

**PROJECT ED HEALTH**  
**BNI Adherence & Competence Checklist**

	<b>Yes</b>	<b>No</b>
1. Ask the patient for permission to discuss alcohol use	<input type="checkbox"/>	<input type="checkbox"/>
2. Review patient's drinking patterns	<input type="checkbox"/>	<input type="checkbox"/>
3. Express concern about these patterns	<input type="checkbox"/>	<input type="checkbox"/>
4. Ask about a connection	<input type="checkbox"/>	<input type="checkbox"/>
5. Reflect the patient's statement	<input type="checkbox"/>	<input type="checkbox"/>
6. 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)	<input type="checkbox"/>	<input type="checkbox"/>
7. Inform patient of NIAAA guidelines and norms by using show cards	<input type="checkbox"/>	<input type="checkbox"/>
8. Ask patient to identify readiness to change on readiness ruler show card	<input type="checkbox"/>	<input type="checkbox"/>
9. Ask why they choose that number and not a lower one	<input type="checkbox"/>	<input type="checkbox"/>
10. Reflect patients statements regarding change	<input type="checkbox"/>	<input type="checkbox"/>
11. Elicit response (How does all this sound to you?)	<input type="checkbox"/>	<input type="checkbox"/>
12. Negotiate the goal (What would you like to do?)	<input type="checkbox"/>	<input type="checkbox"/>
13. Give advice if necessary	<input type="checkbox"/>	<input type="checkbox"/>
14. Summarize (This is what I've heard you say..)	<input type="checkbox"/>	<input type="checkbox"/>
15. Have patient fill out agreement card	<input type="checkbox"/>	<input type="checkbox"/>
16. Provide health information sheet	<input type="checkbox"/>	<input type="checkbox"/>
17. Suggest Primary Care Follow-up	<input type="checkbox"/>	<input type="checkbox"/>
18. Thank the patient for his/her time	<input type="checkbox"/>	<input type="checkbox"/>

**Optional Question:**

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

**Yes**

**No**

1. EP would ask patient, 'What would make this a problem for you?'

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

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

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

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