Feedback	Your [alcohol/drug] use is above safe limits and I am concerned about how that affects your health.	
3. Offer Advice	I would like you to consider cutting back on your use.	
4. Enhance Motivation	Use OARS* & techniques to enhance internal motivation:  -What are some of the pros and cons of your use?  -On a scale of 1-10, how ready are you to reduce your use?	
5. Negotiate a Plan	What steps can you take to reduce your use? Can we schedule a follow up visit to talk about this further?	

