### SAMPLE SCRIPT
#### BRIEF INTERVIEW & REFERRAL FOR OPIOID USE DISORDER

<table>
<thead>
<tr>
<th>Raise Subject</th>
<th>Provide Feedback (including patient education handouts)</th>
<th>Investigate Readiness (use readiness ruler)</th>
<th>Create Action Plan (provide a warm handoff)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Thank you for answering my questions. From what I understand from your screening, you are using XX - is it OK if we talk more about XX and pregnancy?</td>
<td>• Sometimes patients who give similar answers are continuing to use drugs and alcohol during their pregnancies.</td>
<td>• What are your thoughts about the information I just shared?</td>
<td>• What are some steps you could take to reduce the things you don't like about using that you shared with me earlier like ___? Restate answers the patient shared earlier.</td>
</tr>
<tr>
<td>• Help me understand, through your eyes, what connection (if any) do you see between your use of XX and this pregnancy?</td>
<td>• I have some information on risks of substance use in pregnancy. Would you mind if I shared them with you? Share education handouts.</td>
<td>• Do you have any concerns?</td>
<td>• What steps can you take to reach your goal of having a healthy pregnancy and healthy baby?</td>
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<tr>
<td>• People use drugs for many reasons: what do you like most/least about using XX?</td>
<td>• Because of those risks, I recommend avoiding drugs and alcohol use during pregnancy. For women using opioids regularly, medication-assisted treatment (MAT), such as methadone or buprenorphine, is recommended during pregnancy and after to improve outcomes for both mom and baby.</td>
<td>• On a scale of 1-10, how ready are you to make any kind of changes in your use of XX?</td>
<td>• Those are good ideas! Is it OK for me to write down the steps/plan you just shared with me?</td>
</tr>
<tr>
<td>• Can you tell me more about your past/current drinking or drug use? What does a typical week look like?</td>
<td>• Sometimes patients who give similar answers are continuing to use drugs and alcohol during their pregnancies.</td>
<td>• Why did you choose ___ and not a lower number like a 1 or 2?</td>
<td>• I have additional resources and people that patients often find helpful for achieving these goals. Discuss options, schedule consults, identify navigator, and make referrals to MAT/BH counseling/recovery services.</td>
</tr>
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</table>

### READINESS RULER

**How ready are you to make a change?**

<table>
<thead>
<tr>
<th>NOT READY</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>VERY READY</th>
</tr>
</thead>
</table>

### DOCUMENTING SCREENING, BRIEF INTERVENTION, AND REFERRAL TO TREATMENT (SBIRT) FOR SCREEN POSITIVE

#### Documentation should include time spent counseling along with details of the interaction including:

1. **Face-to-face interaction with the patient**
2. **Assessed readiness for change**
3. **Advised the patient about risks**
4. **Recommended MAT/behavioral health counseling/recovery services for the patient**
5. **Referrals made to link patient to care**

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For treatment referrals, call **211**

Learn more: opqic.org/omno
“I met with ___ to discuss her positive (i.e., 5Ps/NIDA) screening. We discussed the risks of alcohol and drug use during pregnancy, and explored options for supporting abstinence from alcohol and illicit drugs. We reviewed patient information describing hospital policies on prenatal substance use and reporting requirements. We discussed that OUD is a chronic disease with treatment available. We discussed benefits of MAT including improved pregnancy outcomes and maternal risk reduction. Referrals to MAT, behavioral health counseling/recovery services, and social work were offered. She accepted/declined ___. Educational materials on OUD/NAS were provided with referral for prenatal pediatric consult on NAS. OUD clinical care checklist was included in patient chart. Time spent in counseling was (<30 / >30 minutes).”

Insert Clinical Care Checklist & obtain recommended lab testing:

- HIV
- HCV
- HBV

Learn more: opqic.org/omno

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