Tobacco, Alcohol, Prescription medications, and other Substance (TAPS) screening tool

The TAPS should be electronically self-administered to a patient or administered via interview by a health professional.

There are two components. TAPS 1 screens for tobacco, alcohol, illicit drugs, and non-medical use of prescription drugs. If an individual reports other than "never" on any question, then substance-specific TAPS 2 questions should assess risk level for each reported substance.

TAPS 1:

1. In the PAST 12 MONTHS, how often have you used any tobacco product (for example, cigarettes, ecigarettes, cigars, pipes, or smokeless tobacco)?	Daily or almost daily	Weekly	Monthly	Less than monthly	Never
2. In the PAST 12 MONTHS, how often have you had 4 or more drinks containing alcohol in one day? One standard drink is about 1 small glass of wine (5 oz), 1 beer (12 oz), or 1 single shot of liquor	Daily or almost daily	Weekly	Monthly	Less than monthly	Never
3. In the PAST 12 MONTHS, how often have you used any drugs including marijuana, cocaine or crack, heroin, methamphetamine (crystal meth), hallucinogens, ecstasy/MDMA?	Daily or almost daily	Weekly	Monthly	Less than monthly	Never
4. In the PAST 12 MONTHS, how often have you used any prescription medications just for the feeling, more than prescribed or that were not prescribed for you? Prescription medications that may be used this way include Opiate pain relievers (for example, OxyContin, Vicodin, Percocet, Methadone) Medications for anxiety or sleeping (for example, Xanax, Ativan, Klonopin) Medications for ADHD (for example, Adderall or Ritalin)	Daily or almost daily	Weekly	Monthly	Less than monthly	Never

TAPS 2:

1. In the PAST 3 MONTHS, did you smoke a cigarette containing tobacco? If "Yes", answer the following two questions:	Yes	No
a) In the PAST 3 MONTHS, did you usually smoke more than 10 cigarettes each day?	Yes	No
b) In the PAST 3 MONTHS, did you usually smoke within 30 minutes after waking?	Yes	No
2. In the PAST 3 MONTHS, did you have a drink containing alcohol? If "Yes", answer the following two questions:	Yes	No
a) In the PAST 3 MONTHS, did you have 4 or more drinks containing alcohol in a day? One standard drink is about 1 small glass of wine (5 oz), 1 beer (12 oz), or 1 single shot of liquor.	Yes	No

3. In the PAST 3 MONTHS, did you use marijuana (hash, weed)? If "Yes", answer the following two questions:	Yes	No
a) In the PAST 3 MONTHS, have you had a strong desire or urge to use marijuana at least once a week or more often?	Yes	No
b) In the PAST 3 MONTHS, has anyone expressed concern about your use of marijuana?	Yes	No
4. In the PAST 3 MONTHS, did you use cocaine, crack, or methamphetamine (crystal meth)? If "Yes", answer the following two questions:	Yes	No
a) In the PAST 3 MONTHS, did you use cocaine, crack, or methamphetamine (crystal meth) at least once a week or more often?	Yes	No
b) In the PAST 3 MONTHS, has anyone expressed concern about your use of cocaine, crack, or methamphetamine (crystal meth)?	Yes	No
5. In the PAST 3 MONTHS, did you use heroin? If "Yes", answer the following two questions:	Yes	No
a) In the PAST 3 MONTHS, have you tried and failed to control, cut down or stop using heroin?	Yes	No
b) In the PAST 3 MONTHS, has anyone expressed concern about your use of heroin?	Yes	No
6. In the PAST 3 MONTHS, did you use a prescription opiate pain reliever (for example, Percocet, Vicodin) not as prescribed or that was not prescribed for you? If "Yes", answer the following two questions:	Yes	No
a) In the PAST 3 MONTHS, have you tried and failed to control, cut down or stop using an opiate pain reliever?	Yes	No
b) In the PAST 3 MONTHS, has anyone expressed concern about your use of an opiate pain reliever?	Yes	No
7. In the PAST 3 MONTHS, did you use a medication for anxiety or sleep (for example, Xanax, Ativan, or Klonopin) not as prescribed or that was not prescribed for you? If "Yes", answer the following two questions:	Yes	No
a) In the PAST 3 MONTHS, have you had a strong desire or urge to use medications for anxiety or sleep at least once a week or more often?	Yes	No
b) In the PAST 3 MONTHS, has anyone expressed concern about your use of medication for anxiety or sleep?	Yes	No
8. In the PAST 3 MONTHS, did you use a medication for ADHD (for example, Adderall, Ritalin) not as prescribed or that was not prescribed for you? If "Yes", answer the following two questions:	Yes	No
a) In the PAST 3 MONTHS, did you use a medication for ADHD (for example, Adderall, Ritalin) at least once a week or more often?	Yes	No
b) In the PAST 3 MONTHS, has anyone expressed concern about your use of a medication for ADHD (for example, Adderall or Ritalin)?	Yes	No
9. In the PAST 3 MONTHS, did you use any other illegal or recreational drug (for example, ecstasy/molly, GHB, poppers, LSD, mushrooms, special K, bath salts, synthetic marijuana ('spice'), whip-its, etc.)? If "Yes", answer the following question:	Yes	No
a) In the PAST 3 MONTHS, what were the other drug(s) you used?		

(For the health professional)

Only TAPS 2 questions are scored, categorized by each individual substance. Each "Yes" answer gets one point.

Interpretation:

Substance	TAPS score	Risk category	Action
Tobacco, Alcohol, or Cannabis	0	No use in past 3 months	Positive reinforcement
	1	Problem use	Brief intervention
	2+	Higher risk	Brief intervention (offer options that include medications and referral to treatment)
Cocaine, Stimulants, Sedatives, Opioids, Heroin, Hallucinogens, Inhalants, or Other	0	No use in past 3 months	Positive reinforcement
	1+	Problem use	Further assessment and brief intervention
	2+	Higher risk	Further assessment and Brief intervention (offer options that include medications and referral to treatment)

Note: For identifying DSM-5 SUD at the recommended cutoff of 2+, the TAPS Tool has adequate sensitivity (>70%) only for tobacco, alcohol, and marijuana. Further assessment should be conducted for patients with a score of 1+ for other substances. This assessment is a high priority for patients with a TAPS score of 2+, given its high positive predictive value for most substance classes.

Brief intervention: Patient-centered discussion that employs Motivational Interviewing principles to raise a patient's awareness of their substance use and enhance their motivation to reduce harm from their use. Brief interventions are typically performed in 3-15 minutes, and should occur in the same session as the initial screening. Repeated sessions are more effective than a one-time intervention.

Referral to treatment: If a patient is ready to accept treatment, a referral is a proactive process that facilitates access to specialized care for individuals likely experiencing a substance use disorder. These patients are referred to alcohol and drug treatment experts for more definitive, in-depth assessment and, if warranted, treatment. However, treatment also includes prescribing medications for substance use disorder as part of the patient's normal primary care.

Validation study: McNeely J, Wu L, Subramaniam G, Sharma G, Cathers LA, Svikis D, et al. Performance of the Tobacco, Alcohol, Prescription Medication, and Other Substance Use (TAPS) Tool for Substance Use Screening in Primary Care Patients. Ann Intern Med. 2016;165:690-699. doi: 10.7326/M16-0317