

Attachment 7: CORE CURRICULUM KNOWLEDGE TEST
Web-based Skills Training for SBIRT (Screening Brief Intervention and Referral to Treatment)
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Core Curriculum Knowledge Test

1. All of the following are true of Screening, Brief Intervention, and Referral to Treatment (SBIRT) except:
 - A. SBIRT provides an opportunity to reinforce positive health behaviors
 - B. SBIRT is intended to identify patients with mild to severe substance use problems
 - C. SBIRT requires that physicians provide specialized substance abuse treatment services
 - D. SBIRT is effective for patients abusing multiple substances

Correct answer: C.

2. Patients at risk for developing severe substance use problems:
 - A. Tend to be young, unemployed, and lack a college degree
 - B. Are usually unwilling to discuss substance use issues with their PC physician
 - C. Are usually interested in changing their substance use behavior
 - D. All of the above

Correct answer: C.

3. Brief interventions have been shown to:
 - A. Increase the likelihood patients will cut back on their tobacco and alcohol use
 - B. Increase the likelihood patients will cut back on their cocaine and heroin use
 - C. Both A and B
 - D. None of the above

Correct answer: C.

4. All of the following are true about the ASSIST (Alcohol, Smoking and Substance Involvement Screening Test) EXCEPT:
 - A. The ASSIST screens for recent use rather than lifetime use
 - B. The ASSIST assesses multiple substance categories
 - C. The ASSIST is able to discriminate among low, moderate, and high risk substance use
 - D. The ASSIST has been validated in both primary and specialty care settings

Correct answer: A.

5. Of the following combinations of instruments, which would provide the most comprehensive picture of a patient's substance use?
 - A. The CAGE and the CAGE-AID
 - B. The MAST and the DAST
 - C. The AUDIT and the DUDIT
 - D. The ASSIST and the AUDIT-C

Correct Answer: D.

6. The National Institute on Alcohol Abuse and Alcoholism and the National Institute of Drug Abuse recommend that primary care screening for alcohol and substance use should occur:
 - A. At every visit with every patient
 - B. Annually with every patient
 - C. At every visit with patients aged 16-45; annually with patients of other ages
 - D. Semi-annually with patients suspected of alcohol or other drug use

Correct answer: B.

7. According to U.S. Public Health Service Guidelines, how often should tobacco screening be conducted?
- A. At every visit with every patient, unless it is documented within the patient's medical record that he or she has never used tobacco or has abstained from using it for several years.
 - B. Annually with every patient
 - C. At every visit with patients aged 16-45; annually with patients of other ages
 - D. Semi-annually with patients suspected of tobacco use

Correct answer: A.

8. Compared to patient self-report via standardized instruments such as the ASSIST and AUDIT-C, urine drug screens:
- A. Provide more valid and reliable information about substance use
 - B. Provide more sensitivity and specificity when it comes to diagnosing substance use disorders
 - C. Both A and B
 - D. Neither A nor B

Correct answer: D.

9. When it comes to introducing the screening process, normalizing the discussion refers to:
- A. Letting patients know that inquiring about substance use is a routine part of an office visit
 - B. Reassuring patients that it's OK to be truthful because substance use is very common
 - C. Both A and B
 - D. Neither A nor B

Correct answer: A.

10. Brief interventions are often sufficient treatment for:
- A. Everyone
 - B. Patients with only mild substance use problems
 - C. Patients with mild to moderate substance use problems
 - D. No one—a BI is only the first step in a larger intervention

Correct answer: C.

11. The three key steps in completing brief interventions are:
- A. Introduction, feedback, advice
 - B. Feedback, advice, menu of options
 - C. Advice, referral, summary
 - D. Feedback, referral, follow-up

Correct answer: B.

12. The right attitude can increase patients' willingness to change and decrease defensiveness. Attitudes should express:
- A. An understanding that addiction is a disease
 - B. Belief that the patient can change
 - C. A commitment to abstinence as the ultimate goal
 - D. Acknowledgement that substance use can impair a person's judgment
 - E. All of the above

Correct answer: B.

13. We recommend that providers ask patients what they already know about the risks of their substance use before providing feedback. Why?
- A. It communicates your curiosity
 - B. It establishes a more collaborative encounter
 - C. It allows you to assess their defensiveness
 - D. All of the above

Correct Answer: B.

14. When providing feedback:
- A. Maintain a warm, empathetic, and nonjudgmental tone
 - B. Work quickly to minimize defensiveness
 - C. Remind patients of the purpose of giving feedback
 - D. Describe the range of possible screening results
 - E. Note that any drug use is extremely dangerous
 - F. Describe where the patient falls on the range compared to others
 - G. A, C, E
 - H. A, C, D, F
 - I. B, C, D, E

Correct answer: H.

15. After giving advice, we suggest the provider offer a menu of options that can support patients making changes. Why offer options?
- A. It demonstrates that there's more than one path towards abstinence
 - B. It comforts the patient to know there are others with similar problems
 - C. It gives the patient an opportunity to respond to the provider's interpretation of the screening results
 - D. It communicates that the patients is responsible for making choices
 - E. All of the above

Correct answer: D.

16. When deciding whether to make a referral, clinicians should consider all of the following EXCEPT:
- A. Whether the patient seems genuine in his or her desire to change
 - B. Whether the patient has reliable social support
 - C. Whether the patient is willing to accept a referral
 - D. Whether the patient has undergone previous detox treatment
 - E. Whether the patient has a cognitive impairment

Correct answer: A.

17. Which of the following statements are true regarding pharmacotherapy for alcohol use disorders (AUD):
- A. Pharmacotherapy can be used to treat any patient with an AUD
 - B. Clinicians should seek consultation if pharmacotherapy is a new treatment area
 - C. FDA-approved medications to support relapse prevention for AUDs include an opioid antagonist, an acetaldehyde dehydrogenase inhibitor, and an antiglutaminergic agent.
 - D. A and C
 - E. B and C

Correct answer: E.

18. All of the following medications are approved by the FDA to support relapse prevention for alcohol use disorder EXCEPT:
- A. Naltrexone
 - B. Varenicline
 - C. Disulfiram
 - D. Acamprosate

Correct answer: B.

19. If a patient is interested in quitting, a referral can be made to a state quitline, using the 1-800-QUIT NOW number. Quitlines do all of the following EXCEPT:
- A. Refer smokers to tobacco cessation services available in their communities
 - B. Screen tobacco users for their eligibility for pharmacotherapy to support smoking cessation
 - C. Offer evidence-based telephone counseling for tobacco dependence
 - D. User motivational enhancement therapy to do outreach with tobacco users who are unwilling to quit.

Correct answer: D.

20. Research shows that medical advice to quit tobacco increases the chances that a smoker will make a quit attempt and successfully quit. This advice should be clear, strong and personal, express confidence and be nonjudgmental and empathic. What does personal advice mean?
- A. It means mentioning providers' personal experiences with treating other smokers.
 - B. It means sharing personal struggles of self, family and significant others with tobacco.
 - C. It means linking the patient's tobacco use to the reason for the office visit.
 - D. Both A and C are correct.
 - E. None of the above are correct.

Correct answer: C.

Basics of Motivational Counseling Knowledge Test

21. The spirit of MI can be characterized by all of these concepts except:
- A. Collaboration
 - B. Depth of feeling
 - C. Respect for patient autonomy
 - D. Evocation

Correct answer: B.

22. The "righting reflex" is a reaction that some clinicians may have when trying to help their patients. Which of these statements about the righting reflex is true?
- A. It keeps the discussion from getting heated.
 - B. It is never functional.
 - C. It is based in a provider's need to control a situation.
 - D. It can make change less likely when patients are unsure about change.

Correct answer: D.

23. Change talk includes the following types of speech except:

- A. Difficulties of change
- B. Reasons for change
- C. Desire to change
- D. Commitment to change
- E. Ability to change

Correct answer: A.

24. What should clinicians do to elicit change talk when using MI?

- A. Use open and closed questions.
- B. Reflect what they hear.
- C. De-emphasize change language they hear.
- D. All of the above

Correct answer: B.

25. When giving advice, MI suggests each of the following strategies except:

- A. Make it direct to minimize confusion.
- B. Ask permission first.
- C. Ask first what patient already knows.
- D. Ask what patient thinks of advice once provided.
- E. Provide multiple options.

Correct answer: A.