



Alcohol Care Team ዕያለል ነው የተመደረሰት ነው የተመደረሰ

Taking an Alcohol History

By Antony Simpson

Service Manager/Alcohol Specialist Nurse – Alcohol Care Team, The Royal Oldham Hospital

0161 656 1933

07973 691037

Antony.Simpson@nca.nhs.uk

Version 2.1



Taking an alcohol history is essential to safe care and appropriate treatment.

The Alcohol Care Team often sees the following in patient notes:

- Alcohol excess
- ETOH +++ / ETOH X5
- Intoxicated
- Intoxicated +++
- Known Alcoholic / Known Alcohol Dependent

With no further details given. This level of detail is not enough to know what care, tests/investigations or treatments are required.



- Taking an alcohol history is everybody's responsibility, but usually falls within the roles of Doctors and Nurses.
- There are many evidence-based tools to use when taking an alcohol history.
- The Alcohol Care Team advocates the use of AUDIT-C, which was developed by the World Health Organization. It scores a patient based on their answers.







AUDIT-C, looks like this:

Questions	Scoring system					Your
Questions		1	2	3	4	score
How often do you have a drink containing alcohol?	Never	Monthly or less	2 - 4 times per month	2 - 3 times per week	4+ times per week	
How many units of alcohol do you drink on a typical day when you are drinking?	0 - 2	3 - 4	5 - 6	7 - 9	10+	
How often have you had 6 or more units if female, or 8 or more if male, on a single occasion in the last year?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	

Scoring:

A total of 5+ indicates increasing or higher risk drinking. An overall total score of 5 or above is AUDIT-C positive.





AUDIT-C, scoring:

Score	Risk Level	What This Means
0	Abstainer	You don't drink alcohol at all. It doesn't have any
		impact on your health or life.
1 - 4	Low Risk	You drink within recommended limits. Well done.
5 - 8	Increasing	Your drinking is likely to be affecting your health
	Risk	or wellbeing in some way already.
9 – 12	Higher Risk	Your drinking may have become quite
		problematic, you may have or be heading towards
		dependency. You would benefit from a specialist
		assessment by the Alcohol Care Team.

Saving lives, Alcohol Care Team Improving lives Alcohol Care Team Improvin





Alcohol Units

In order to use AUDIT-C you require a basic understanding of alcohol units.

A single unit is 8g of ethanol. Here are the units in common drinks our patients report drinking:

Type of Drink	Quantity	Units
Vodka and other Spirits	1 Litre	40
Carlsberg and other Lagers	330ml can	1.4 per can
Frosty Jack and other Ciders	1 Litre	7.5
Wine	1 Bottle	9

When taking an alcohol history, other useful questions include (1/2):

1. What: alcohol have you drunk today/tonight?

Try to get the patient to be specific on type of alcohol (e.g. lager, cider, spirits, wine, etc.).

- 2. How: much did you consume?
- 3. How: long have you been consuming this quantity of alcohol for?
- 4. How: often do you have a drink containing alcohol?

Every day indicates possible physical dependency.

5. When: Date and time of last drink?

A patient who is physically dependent will typically go into alcohol withdrawal 6-8 hours after their last drink and be in peak alcohol withdrawal at 10-72 hours.

When taking an alcohol history, other useful questions include (1/2):

6. Why: do you drink?

Understanding the reasons for someone's drinking or triggers for drinking can be extremely useful in supporting the patient in making changes to their lives.

7. Do: you get alcohol withdrawal symptoms? Such as: Nausea/Vomiting, Tremor, Sweats, Anxiety, Agitation, Hallucinations, Headaches/a feeling of fullness of the head, Confusion, Seizures.

This helps you assess the presence and potential severity of symptoms, allowing appropriate management on the Integrated Care Pathway (ICP) for Alcohol.

Young People (Under 18 Years Old)

Any child or young person who has an alcohol/substance-related attendance or reports alcohol/substance use should be referred on using the Brief Assessment Tool.

Complete the Young People's Alcohol & Drug Brief Assessment Tool (BAT) online form & appropriate Safeguarding referrals. The Brief Assessment Tool can be found on the Intranet at:

Interactive Systems > Online Request/System Access Forms > Alcohol & Drug Brief Assessment Tool for Young People

Or by clicking this link: : http://n-imt-lvw-

web01/onlineforms/webforms/Forms.aspx?FormID=240.

Pregnant Women & Alcohol

Pregnant woman who drink should be advised that the safest option is not to drink alcohol during pregnancy. Please also complete other actions as outlined in the Pregnant Women who are using Drugs and/or Alcohol policy.

Referring to the Alcohol Care Team

Online referrals can be made on Intranet eforms or on Evolve. Please refer patients:

- That have scored 5+ on the AUDIT-C alcohol screening. Where they report drinking at increasing/higher or dependency risk levels.
- Where the patient's admission is related to alcohol.
- Where the patient is on the Integrated Care Pathway (ICP) for Alcohol.
- Where the patient is concerned about their alcohol use or family members/relatives are concerned.
- Where patient requests support around their alcohol use.

Saving lives, Alcohol Care Team Improving lives Alcohol Care Team No.





Meet some of our team members; Left to Right: Kaye Dixon, Mark Pickavant, Emma Barritt & Antony Simpson.

We are available:

- Monday Friday (including Bank Holidays)
 09:00-17:00.
- Saturdays & Sundays 08:00-12:00.

You can call us on 0161 656 1933 (Internal Ex. 71933) or the Service Manager on: 07973 691037.

The Alcohol Care Team is a team of Specialists that support patients to reduce, quit or use alcohol more safely.





Become an Alcohol Champion!

We have recently rebranded our Alcohol Link Nurses to Alcohol Champions, so that we can open the programme out to include our Doctors and Allied Health Professionals (AHPs) colleagues. If you have a colleague who is interested in becoming an Alcohol Champion please email the colleagues details to Mark Pickavant (Alcohol Specialist Nurse):

Mark.Pickavant@nca.nhs.uk.

What does being an Alcohol Champion involve?

- Being invited to attend quarterly (every 3 months) Alcohol Champion Meetings, where latest issues are discussed.
- Being added to an email mailing list and getting regular updates on everything related to Alcohol practice within a hospital setting.
- Alcohol Champions advocate best evidenced-based practice in line with policies.
- Receipt of a quarterly Performance Report for Alcohol Services across The Northern Care Alliance NHS Group.

It would be great to have a doctor and AHP from each Department/Ward.