The DSM-5 states that in order for a person to be diagnosed with a disorder due to a substance, they must display 2 of the following 11 symptoms within 12-months:

**IMPAIRED CONTROL**
1. Consuming more alcohol or other substance than originally planned
2. Worrying about stopping or consistently failed efforts to control one’s use
3. Spending a large amount of time using drugs/alcohol, or doing whatever is needed to obtain them
4. “Craving” the substance (alcohol or drug)

**SOCIAL IMPAIRMENT**
5. Use of the substance results in failure to “fulfill major role obligations” such as at home, work, or school.
6. Continuing the use of a substance despite its having negative effects in relationships with others (for example, using even though it leads to fights or despite people’s objecting to it).
7. Giving up or reducing activities in a person’s life because of the drug/alcohol use

**RISKY USE**
8. Repeated use of the substance in a dangerous situation (for example, when having to operate heavy machinery, when driving a car)
9. Continuing the use of a substance despite health problems caused or worsened by it. This can be in the domain of mental health (psychological problems may include depressed mood, sleep disturbance, anxiety, or “blackouts”) or physical health.

**PHARMACOLOGICAL INDICATORS: TOLERANCE AND WITHDRAWAL**
10. Building up a tolerance to the alcohol or drug. Tolerance is defined by the DSM-5 as “either needing to use noticeably larger amounts over time to get the desired effect or noticing less of an effect over time after repeated use of the same amount.”
11. Experiencing withdrawal symptoms after stopping use. Withdrawal symptoms typically include, according to the DSM-5: “anxiety, irritability, fatigue, nausea/vomiting, hand tremor or seizure in the case of alcohol.”

<table>
<thead>
<tr>
<th>SUBSTANCE</th>
<th>QUESTIONS</th>
<th>POSITIVE SCREEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALCOHOL (Assess frequency and quantity)</td>
<td>1. How may drinks do you have per week?</td>
<td>1. All women or men &gt;65 having more than 7/week; All men &lt;65 having more than 14/week.</td>
</tr>
<tr>
<td></td>
<td>2. When was the last time you had 4 or more (for men &gt;65 and all women) or 5 or more (for men&lt;65) drinks in one day?</td>
<td>2. In the past 3 months.</td>
</tr>
<tr>
<td>DRUGS</td>
<td>1. In the past year, have you used or experimented with an illegal drug or a prescription drug for non-medical reasons?</td>
<td>YES</td>
</tr>
</tbody>
</table>

**STEP TWO: IF RESULTS OF SCREEN ARE POSITIVE, ASSESS FOR SUBSTANCE USE DISORDER. MAY USE AUDIT OR DAST-10 OR DSM-5 CRITERIA**

<table>
<thead>
<tr>
<th>AUDIT</th>
<th>DAST-10</th>
<th>DSM-5 Criteria</th>
<th>CRAFFT</th>
<th>ACTIONS (STEP THREE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;7 (women&amp; all over 65) &lt;8 (men age 18-65) Suggests low risk</td>
<td>&lt;1</td>
<td>0-1 criteria No SUD</td>
<td>No use + 0</td>
<td>Provide positive reinforcement and education</td>
</tr>
<tr>
<td>7-15 (women&amp; all over 65) 8-15 (men age 18-65) Suggests at-risk</td>
<td>1-2 Low</td>
<td>2-3 criteria Mild SUD</td>
<td>Use + 0-1</td>
<td>Provide Brief Intervention</td>
</tr>
<tr>
<td>16-19 Suggests harmful use/high risk</td>
<td>3-5 Moderate</td>
<td>4-5 criteria Moderate SUD</td>
<td>Use + &gt;2 Must assess further</td>
<td>Provide Brief Intervention and Refer to Brief Therapy</td>
</tr>
<tr>
<td>20-40 Suggests dependent use</td>
<td>6-10 Substantial</td>
<td>&gt;6 criteria Severe SUD</td>
<td></td>
<td>Provide Brief Intervention and Refer to Specialty Treatment</td>
</tr>
</tbody>
</table>
SBIRT FLOW CHART
page 2

STEP THREE: ACTION

BRIEF INTERVENTION (Brief Negotiated Interview Model)

1. Raise the Subject
   “Would you mind if we talked for a few minutes about your alcohol (or drug) use?”
   * Ask permission
   * Avoid arguing or confrontation

2. Provide Feedback (see Education tool handout)
   “We know that drinking (or using drugs) above certain levels can cause problems such as…”
   * Review reported substance use amounts and patterns.
   * Provide information about substance use and health
   * Advise to cut down or abstain.
   * Compare the person’s alcohol use to general adult population.
   “What do you think about this information?”
   * Elicit patient’s response

3. Enhance motivation.
   “What do you like about your current level of drinking (drug use)?”
   “What do you not like about it?”
   “On a scale from 0-10, how important is it for you to decrease your drinking?”
   “What makes you a ___ and not a lower number?”
   “On a scale from 0-10, how ready are you to make a change?”
   * Assess readiness to change.
   * Discuss pros and cons.
   * Explore ambivalence.

   “What’s the next step?”
   “What are the barriers you anticipate in meeting this goal? How do you plan to overcome these barriers?”
   “On a scale from 0-10, how confident are you that you will be able to make this change?”
   “What might help you feel more confident?”
   * Negotiate goal.
   * Provide advice and information.
   * Summarize next steps and thank the patient.

Use OARS
Open-ended questions
Affirmations
Reflections
Summaries

DARN-C = change talk
Desire
Ability
Reasons
Need
Commitment

BRIEF THERAPY:
For moderate to high risk use of alcohol or drugs
* Motivational discussion; focused on empowerment and goal setting
* Includes assessment, education, problem-solving, coping strategies, supportive social environment
* Typically 4-6 sessions, each one approached as though it could be the last

SPECIALTY SUD TREATMENT:
For high risk or dependent use of alcohol or drugs
* Proactive process to facilitate access to specialty care
* Focus on motivating a person to follow-up on referral for further assessment and possible treatment
* Appropriate level of care may include inpatient, outpatient, residential
* Pharmacotherapy often included