**PROJECT ED HEALTH**

**BNI Adherence & Competence Checklist**

**Yes No**

1. Ask the patient for permission to discuss alcohol use
2. Review patient’s drinking patterns

1. Express concern about these patterns
2. Ask about a connection
3. Reflect the patient’s statement
4. Provide medical facts and information that there is a connection

between the fight and drinking. (For example, not seeing cues that

things were getting out of control)

1. Inform patient of NIAAA guidelines and norms by using show cards
2. Ask patient to identify readiness to change on readiness ruler

show card

1. Ask why they choose that number and not a lower one
2. Reflect patients statements regarding change
3. Elicit response (How does all this sound to you?)
4. Negotiate the goal (What would you like to do?)
5. Give advice if necessary
6. Summarize (This is what I’ve heard you say..)
7. Have patient fill out agreement card
8. Provide health information sheet
9. Suggest Primary Care Follow-up
10. Thank the patient for his/her time

**Optional Question:**

**Yes No**

Ask EP, “What if the patient had chosen a 1 on the readiness ruler?”

**1.** EP would ask patient, ‘What would make this a problem for you?”

**Comments:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**EP Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reviewer**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Start time**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **End time**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_