

# Some risks of adolescent alcohol and marijuana use:

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



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

- Teens who use **marijuana** 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.

- **Marijuana's** effects on attention and memory make it difficult to learn something new or do complex tasks.

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- Heavy use of **marijuana** 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 **marijuana** 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.

death among teens.

## A standard drink of alcohol equals:



Readiness ruler:



## Steps of the brief intervention

### Raise the subject

- “Thank you for answering these questions - is it ok if we review this form together?”
- If yes: “Can you tell me in your own words about your drinking or drug use? How often, how much, etc.?”

### Provide feedback

- “I recommend all my teen patients not use at all. Substance use can harm the brain of teenagers, as well as increase the risk of the things on the front of this page.”
- “Many teens who are dealing with these kind of problems may not be able to stop using on their own, even if they wanted to. I recommend these patients get help to stop.”

### Enhance motivation

- “What do you like about your drinking/drug use? What do you not like, or are concerned about when it comes to your use?”
- “On a scale of 0-10, how ready are you to stop using/receive specialized treatment? Why do you think you picked that number rather than a \_\_\_\_ (lower number)?”

### Negotiate plan

- Summarize conversation. If patient is ready to change: “What steps do you think you can take to reach your goal of cutting back/stop using/seeking specialized treatment?”
- “Can we schedule an appointment to check in and see how your plan is going?”

Oregon hotline that quickly identifies treatment resources for patients experiencing a substance use disorder:

**1-800-923-4357**

## Interpreting the CRAFFT screening tool

Score	Risk	Recommended action
“No” to 3 opening questions	Low risk	Positive reinforcement
“Yes” to car question	Driving or Riding risk	Discuss plan to avoid driving after alcohol or drug use or riding with a driver who has been using alcohol or drugs (Consider using Contract for Life)
CRAFFT score = 0	Moderate risk	Brief advice
CRAFFT score = 1		Brief intervention
CRAFFT score $\geq 2$	High risk	Consider referral for further assessment

## Billing codes

CRAFFT only	
Medicaid and Commercial: <b>CPT 99420</b>	
Recommended diagnosis code to meet CCO incentive measure in Oregon: <b>Z13.9</b>	
CRAFFT plus brief intervention	
Medicaid and Commercial:	
$\geq 15$ min	<b>CPT 99408</b>
$\geq 30$ min	<b>CPT 99409</b>