

BNI-ART Institute Case Study
Mr. Smith

PROVIDER

Mr. Smith is a 45 year-old gentleman presenting to the ED for stomach pain and nausea.

BNI-ART Institute Case Study

Mr. Smith

PATIENT

Screening:

Normally you drink a few drinks per day but lately you have been drinking 2 drinks with lunch and 4 drinks with dinner 4 days a week and occasionally 5 or 6 drinks on the weekends.

Background:

Mr. Smith: You are a 45 year-old businessman. You present with stomach pain and unrelenting nausea. Your symptoms are intermittently relieved by over the counter antacids and Zantac (H₂ blocker). You came to the doctor today out of necessity. You have had increasing pain in your abdomen and constant nausea, which is affecting your ability to work. You have been taking Tums and Zantac over-the-counter sporadically, with brief periods of relief. You have been very stressed out at work the past month. Normally you travel 3-4 nights per week, but this has increased lately, and you have had lots of deadlines. The previous week you got into a minor car crash after drinking during a meeting lunch right before another client meeting, which you missed. You eat out with business associates for lunch and dinner almost 5 days a week.

If Provider Asks About Pros & Cons:

PROS: All your associates have alcohol with meals and you do not want to stand out. Alcohol helps you relax with clients, and you think it gives you an edge with negotiating. Also, you like the taste.

CONS: Your nausea and abdominal pain. You are also having more trouble than usual sleeping in hotel rooms. You are behind at work. You got into a car crash and missed a meeting with an important client.

If Provider Asks About Your Readiness:

You identify yourself on the Readiness Ruler as 5 out of 10. You do not choose 1 or 2 on the readiness scale because if your drinking is causing your health problems, you should probably address it.

If Provider Suggests Plan/Next Steps:

You agree to a brief trial of abstinence, and a return to visit the doctor in 2 weeks. After that, you will cut back. You also see the danger of drinking and driving and say you'll carpool next time.

If Provider Asks About Previous Successes:

You quit smoking 5 years ago and your wife really supported you there. She wants you to cut down on your drinking so she'll probably be very supportive again.

BNI-ART Institute Case Study
Mr. Rivera

PROVIDER

Mr. Rivera is 24 years old and came to the ED for chest pain.

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BNI-ART Institute Case Study

Mr. Rivera

PATIENT

Screening:

You deny having any alcohol for over a month [you completed a 5-day period of ETOH ethanol/alcohol) detox about a month ago]. You admit to smoking crack on weekends.

Background:

Mr. Rivera: You are a recently homeless 24 year-old who finished a 5-day period of alcohol detox at a local recovery center about a month ago (you voluntarily admitted yourself). Your mother kicked you out, and your girlfriend wouldn't take you in. You have come to the emergency department because you have been experiencing pain in your chest and trouble breathing.

If Prompted About Drinking/Drug Use:

You have not had a drink in over a month. You do smoke crack cocaine every Friday and Saturday after you get your paycheck. Although you have smoked it, you prefer snorting it. You would use it more, but you run out of money by the end of the weekend. You spend about \$200-\$300 per week on cocaine. (You do not initially see a connection between your cocaine use and your health problems.)

If Provider Asks About Pros & Cons:

PROS: Cocaine makes you feel powerful and invincible. When you are high you feel better than any other time. Your mother kicked you out and cocaine helps you worry less about where you will sleep at night. It is now your only vice – since you've already given up alcohol.

CONS: Sometimes coke makes you want to fight. Your girlfriend is constantly mad at you because you spend your paycheck on drugs and cannot take her out like other boyfriends do. If you saved all the money you spent on coke over the last year, you would have money to live somewhere.

If Provider Asks About Your Readiness:

You identify yourself as a 5 on the Readiness Ruler. It's not a 1 or a 2 because you are spending a lot of money and you see that coke is hurting your relationship with your girlfriend.

If Provider Suggests Plan/Next Steps:

You believe you will be able to give up coke when you are ready since you were successful in giving up drinking. **If prompted by provider:** you refuse to completely give it up but you agree to try to cut down and, if offered, will talk to someone about programs out there that might help you.

**BNI-ART Institute Case Study:
Ms. Emerson**

PROVIDER

Ms. Emerson is a 64 year-old who came to the ED with minor injuries following a car accident.

BNI-ART Institute Case Study: Ms. Emerson

PATIENT

Screening:

During the screening, you admit to drinking two glasses of wine over a three hour period, but had a high BAC on admission.

Background:

Ms. Emerson: You are a 64 year-old x-ray technician who drove your car into a ditch. You just recently moved to the area due to problems you've had in the past, some involving alcohol. You say, *"I don't really feel like talking about it."* If asked to talk about your life, you say, *"I've had a hard life and I've had to fight hard for everything and then I just lose."* You say that people keep "taking things away from you." By that, you mean your kids. Your ex-husband took custody of your children when you got divorced 15 years ago, and ever since then, you've been in a downward spiral of mean men and little self-confidence.

Although you're reluctant and don't think you drink a lot, you admitted during the screening that you drank two glasses of wine over a three hour period. That wasn't the truth. You actually drank 2 glasses of wine AND a ½ pint of gin. Your BAC upon admission was 0.28.

If Provider Asks About Pros & Cons:

PROS: It helps you escape and numbs the pain that you have to keep inside all day during your shift. Then at night, when you get home, "I open up the cabinet and I feel the sadness lift as I pour my first glass and then another and another." It's all you've got right now.

CONS: "I cannot lose my job." This accident is a bit of a wake-up call. You want to work at least a few more years before retiring. **If pressed for more cons:** You know that alcohol has caused you some problems in the past and you don't want them repeated. You also lost your mother and father to alcoholism and you don't want to die alone like them. You have some new friends from work and you want to make a good impression on them, which the alcohol does not help with.

If Provider Asks About Your Readiness:

You think that your readiness is about 3 out of 10. It's not a 1 or a 2 because you don't want to jeopardize your remaining work years and you know it's holding you back from hanging out with your new friends when they invite you out.

If Provider Suggests Plan/Next Steps:

You feel like you can cut back whenever you want. You've already made several changes in your life, and you're not sure making any more at this point in time will help. **If pressed:** You have a history of depression and talking to the Provider reminded you of your old therapist back when you were going through the divorce. Getting all this stuff off your chest has helped a little. You ask the Provider if there's anybody you can get in touch with to arrange an appointment with a therapist.

**BNI-ART Institute Case Study:
Ms. Brown**

PROVIDER

Ms. Brown is a 26 year-old out-patient in the ED for a hurt wrist.

BNI-ART Institute Case Study:

Ms. Brown

PATIENT

Screening:

You drink 1-2 beers during the week and up to 4 drinks on most weekend nights. You also sometimes smoke pot on the weekends too, but only if a friend has some. You think this kind of drinking is the “norm” for most people your age.

Background:

Ms. Brown: You are a 26 year-old woman at the ED with an injured wrist. Your friends found you on the bathroom floor after a night of drinking. You were living with your boyfriend, but caught him cheating on you, so you moved in with your mother and father, who aren't too happy about you being there. You were blowing off some steam with friends last night, and when they found you, they insisted you come to the hospital. You drink 1-2 beers during the week and up to 4 drinks on most weekend nights. You also sometimes smoke pot on the weekends too but only if a friend has some. You think this kind of drinking is the “norm” for most people your age.

If Provider Asks About Pros & Cons:

PROS: Everyone you know drinks like you do; it is a part of your social life. You enjoy the slight buzz you get when you drink and it especially feels good after a long week of work. It helps you to have fun and forget about all your work.

CONS: At first, nothing you can think of. **If provider prompts you about regrets:** You admit that you blacked out last night and aren't quite sure what happened. You're lucky you didn't hit your head. Although your wrist still hurts, the bruising is gone and it's not swollen anymore. You concede that it was probably the alcohol that made you black out.

If Provider Asks About Your Readiness:

You identify yourself as a 2 on the Readiness Scale and feel that there isn't really a need to change your behavior. **If provider asks “why not 1?”:** you don't want to black out again. You're pretty confident that if you want to change in the future, you'll be able to do it on your own.

If Provider Suggests Plan/Next Steps:

You don't really feel that drinking is a problem, but you agree that maybe drinking so much that you black out is not a good thing. So you agree to try to drink less, drink slower, and make sure there is a friend to watch out for you.

BNI-ART Institute Case Study
Mrs. James

PROVIDER

Mrs. James is a 72 year-old widow who is very thin and has a bruise under her right eye.

BNI-ART Institute Case Study

Mrs. James

PATIENT

Screening:

You have been increasing your alcohol intake from the usual 1 highball in the afternoon to 2-3 throughout the evening, until you feel sleepy enough to go to bed. If Provider asks about connection between health and drinking: You do not see a connection between your drinking and what your son describes as you “not being yourself.” Although you recently fell on your way to the bathroom one night, you think it happened because of the throw rug in the bathroom, not your balance.

Background:

Mrs. James: You are 72 years old, a widow for the past year, living independently, and very lonely. You don't have any medical problems and don't take any medications. Your son moved to California 6 months ago but came to visit yesterday. He noticed some old bruising under your right eye and thinks that you're not being yourself (you couldn't remember recent events), so he brought you to see a doctor.

If Provider Asks About Pros & Cons:

PROS: Having a drink or two is the only thing you enjoy anymore and you don't do it very much. You find that it helps with the loneliness. Sometimes you can get the neighbors to come over for a short visit for afternoon drinks and that's nice.

CONS: You have not had the energy to go to your sewing class at the senior citizens' center. You are initially tired in the evening, but your sleep is interrupted multiple times during the night.

If Provider Asks About Your Readiness:

You identify yourself as 4 out of 10 on the Readiness Ruler. It is not a 1 or a 2 because you live alone and if you fell again, you don't know who would be there to pick you up.

If Provider Suggests Plan/Next Steps:

You will THINK about cutting back, and agree to return for another visit, and—if prompted—will agree to see a social worker about your loneliness and finding other social activities.

BNI-ART Institute Case Study
Mr. Roberts

PROVIDER

Mr. Roberts is a 45 year-old single man. He presents to the ED early on a Sunday morning complaining of chest pain and shortness of breath, and is admitted upstairs for observation.

BNI-ART Institute Case Study Mr. Roberts

PATIENT

Screening:

You previously used heroin up until 2 months ago, when you went to detox. You recently had a UTS that was positive for cocaine, which concerns you because it may affect receiving continued services for your heroin treatment.

Background:

Mr. Roberts: You are a 45 year-old single man who has been living with your mother for the past four months. Two months ago, you went to detox for heroin addiction, then to a short-term program for 2 weeks before returning home. Prior to that you had been living for 15 years with your girlfriend but you were evicted from the apartment in which you had lived for 10 years, having fallen behind on the rent due to heroin use by both of you. She went to a long term residential treatment program just before you went to detox. You have been doing well in the hospital's Office Based Opioid Treatment (OBOT) program and taking Suboxone 12 mg sublingually daily. You returned to work in construction and started saving some money. Your elderly mother, however, has health issues that have left her with memory problems and she often thinks you are still using and not working. You are fearful that the urine test that has been done will show the cocaine that you have been using just on weekends. You have had a previous UTS that was positive for cocaine and you are afraid that you might be kicked off the OBOT program.

If Provider Asks About Pros & Cons:

PROS: You have been doing very well on the Suboxone, you are back to work and saving money and you only do a couple of lines on the weekend. This is the best you have been doing with your addiction since you were 15. You are not dealing or getting arrested, and using on the weekends helps you "unwind" and reward yourself for good a week. Cocaine helps when your mother starts to get on your nerves. It also helps when your girlfriend is over on the weekends as the Suboxone has affected your sexual function—but you don't really want to mention this to the doctor.

CONS: You know it could easily get out of control again. You only use it on the weekends because it keeps you awake at night, and if you use during the week, you might not be able to wake up at 5AM to go to work. You are getting older and are afraid that you could have a heart attack, especially since your mother has heart disease and your father died in his 50's of a heart attack. Most of all, continued positive urines could mean not being able to stay in the OBOT program.

If Provider Asks About Your Readiness:

You identify yourself as a 5 out of 10. It is not a 1 or a 2 because you really do not want to have to give up Suboxone, but it is so hard to "give up everything".

If Provider Suggests Plan/Next Steps:

You will agree to do an intake with the acupuncture clinic at Substance Abuse Treatment Services and to talk to your provider about the effect on your sexual function. You will also think about other activities that you can do to unwind on the weekends.