

Electronic screening tool to triage teenagers and risk of substance misuse

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An electronic screening tool that starts with a single question to assess the frequency of substance misuse appears to be an easy way to screen teenagers who visited a physician for routine medical care.

Substance use can cause illness and death in [adolescents](#). Screening adolescents and intervening if there is substance use can reduce the burden of addiction. The American Academy of Pediatrics and other professional organizations recommend that primary care physicians screen adolescents for substance use.

The authors examined use of an electronic screening and assessment tool to triage adolescents into four categories regarding nontobacco substance use: no past-year alcohol or drug use, past-year use with a [substance use disorder](#) (SUD), mild or moderate SUD and severe SUD. The tool also can assess tobacco use. The study included 216 adolescent patients (ages 12 to 17 years) from outpatient centers at a pediatric hospital who completed the screening from June 2012 through March 2013. The screening started with a single question that assessed the frequency of past-year use in eight categories of [substances](#), including alcohol, marijuana, cocaine and prescription drugs. Patients who reported use were asked additional questions.

For nontobacco substance use, 123 patients (57.7 percent) reported no past-year use, 49 (23 percent) reported use but didn't meet the criteria for SUD, 22 (10.3 percent) met the criteria for mild or moderate SUD and 19 (8.9 percent) met the criteria for severe SUD. Sensitivity and

specificity were 100% and 84% for identifying non-tobacco substance use, 90% and 94% for substance use disorders, 100% and 94% for severe SUD, and 75% and 98% for nicotine dependence. No significant differences were found in sensitivity or specificity between the full tool and the frequency-only questions.

"Our findings suggest that frequency screening questions are also a valid and efficient means of triaging alcohol and drug use into clinically meaningful risk levels in adolescents."

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