

# Tobacco, Alcohol, and Drug Use Risk Assessment

## CHILD AND TEEN CHECKUPS (C&TC) FACT SHEET FOR PRIMARY CARE PROVIDERS

Risk assessment for commercial tobacco, alcohol, and other drug use is required for C&TC visits starting at age 11. Recommendations to assess risk are outlined below.

### C&TC standards

#### General

Commercial tobacco (including vaping), alcohol, and other drug use risk assessment is required for all C&TC visits for youth ages 11 through 20.

*Note: Commercial tobacco refers to the use of manufactured tobacco and nicotine products, not traditional tobacco. Refer to [Traditional Tobacco and American Indian Communities in Minnesota](#).*

#### Personnel

A licensed health care provider must review and interpret the risk assessment: physician, nurse practitioner, physician assistant, or registered or public health nurse (RN or PHN) who has completed the C&TC Comprehensive Screening training through the Minnesota Department of Health.

#### Documentation

Indicate the tool used, findings, and plan to address results in the documentation.

Refer to the [C&TC Provider Documentation Forms](#) for documentation examples or to use as a template with your electronic medical record.

### Procedure

Consider conducting the required substance use risk assessment in a private one-to-one conversation with the patient. Inform the patient and parent or guardian of [Minnesota's minor's consent law MN Statute § 144.343](#).

### Tools to assess risk

Conduct the risk assessment through a patient questionnaire, an interview with the clinician, or by using a screening tool.

[Commonly Used Screening Instruments and Tools](#) for adolescents include:

- Brief Screener for Alcohol, Tobacco, and other Drugs (BSTAD)
- Screening to Brief Intervention (S2BI)
- CRAFFT
- Global Appraisal of Individual Needs Short Screener (GAIN-SS; [GAIN Instruments](#))
- [Youth Tobacco Cessation App](#)

### Follow-up

Universal [Screening, Brief Intervention, and Referral to Treatment \(SBIRT\)](#) is a recommended approach to identify a patient's substance use, from abstinence to addiction, and provide appropriate intervention at every visit.

## Considerations

[Harm Reduction](#) services keep young adults healthy and alive, providing opportunities for future treatment engagement. Offer these services at every opportunity, regardless of an individual’s interest or ability to reduce substance use (Kimmel, Gaeta, Hadland, Hallett, & Marshall, 2021).

Pediatricians should advocate for children and adolescents in families affected by substance use, using medically accurate, non-stigmatizing language (Alinsky, Hadland, Quigley, & Patrick, 2022).

When prescribing opioids, pediatricians should prescribe [Naloxone](#) and educate patients and families on recognizing and responding to opioid overdose (Hadland, et al., 2024).

## Importance of risk assessments

Early prevention, identification, and treatment of substance use promotes long-term health. Failure to intervene or provide age-appropriate services leads to significant individual, familial, and intergenerational consequences. Racial and ethnic disparities in treatment access arise from social, economic, and criminal justice inequities and stigma.

## Professional recommendations

### American Academy of Pediatrics

Screen all adolescents for substance use with a validated screening tool at every visit. Provide appropriate brief intervention and referral for treatment if indicated (Levy

& Williams, 2016). Refer to [Substance Use and Prevention](#).

## Resources

### Minnesota Department of Human Services

- [C&TC Schedule of Age-Related Screening Standards](#)
- [Minnesota Health Care Programs \(MHCP\) Provider Manual - C&TC Section](#)

### Minnesota Department of Health

- [Child and Teen Checkups \(C&TC\)](#)
- [Quit Partner](#)

### Other resources

- [Fast Tracker MN](#)
- [Substance Use Prevention Resources for Youth and College Students](#)
- [Psychiatric Assistance Line](#)

## For more information

The Child and Teen Checkups (C&TC) program is administered through a partnership between the Minnesota Department of Human Services and the Minnesota Department of Health.

For questions about this fact sheet or to obtain this information in a different format, call 651-201-3650 or email [health.childteencheckups@state.mn.us](mailto:health.childteencheckups@state.mn.us).

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## Resource links

- [Traditional Tobacco and American Indian Communities in Minnesota](http://www.health.state.mn.us/communities/tobacco/traditional/index.html) ([www.health.state.mn.us/communities/tobacco/traditional/index.html](http://www.health.state.mn.us/communities/tobacco/traditional/index.html))
- [C&TC Provider Documentation Forms](https://mn.gov/dhs/partners-and-providers/policies-procedures/minnesota-health-care-programs/provider/types/ctc-resources/) (<https://mn.gov/dhs/partners-and-providers/policies-procedures/minnesota-health-care-programs/provider/types/ctc-resources/>)
- [Minnesota's minor's consent law MN Statute § 144.343](http://www.revisor.mn.gov/statutes/cite/144.343) ([www.revisor.mn.gov/statutes/cite/144.343](http://www.revisor.mn.gov/statutes/cite/144.343))
- [Commonly Used Screening Instruments and Tools](https://publications.aap.org/toolkits/resources/15625/Bright-Futures-Toolkit-Links-to-Commonly-Used) (<https://publications.aap.org/toolkits/resources/15625/Bright-Futures-Toolkit-Links-to-Commonly-Used>)
- [GAIN Instruments](https://gaincc.org/instruments/) (<https://gaincc.org/instruments/>)
- [Youth Tobacco Cessation App](https://www.aap.org/en/patient-care/tobacco-control-and-prevention/tobacco-cessation-progressive-web-application/) (<https://www.aap.org/en/patient-care/tobacco-control-and-prevention/tobacco-cessation-progressive-web-application/>)
- [Screening, Brief Intervention, and Referral to Treatment \(SBIRT\)](http://www.samhsa.gov/sbirt) ([www.samhsa.gov/sbirt](http://www.samhsa.gov/sbirt))
- [Harm Reduction](https://www.health.state.mn.us/communities/opioids/prevention/harmreduction.html) (<https://www.health.state.mn.us/communities/opioids/prevention/harmreduction.html>)
- [Naloxone](https://nida.nih.gov/publications/drugfacts/naloxone) (<https://nida.nih.gov/publications/drugfacts/naloxone>)
- [Substance Use and Prevention](https://www.aap.org/en/patient-care/substance-use-and-prevention/) (<https://www.aap.org/en/patient-care/substance-use-and-prevention/>)
- [C&TC Schedule of Age-Related Screening Standards](https://edocs.dhs.state.mn.us/lfserver/PubLic/DHS-3379-ENG) (<https://edocs.dhs.state.mn.us/lfserver/PubLic/DHS-3379-ENG>)
- [Minnesota Health Care Programs \(MHCP\) Provider Manual - C&TC Section](http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16_150092) ([www.dhs.state.mn.us/main/idcplg?IdcService=GET\\_DYNAMIC\\_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16\\_150092](http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16_150092))
- [Child and Teen Checkups \(C&TC\)](http://www.health.state.mn.us/people/childreynouth/ctc/index.html) ([www.health.state.mn.us/people/childreynouth/ctc/index.html](http://www.health.state.mn.us/people/childreynouth/ctc/index.html))
- [Quit Partner](http://www.quitpartnermn.com/quit-your-way) ([www.quitpartnermn.com/quit-your-way](http://www.quitpartnermn.com/quit-your-way))
- [Fast Tracker MN](https://fasttrackermn.org) (<https://fasttrackermn.org>)
- [Substance Use Prevention Resources for Youth and College Students](https://www.samhsa.gov/about/digital-toolkits/prevention-week/voices-of-youth/resources) (<https://www.samhsa.gov/about/digital-toolkits/prevention-week/voices-of-youth/resources>)
- [Psychiatric Assistance Line](https://www.mnpsychconsult.com/resources/) (<https://www.mnpsychconsult.com/resources/>)

## References

- Alinsky, R., Hadland, S., Quigley, J., & Patrick, S. (2022). Recommended Terminology for Substance Use Disorders in the Care of Children, Adolescents, Young Adults, and Families. *Pediatrics*.
- Hadland, S., Agarwal, R., Raman, S., Smith, M., Beryl, A., Michel, J., . . . Flinn, S. (2024). Opioid Prescribing for Acute Pain Management in Children and Adolescents in Outpatient Settings: Clinical Practice Guideline. *Pediatrics*.
- Kimmel, S., Gaeta, J., Hadland, S., Hallett, E., & Marshall, B. (2021). Principles of Harm Reduction for Young People Who Use Drugs. *Pediatrics*.
- Levy, S., & Williams, J. (2016). Substance Use Screening, Brief Intervention, and Referral to Treatment. *Pediatrics*, 138(1). doi:10.1542/peds.2016-1211