Abstract

Background

Substance use during adolescence is a highly prevalent and undertreated issue. Screening for substance use has been shown to be an effective method of identification of adolescents with substance use disorder for treatment. The American Academy of Pediatrics (AAP) recommends screening of adolescent patients for substance use by primary care physicians at all well child visits and acute care visits using the screen to brief intervention approach. The USPSTF, however, has concluded that there is insufficient evidence to recommend universal screening in the adolescent population. We hypothesize that the current rate of adolescent substance use screening at UCHealth clinics is below the rate recommended by the AAP.

Methods

This study is a retrospective chart review of records from well child visits and acute care visits of patients between 12-17 years old at UCHealth clinics in 2019. Clinical notes will be reviewed for the presence of adolescent substance use screening, our primary outcome of interest. Secondary data will be collected to elucidate associations between screening and patient demographics. Data will be analyzed to determine the rate of screening and describe the methods by which screening occurs. This will be compared to the current recommendations on adolescent substance use screening practices.

Results

This study is still in the data acquisition phase, and does not have any data to report. Results of literature review show that current rates of screening for adolescent substance use are far below the rate recommended by the AAP, even though most studies are performed in pediatric clinics. Our study population involves visits to family practice clinics, thus we anticipate a rate of screening that is lower than what has been observed in pediatric clinics.

Implications

This study will inform on the current adolescent substance use screening rates and practices within a university-based healthcare system. The results of these data will contribute to the growing body of literature on adolescent substance use screening. It will also provide insight into any associations between screening and patient demographics. Ultimately, this study will provide a base of knowledge with which we intend to carry out a prospective trial of standardized adolescent substance use screen implementation.