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MINNESOTA STATE UNIVERSITY MANKATO

Usage of the Alcohol Use Disorder Identification Test (AUDIT) With Hospital Inpatients

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Purpose

This project investigated whether the AUDIT was being used as the World Health Organization (WHO) recommends within Mayo Clinic Health System – Mankato (MCHS). The goals of the study were to describe the Chemical Dependency (CD) process and to determine the role of the AUDIT in the CD consult and assessment process. Recommendations were made to enhance the process of identifying, assessing, and intervening with patients with alcohol use problems.

Literature Review

Alcohol is the most frequently used psychoactive drug.¹ The AUDIT is one screening that can be used in a health care setting which can detect harmful and hazardous alcohol use and alcohol dependence before any physical or social problems occur.^{2,3,4}

The AUDIT is simple to use, standardized, and administered with little cost and time.^{2,4,5} It has been shown to have high internal consistency, reliability, and specificity.^{2,6} Most studies agree that a score of eight or more equals a positive screen, which would require further intervention.^{2,3,4,7,8} By using the AUDIT scoring system, brief interventions can be administered and can reduce alcohol consumption by up to 50% following a hospital inpatient stay.^{1,2} For patients scoring 20 or more a brief intervention is not appropriate and the patient should be referred to a program specializing in alcohol use disorders.⁷

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Methodology

This project had two distinct parts. Part I involved oral, semi-structured interviews with MCHS staff about the CD consult and assessment process. Ordering doctors and consulted social workers were asked four open-ended questions about their perceptions of the CD process, if they use the AUDIT in determining a need for consult or use the AUDIT in assessing patients, and any recommended changes they have for the process.

Part II asked the social workers to document on a score card the AUDIT score of the patient and the intervention/recommendation provided to the patient.

Results - Interviews

Staff Interviews – 11 Interviews Completed (7 Social Workers & 4 Doctors)

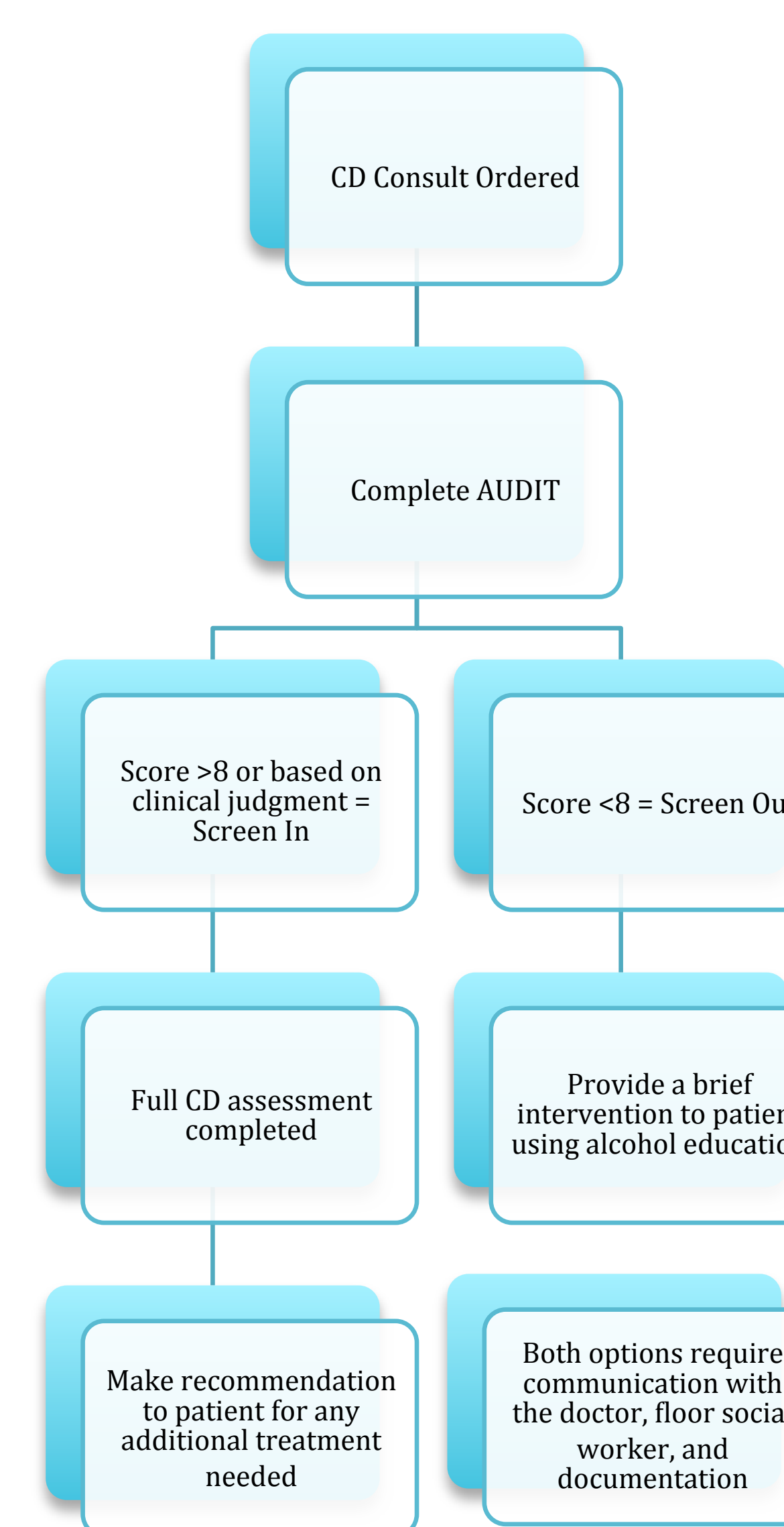
- Only 1 staff used the AUDIT when assessing patients for chemical use.
- All social workers interviewed (7) wanted more consistency with the ordering, assessing, and staffing for completion of CD consults.
- 71% of social workers wanted the ability to screen out inappropriate CD consults.
- All doctors interviewed (4) used the social worker's recommended interventions for their patients.
- Doctors wanted to see consults done in a timelier manner, better communication with the doctors, and more education on CD use provided to patients.

Results – AUDIT Scorecard

Audit Score and Drinking Risk Level	# of Assessments Completed	Recommended intervention by World Health Organization	% Followed Recommended Intervention
1-7: Low risk drinking	15	Education	40%
8-15: Use in excess of low-risk	7	Simple advice	0%
16-19: Harmful and hazardous drinking	4	Simple advice, plus brief counseling and continued monitoring	0%
20-40: Alcohol dependence	8	Referral to specialist for diagnostic evaluation and treatment	88%
34 total AUDIT scores were collected with recommendations following AUDIT guidelines 38% of the time.			

Recommendations

The AUDIT tool can alleviate many of the concerns that both social workers and doctors have about the consult process. The AUDIT provides social workers with the ability to be more consistent in assessing patients and to screen out CD consults. Because the AUDIT can be completed in less than 10 minutes, it allows social workers to be more timely in seeing patients.



Flow Chart

As part of the assessment, the social worker should administer the AUDIT on every consult. The AUDIT score combined with clinical judgment should be used to determine if a full CD assessment is needed. The purpose of the full assessment is to determine if the patient needs services beyond what can be offered within the hospital. Brief interventions should be done with patients not needing additional services.

Brief Interventions

Elements of brief interventions include:

- Provide feedback about the results of the screening.
- Educate about low-risk levels of drinking and hazards of exceeding them.
- Encourage patients to adhere to the guidelines.
- Simple advice may be needed for people who score between an 8 and 15 on the AUDIT. This includes discussing the risks of drinking in excess and the need to cut down or stop drinking all together.
- Work with patients on creating a goal. Patients reluctant to create a goal may need more than a brief intervention.