**Case # 1**

**Patient**

**History:**

You are a 42 year old woman who is a bank vice-president. You have a very high-stress job. You have come to the ED because you were having abdominal pain and your primary care physician referred you. You have no vomiting, and no change in bowel patterns.

**Alcohol Screen:**

You drink every day. You have at least 2 bloody Mary’s (2 shot glasses of vodka in each) while making dinner, and 2 or 3 glasses of wine during dinner. The most number of drinks that you have on any occasion is 6.

**Negotiation:**

You don’t see the connection between your drinking and your abdominal pain. On a scale of 1-10, you choose a 4. PROS: Drinking relaxes you, and you look forward to it. You do not drink during the day. Drinking makes you tired and helps you to fall asleep at night. CONS: You fall asleep on the couch and are not available to your kids to help them with their homework in the evenings. You are not sleeping well at night and have disrupted sleep patterns.

**Patient Goal:**

You will try to have no more than 1 drink per night.

You will not drink and drive.

**Case # 1**

**Provider**

**History:**

Ms. Carter is a 42 year old woman who is a bank vice-president. She was sent to the ED because of her abdominal pain. It is epigastric and associated with nausea, no vomiting. It has been getting worse over the past few weeks, and today it was so bad she called her doctor and he told her to come to the ED.

**Physical Exam:**

Mrs. Carter is in generally good health. She is a little overweight. Her blood pressure is 130/88, higher than normal which always has been 120/80. Her abdominal exam reveals some tenderness in the epigastric area, no rebound or guarding. Her stool shows no occult blood. Her LFTs are slightly elevated.

**Alcohol Screen:**

She drinks daily.

She reports at least 2 Bloody Mary’s (2 drinks each) and 2-3 glasses of wine each night

Greatest amount of drinks per occasion is around 6

**Physician Advice:**

Abstinence for now as you think she may have gastritis. You prescribe some H2 blockers and refer her to a GI specialist who her internist recommends. You also think that this amount of drinking could be related to her increase in blood pressure, and you want her to have it checked at her primary care doctor’s office this coming week.

**Case #2**

**Patient**

**History:**

You are a 64 year old black man who has been suffering from metastatic lung cancer for several months. You are tired of it all, now the pain is increasing in your bones and lungs. You have been using home oxygen for several months now and you have these pills, Oxycontin that you are supposed to take regularly every 12 hours and you have some others you can take in between. You have been drinking more to dull the pain, and you life. You drink maybe a ½ pint or more of whiskey each day. You have never had any problems with alcohol before. There are days when you do not drink, because you have run out and you do not have any withdrawal problems

**Negotiation:**

You are not too ready to stop drinking at this time. After all what do you have left, you quit smoking already and this helps dull the pain. However, you are interested in what the doctor has to say about your pain. Perhaps falling asleep and missing your scheduled Oxycontin is causing more of a problem. You chose a 4 on the 1-10 scale because of that and will consider cutting back.

**Patient Goal:**

You will agree to 2-maybe 3 drinks each day

**Case #2**

**Provider**

**History:**

Mr. Ash is a 64 year old black male with a history of lung cancer. He is currently on home O2. He presents with increasing Pain in his chest and bones. He is on Oxycontin for pain. He is also complaining of increased fatigue. He has no history of alcohol problems in the past.

**Physical Exam and Work-up**

He is cachetic, looking older than his stated age. He has had all the chemotherapy that he can have and is end stage at this time. There is nothing new on his x-ray or labs. His O2 saturation is stable at 93% on 2 liters of O2.

**Alcohol Screen:**

He is drinking increasing amounts of whiskey, he is unclear how much. Probably, at least ½ pint each day.

**Physician Advice:**

You believe that Mr. Ash is self medicating himself with alcohol. However it makes him fall asleep during the day, and then not sleep well at night. You wonder if he is able to take his Oxycontin on time, and perhaps that is why he wakes up in more pain.

You really want him to try a period of abstinence at first, but if not willing you want him to cut back to 1 or two shots per day at the most.

**Case #3**

**PATIENT**

**History:**

You are a 21 year old male who had to go the ED for a penile drip. You are very mortified by having to do so, and hope that you do not meet up with anyone you know. You were with a new partner a few weeks back. You met up with her in a bar. You have not seen her since. Normally you are more careful. You are worried about taking time off from work to go the ED and hope that you do not have to come back.

**Alcohol Screen:**

You drink 3-4 times a week, somewhere between 6-10 beers at a time.

The most you had was 12, the time you picked up this girl.

**Negotiation:**

You are not very happy about any of this. On a scale of 1-10 you choose a 2. PROS: All of your friends drink, you drink no more, maybe less than many. You never got into any trouble that you can think of. What is with this doctor, you are here for an STD. Why doesn’t he/she just give you the shot and be done with it! CONS: Well after he mentioned it, you guess that you probably were not too with it that night. You didn’t know her and you usually do wear a condom with new partners.

**Patient Goal:**

You will agree to no more than 6 at a time

You never drink and drive

**Case #3**

**PROVIDER**

**History:**

Mr. Adams is a 21 year old male who presents to the ED with a penile discharge. He takes no medications and has no medical problems. He was with a new partner and few weeks back that he met at a bar. He is anxious that he had to take time out from work to come to the ED.

**Physical Exam:**

Mr. Adams is in generally good heath with normal vital signs.

He does in fact have a yellow discharge from his penis.

The remainder of his exam is normal.

**Alcohol Screen:**

He drinks 3 or 4 times a week

He has 6-10 beers on each occasion out with his friends

The maximum number of drinks in the past month is 12

**Physician Advice:**

14 drinks per week and no more than 4 on an occasion

Do not drink and drive

**Testing Case**

**Patient**

**History:**

You are a 47 year old woman whose divorce was final yesterday. Afterwards, you went out with your friends to celebrate, and spent most of the evening drinking. The divorce was very difficult, and you have been under a great deal of stress over the past several months. You were driving home alone after being out and crashed your car into a barrier. You were wearing your seatbelt but did not have an airbag in your car, and your face hit the steering wheel. You have several cuts on your face and a fractured jaw. You were admitted to the hospital for observation overnight.

**Alcohol Screen:**

Since you and your ex-husband separated, you have been drinking more often, and frequently go out with friends to a bar. You also drink at home in the evening when you return from work. You usually have 2-3 drinks per night when you are at home, and as many as 6-8 when you are out with your friends. You can’t remember how much you had to drink last night.

**Negotiation:**

The practitioner sees you and tells you that your blood alcohol was 178 mg%. You tell him that you are sure that this was an unusual case, and that you felt fine and were able to drive. You don’t think that the crash was related to your drinking, that the road might have been slippery. On a scale of 1-10, you choose a 3. PROS: You have been going through a difficult time and drinking relaxes you, and you look forward to it. You do not drink during the day. Drinking helps you to fall asleep at night. CONS: You fall asleep on the couch and are not able to participate in any activities in the evenings. You are not sleeping well at night. Sometimes when you drink with your friends, you do things that you don’t like.

**Patient Goal:**

You will try to have no more than 3 drinks @ a time and 7 drinks per week, although it will be difficult when you go out with your friends. You will try not to drink and drive, but sometimes cannot get a ride.

**Testing Case**

**Provider**

**History:**

Ms. Smith is a 47 year old woman whose divorce became final yesterday. She went out to celebrate with friends in the evening, and was driving home and crashed her car into a barrier. She was wearing her seatbelt, but her airbag did not deploy, and she has multiple facial lacerations and a mandibular fracture. Her BAC was 178 mg%.

**Alcohol Screen:**

She drinks daily, and has been drinking more since her husband left. .

She goes out several times a week with friends, and also drinks in the evening when she is home alone. She usually has 2-3 glasses of wine at home, and when she is out she tends to drink more.

The greatest number of drinks per occasion is 8.

**Physician Advice:**

Decrease daily alcohol consumption to no more than 3 drinks @ a time and 7 drinks per week. Do not drink and drive.