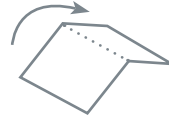


# SBIRT Provider Pocket Card for Pregnant Women



Not ready at all

Somewhat ready

Ready right now

10 9 8 7 6 5 4 3 2 1

**READINESS RULER**

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**INTERVENE**

1. Raise the subject  
*Is it OK if we talk about your substance use? Tell me about...*
2. Provide feedback  
*Your [alcohol/drug] use is above safe limits and I am concerned about how that affects your health.*
3. Offer advice  
*I would like you to consider cutting back on your \_\_\_\_\_ use.*
4. Enhance motivation  
*On a scale of 1-10, how ready are you to cut down?*
5. Negotiate a plan  
*What steps can you take to cut down?  
Can we schedule a follow up visit to talk about this?*

**PROBABLE RISK AND RECOMMENDED ACTION**

AUDIT SCORE	DAST SCORE	RISK LEVEL
0	0	No Risk
1-6	1+	Mild Risk
7+	1+	Moderate/Severe Risk

NO to LOW RISK

→ ENCOURAGE CONTINUED ABSTINENCE

MILD RISK

→ PROVIDE BRIEF INTERVENTION WITH OPTION FOR REFERRAL TO TREATMENT

SEVERE RISK

→ PROVIDE BRIEF INTERVENTION + REFERRAL TO TREATMENT

**NIAAA GUIDELINES FOR STANDARD DRINK SIZES**

Regular beer=12 fl oz  
5% ABV

Malt liquor=8-9 fl oz  
7% ABV

Table wine= 5 fl oz  
12% ABV

Hard liquor=1.5 fl oz  
50% ABV

**LOW RISK LIMITS**  
WOMEN: 3/day, 7/week  
PREGNANT 0/day, 0/week

**NO ALCOHOL USE DURING PREGNANCY**

NO KNOWN SAFE AMOUNT | NO SAFE TIME | NO SAFE TYPE