SBIRT Session – Case Studies
May 4, 2015

Practicing Screening Brief Intervention Referral to Treatment (RT)

Exercise

Clinician Role:

1. Screen your patient’s use of alcohol. You will discover s/he is a heavy drinker.
2. Provide feedback on the patient’s risks using Elicit-Provide-Elicit skills.
3. Refer to treatment in your clinic (as indicated)
Case 1

50 year old grandmother who initially presents as a risky, non-dependent drinker after a hospitalization s/p MVA due to hypoglycemia and remains a risky, non-dependent drinker by week 3 after having trouble cutting back.

Setting: First visit with clinician

Reason for visit: Post-discharge visit S/P MVA with humeral fracture – out of care for 18 months before hospitalization

Health concerns: Regaining use of arm to care for grandkids (ages 2 and 4) while daughter at work Polyuria / polydipsia and headaches, which she attributes to blood pressure; takes medications intermittently when feeling symptoms and using old bottles from last set of prescriptions Gained 20 pounds in 18 months (low energy and “bad diet”) Sometimes feels down and problems sleeping since husband died

Past medical history: Diabetes – dx 5 years ago; A1c 9.5 three years ago and 12.0 in hospital (no organ damage); fearful of taking insulin Hypertension – noted to be 150s at last visit 2 years ago

Medications: Glyburide 10mg twice daily, metformin 1000mg twice daily, benazepril 40mg daily – taking old prescriptions and forgets regularly; tyco from hospital for pain

Cigarettes: “Never touch the stuff”

Drugs: “Never touch the stuff”

Alcohol: “Sometimes to unwind after a tough week, and only on the weekends – I wouldn’t drink around my grandkids”

Social: Widowed 2 years ago with 2 sons and 1 daughter; Takes care of 2 grandkids for daughter during her work; Used to go to church regularly on Sundays, and wants to go again

Exam: BP 160/90, HR 90, weight 180 (up from 160 2 years ago); RBS 300 2 hours after eating;
Case 2

55 year old home health provider (caretaker), who initially presents after hospitalization for pancreatitis and remains a risky, non-dependent drinker by week 3 after having trouble cutting back.

Setting: First visit with clinician to establish care

Reason for visit: Follow up visit after hospital discharge s/p acute pancreatitis (single first episode)

Health concerns: Poor sleep, right knee pain

Past medical history: Two ED visits in the past 5 years for stomach pain

Review of systems: Poor sleep; Right knee pain, especially on colder days

Medical record review: ED visits only, no records of past primary care

Medications: Advil as needed, not every day

Cigarettes: Former smoker, quit 5 years ago

Drugs: Used crack and marijuana in 20s, none since

Alcohol: “Everyone drinks.”

Social: Divorced, lives alone, 2 grown children; Close with one child, argues frequently with the other Works as an IHSS provider for an unrelated elderly person

Exercises: Goes for walks several times a week

Exam: Normal except for mildly elevated blood pressure
Case 3

45 year old cab driver who initially presents with alcohol abuse and then becomes dependent by week 3.

Setting: First visit with clinician

Reason for visit: Spouse insisted. "It’s been ages since I had a checkup." “I just don't like going to the doctor."

Health concerns: Heartburn

Past medical history: "A few broken bones from working and playing hard, that's all"; "I was told I have borderline high blood pressure"

Review of systems: Difficulty sleeping; "My memory isn't very good anymore."

Medical record review: Three ED visits in the past 3 years for traumatic injuries including a motor vehicle crash with multiple facial lacerations and rib fractures and a left shoulder dislocation attributed to "I've always being injury prone"

Medications: Over-the-counter antacids

Cigarettes: 1-2 cigarettes per day, more when out drinking with friends

Drugs: Marijuana use as a teen

Alcohol: "I’m a social drinker"

Social: Married with 2 children (ages 12 and 15); Spouse complains patient spends too much time out with friends; Drives a cab in the city, but states, "The boss is an ass. I'm looking for other work."

Exercises: 3-4 times per week

Exam: Normal except for mildly elevated blood pressure
Case 4

45 year old divorced male.

The NP screens your alcohol use. Here is your alcohol use pattern, which you are honest and forthcoming about:

- You drink a fifth of bourbon from Friday night to early Sunday morning.
- This has been your drinking pattern for about 3 weeks, and you hate that you are drinking like this—you've never been a drinker before.
- You are quite hung over on Sunday, and you rest and recover all day in order to get back to work Monday morning. Your dog seems mad at you with your new weekend routine.

Other facts about you that you should share if they feel appropriate:

- You work in a large gourmet grocery store as a butcher. The job has great benefits and you enjoy it okay. It’s the only place you can get a job. You used to be an inspector for USDA, but lost your job when you caught snorting Ritalin at work.
- You used amphetamine from age 18. When you became a daily user by age 20, some friends taught you how to make amphetamine. You mostly made it for yourself, but would make extra and sell it too.
- When you were 22, one of your friends “squealed” to police in a plea bargain, and you went to prison for 4 years for drug sales and possession.
- After release from prison at age 26, you spent a year on parole in a sober living environment, before starting training then work as a health inspector. You attended 12 step meetings for support throughout your late 20s and 30s.
- You were married 10 years ago, and got divorced 5 years ago when your wife fell in love with someone else. You were devastated. Your 8 year old daughter now lives with your ex-wife and her new husband.
- Two years ago a co-worker offered you a Ritalin when your travel, work, and training schedules became overwhelming. Ritalin use increased over the following year, and you lost your job when your boss caught you snorting it in the restroom. You got back in touch with 12 step meetings, and with the help of friends and a sponsor got back on your feet and into your current job.
- Last month, your ex-wife threatened to sue you for child support. You went directly to a bar after work and had a drink, and over the past couple weeks your drinking escalated to the current level. Your sponsor and 12 step friends don’t know.
- You hate drinking but can’t seem to stop. Isn’t there something that can be prescribed to help you? You not even a drinker, for crissake.