<table>
<thead>
<tr>
<th>Risk Level</th>
<th>Alcohol</th>
<th>Drugs</th>
<th>Recommended Intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>No/Low</td>
<td>0-10</td>
<td>0-3</td>
<td>Screening and Feedback</td>
</tr>
<tr>
<td>At-Risk</td>
<td>11-17</td>
<td>4-17</td>
<td>Brief Intervention*</td>
</tr>
<tr>
<td>Moderate</td>
<td>18-26</td>
<td>18-26</td>
<td>Brief Treatment*</td>
</tr>
<tr>
<td>High</td>
<td>27+</td>
<td>27+</td>
<td>Referral to Treatment*</td>
</tr>
</tbody>
</table>

* Indicates that you should use a brief negotiated interview to complete this intervention

**STEPS OF THE BRIEF NEGOTIATED INTERVIEW (BNI)**

**Raise the Subject and Build Rapport**
- Begin with a general conversation.
- Ask permission to talk about alcohol/drugs.
- Explore the pros and cons of use.
  - “What are the good things about using alcohol/drugs?”
  - “What are some of the not-so-good things about using alcohol/drugs?”
- Ask open-ended questions.
- Reflections.

**Provide Feedback**
- Ask permission to give information.
- Discuss screening findings.
- Link substance use behaviors to any known consequences.

**Build Readiness to Change**
- “Could we talk for a few minutes about your interest in making a change?”
- “On a scale from 1 to 10, 1 being not ready at all and 10 being completely ready, how ready are you to make any changes in your substance use?”

**Negotiate a Plan for Change**
- A plan for reducing use to low-risk levels.
- An agreement to follow up with specialty treatment services

Funded by the Substance Abuse and Mental Health Services Administration Grant #1H79TI026666
1. How often do you have a drink containing alcohol?

2. How many drinks containing alcohol do you have on a typical day you are drinking?

3. How often do you have “X” or more drinks on one occasion?

   **Men:** $x = 5$
   **Women & Men ≥ 65:** $x = 4$

In the past 12 months, have you used marijuana, another street drug, or used a prescription medication just for the feeling, more than prescribed, or that was not prescribed for you?

**Drug Use Initial Screen**

**AUDIT-C Initial Screen**

1. How often do you have a drink containing alcohol?

2. How many drinks containing alcohol do you have on a typical day you are drinking?

3. How often do you have “X” or more drinks on one occasion?

   **Men:** $x = 5$
   **Women & Men ≥ 65:** $x = 4$

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**Low Risk Drinking Limits**

<table>
<thead>
<tr>
<th></th>
<th>Per Day</th>
<th>Per Week</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Men &lt;65</strong></td>
<td>4</td>
<td>14</td>
</tr>
<tr>
<td><strong>Women &amp; Men ≥ 65</strong></td>
<td>3</td>
<td>7</td>
</tr>
</tbody>
</table>

No drinking/using if driving, pregnant, or otherwise contraindicated.