

Some risks of adolescent alcohol and cannabis use:

- 22% of teenage drivers in fatal car crashes were **drinking**. Car crashes are the leading cause of teen deaths.



- **Cannabis** affects a number of skills needed for safe driving, like reacting to sounds and signals on the road.

- Teens who use **cannabis** tend to get lower grades and are more likely to drop out of high school.



- High school students who use **alcohol** are five times more likely to drop out.
- **Cannabis's** effects on attention and memory make it difficult to learn something new or do complex tasks.

- Heavy use of **cannabis** as a teenager can lower IQ later in life as an adult.



- Teens who binge **drink** every month damage their brains in a way that makes it harder to pay attention and understand new information.

- **Alcohol** poisoning and suicide are major causes of alcohol-related teen deaths.



- Teen **drinking** and **cannabis** use raise the risk of unprotected sex, sexual assault, STDs, and unplanned pregnancy.
- **Drinking** increases the risk of injuries - the third leading cause of death among teens.

A standard drink of alcohol equals:



Readiness ruler:



Steps of the brief intervention

Raise the subject

- “Thanks for filling out this form – is it okay if we briefly talk about your substance use?”
- “Just so you know, my role is to help you assess the risks so you can make your own decisions. I want to help you improve your quality of life on your own timeline.”
- “What can you tell me about your substance use?”

Share information

- Explain any association between the patient’s use and their health complaint, then ask, “Do you think your use has anything to do with your [anxiety, insomnia, STD, etc.]?”
- Share information about the risks of using alcohol, drugs, and misusing prescription drugs. Ask the patient: “What do you think of this information?”

Enhance motivation

- Ask patient about perceived pros and cons of their use, then summarize.
- “Where do you want to go from here in terms of your use? What’s your goal, or vision?”
- Gauge patient’s readiness/confidence to reach their goal. If using Readiness Ruler: “Why do did you pick that number on a scale of 0-10 instead of ____ [lower number]?”

Identify plan

- If patient is ready, ask: “What steps do you think you can take to reach your goal?”
- Affirm the patient’s readiness/confidence to meet their goal and affirm their plan.
- “Can we schedule an appointment to check in and see how your plan is going? You may want to change it or come up with a new plan.”

National hotline that quickly identifies resources for individuals ready to accept treatment:

800–662–4357

Interpreting the CRAFFT screening tool

Answers	Risk	Action
“No” to questions 1-4	No risk	Positive reinforcement
“Yes” to Car question	Riding risk	Discuss alternatives to riding with impaired drivers
CRAFFT score = 0	Low risk	Brief education
CRAFFT score = 1	Medium risk	Brief intervention
CRAFFT score ≥ 2	High risk	Brief intervention (offer options that include treatment)

Billing codes

Screening only	
Medicaid:	CPT 96160
Screening plus brief intervention	
Medicaid:	≥15 min: CPT 99408 ≥30 min: CPT 99409
Medicare:	5-14 min: G2011 ≥15 min: G0396 ≥30 min: G0396