

## Alcohol Use in Clinic: Next-Step Framework

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### Purpose

Use this when alcohol use comes up in clinic and you need a structured way to decide what to do next.

The goal is not to diagnose perfectly in the moment. The goal is to decide whether alcohol has become clinically relevant, how to keep the patient engaged, whether change is safe, and what kind of next step fits.

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### Is alcohol relevant enough to address?

Consider bringing it up if:

Signal	What it may suggest
Loss of control or escalation	Drinking is becoming harder to regulate
Medical consequences	Labs, blood pressure, sleep, falls, injuries, liver concerns
Functional consequences	Work, parenting, relationships, finances, reliability
Alcohol serving a role	Sleep, anxiety, coping, social ease, numbing, escape

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### Start with the patient's stance.

If the patient is...	Your first task is...
Open / curious	Move into assessment, goals, safety, and options
Guarded / minimizing	Understand what alcohol is doing for them
Ambivalent	Draw out both sides without forcing a decision
Not ready	Keep the conversation alive and reduce shame

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## Clarify the goal

Goal / readiness	Clinical direction
<b>Wants to stop</b>	Check withdrawal safety before encouraging abstinence
<b>Wants to cut back</b>	Treat reduction as active treatment, not “less serious” care
<b>Not ready yet</b>	Explore ambivalence, consequences, and values
<b>Unsure</b>	Ask what they want to be different, even if they’re not ready to change

## Safety check: Could changing be risk?

Before recommending stopping or major reduction, check for withdrawal risk.

Higher concern if there is:

- Prior withdrawal seizure, delirium tremens, or hallucinosis
- Very heavy daily use
- Current tremor, sweating, nausea, anxiety, insomnia, or autonomic symptoms
- Unstable vitals or significant medical illness
- Pregnancy
- Limited support or unreliable follow-up

*If stopping is unsafe, the next decision is level of care – not motivation.*

## What next step fits best?

Situation	Think about...
<b>Open to help</b>	What treatment fits their goal and readiness?
<b>Wants to reduce</b>	Harm reduction plan, medication discussion, follow-up
<b>Wants abstinence</b>	Safety, supports, medication, and level of care
<b>Guarded or ambivalent</b>	MI-informed follow-up may be the intervention
<b>Medication seems relevant</b>	Naltrexone often belongs in the conversation
<b>Risk exceeds outpatient care</b>	Escalate support rather than pushing harder