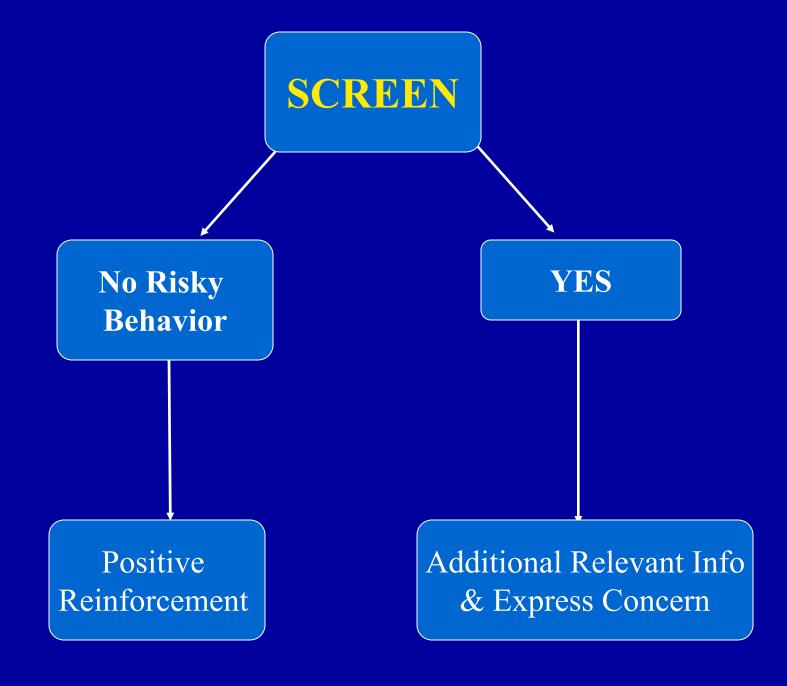
STEPS FOR SCREENING & COUNSELING ADOLESCENTS FOR SUBSTANCE USE





SUPPORT Guidelines for Adolescent Preventive Services Visit

Screen **Understand response P**ositive reinforcement Provide concern Offer key messages **R**esources/referrals Telephone or visit follow-up

B-SAFE

Screening Questions for Adolescent Visits

Behavior?

Start? Amount? Frequency? Environment?

ADDITIONAL CONSIDERATIONS/CONTEXT

When? With Whom? Where? **Additional History Behavior-Specific Questions**

SCREENING QUESTIONS FOR TOBACCO

Behavior?

- Do you ever smoke cigarettes or cigars, or chew tobacco?
- Start?
- How long have you been smoking/chewing?
- When was the last time you smoked/chewed tobacco?
- Has a doctor ever told you that you have asthma?

SCREENING QUESTIONS FOR TOBACCO

Amount?

• How many cigarettes (or snuff) do you usually smoke (or chew) in a day?

Frequency?

• How often do you smoke/chew tobacco?

Environment?

- Do your friends use tobacco?
- Does anyone in your family or household use tobacco?

ADDITIONAL TOBACCO SCREENING QUESTIONS

- When do you smoke/chew?
- With whom do you smoke/chew?
- How do you get your cigarettes/ chewing tobacco?

ADDITIONAL TOBACCO SCREENING QUESTIONS

ADDICTION QUESTIONS:

- Have you ever tried to quit smoking/chewing tobacco? When? How? What happened?
- Is it extremely difficult for you to go a half-day without using tobacco?
- Do you have strong cravings for tobacco (nic fits)?
- Do you feel a need to smoke a certain number of cigarettes each day?
- Do you think you could quit at any time?

KEY MESSAGES FOR TOBACCO

Message 1

• Avoiding tobacco is very important for your health

Message 2

• Smoking/Chewing tobacco becomes a habit that is hard to break

Message 3 – for teens who smoke/chew only

• When you decide to stop using tobacco, I can help you and there are resources to help you

SCREENING QUESTIONS FOR ALCOHOL/DRUGS

Behavior?

- Have you ever drunk alcohol/used drugs?
- What kind of alcohol/drugs do you use?

Start?

- How long have you been using alcohol/drugs? **Amount?**
- How much do you usually drink?
- How much (quantify for specific drug) do you usually use/take/smoke?
- Have you ever had 5 or more drinks of alcohol in a row or engaged in binge drinking?
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SCREENING QUESTIONS FOR ALCOHOL/DRUGS

Frequency?

• How often do you drink/use drugs?

Environment?

- Do any of your friends or family drink alcohol/use drugs?
- Have you ever been in a car with a driver after he/she was drinking/using drugs?
- Have you ever driven after drinking/using drugs?

ADDITIONAL ALCOHOL/DRUG SCREENING QUESTIONS

- When do you drink/use drugs?
- With whom do you drink alcohol/use drugs?
- How you do get your alcohol/drugs?

KEY MESSAGES FOR ALCOHOL AND DRUGS

Message 1

• Avoiding alcohol and drugs is very important for your health and safety

Message 2

• Avoid driving a car, riding a bike, skateboarding, swimming, boating, riding a scooter, or doing any activity that is dangerous under the influence of alcohol/drugs or with someone who is under the influence

SCREENING QUESTIONS FOR SEXUAL BEHAVIOR

Behavior?

- Have you had vaginal sex? Oral sex? Anal sex?
- Have you had sex with guys, girls, or both?

Start?

- When did you most recently have sex?
- Do you think you or your partner could be pregnant?
- Have you ever been pregnant or had a partner who became pregnant?
- Do you think you or your partner could have a sexually transmitted disease/infection or STD?
- Have you ever had an STD?
- Has a partner of yours ever had an STD?

SCREENING QUESTIONS FOR SEXUAL BEHAVIOR

Amount?

- Have you had sex with anyone other than your current/most recent partner? When?
- How many sexual partners have you had?
- **Frequency?**
- How often do you have sex?

Environment?

- Do you use any form of birth control/std prevention when having sex?
- If yes: What type of birth control/std prevention do you use?
- How often do you use (fill in) method of birth control/std prevention?
- Have you ever felt pressure to have sex?
- Were you using alcohol/drugs when you had sex?

KEY MESSAGES FOR SEXUAL BEHAVIOR

Message 1

• Avoiding sex is the safest way to prevent pregnancy and sexually transmitted diseases or AIDS

Message 2

- If you choose to have sex, be responsible:
 - Use a condom *every* time you have sex
 - If you don't have a condom, don't have sex
 - To ensure you don't get pregnant or get your partner pregnant, and as a backup to a condom, use another form of birth control such as oral contraceptives or Depo Provera
 - If you have unprotected intercourse, you may obtain emergency contraception