

Assessment of Patients at Risk for Alcohol Misuse in a Rural Emergency Department

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Background

When a patient presents to the emergency department (ED), alcohol is not generally the chief complaint but often the chief complaint is either caused or exacerbated by the use of alcohol. Hospital emergency departments have historically focused on treating the patient's injury or illness and have rarely addressed the root cause of the trauma—alcohol abuse.

Purpose & Objectives

The purpose of this project was to develop a protocol to identify patients at risk for alcohol misuse who present to the ED at a regional medical center pursuant to an alcohol related incident for referral to appropriate community intervention resources.

- Adapt a screening instrument to identify patients at risk for alcohol misuse
- Use the screening instrument to identify patients at risk for alcohol misuse
- Identify appropriate resources for referral of patients at risk for alcohol misuse

Method

Adapted questions from the Alcohol Use Disorder Identification Test (AUDIT) instrument (World Health Organization, 2010) were used to survey 32 patients over age 18 who presented with potentially alcohol-related complaints, had not suffered a brain injury, and were not grossly intoxicated or potentially violent. Patients identified as at risk for alcohol misuse were provided with a list of community referrals. Descriptive statistics were used to evaluate patient responses, the predictive value of the instrument, and whether the patient accepted the community referral list.

Results

- Average alcohol intake prior to ED visit: 1.75 drinks
- 46% previous alcohol-related treatment in ED
- 21% previously seen by HCP for alcohol problem
- 40% previously told they might have an alcohol problem
- 38% admitted missing work due to alcohol use
- Alcohol consumption: Average 1.06; range 1-3 drinks/day
- 25% admitted >3 drinks per day
- Average nights/week binge drinking: 1-2
- 63% admitted they had injured themselves while drinking

Results (continued)

- Patients identified as having at risk for alcohol misuse: 56%
- Patients who accepted community resources list: 31%
- Patients who actually left with the list upon discharge: 25%

Implications

Nurses are in a unique position to provide holistic care by helping patients identify potential risk for alcohol misuse and take corrective action. Although participating nursing staff responded positively to the assessment, time constraints and staffing issues sometimes prevented screening of at-risk patients. Additional research is needed to develop an effective approach to identification of and intervention for ED patients at increased risk of alcohol misuse. Strategies to motivate active participation by ED staff are also needed.

References

World Health Organization (2001). The Alcohol Use Disorders Identification Test: Guidelines for Use in Primary Care (2nd ed.). Retrieved from http://whqlibdoc.who.int/hq/2001/who_msd_msb_01.6a.pdf