

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.

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 (MDH).

Documentation

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

Refer to the documentation forms on the [C&TC Early and Periodic Screening, Diagnostic, and Treatment resources](#) webpage 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 1 on 1 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 or clinician interview using a recommended screening or assessment tool.

Commonly used screening and assessment tools for adolescents include:

- [Brief Screener for Alcohol, Tobacco, and other Drugs \(BSTAD\)](#)
- [Screening to Brief Intervention \(S2BI\)](#)
- [CRAFT](#)
- [Global Appraisal of Individual Needs Short Screener \(GAIN-SS\)](#)

Follow-up

Universal [Screening, Brief Intervention, and Referral to Treatment \(SBIRT\)](#) is a recommended approach to identify a patient's experience with substance use, from abstinence to addiction, and to guide

next steps in the clinical approach or intervention (Levy et al., 2016).

intervention and referral for treatment if indicated (Levy et al., 2016).

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 et al., 2021).

Advocate for children and adolescents in families affected by substance use, using medically accurate, non-stigmatizing language.

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

Adolescents often have unsupervised access to substances such as prescription medications or cannabis, and many report using them for nonmedical purposes. The Minnesota Student Survey indicates that adolescents access cannabis primarily from social sources, including friends and family members (MDH, 2026). This highlights the importance of pediatric providers proactively inquiring about access and providing clear education to patients and families (Chadi et al., 2024).

Professional recommendations

American Academy of Pediatrics

Screen all adolescents starting at age 11 for substance use with a validated screening tool at every visit. Provide appropriate brief

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](#)
- [Cannabis Materials](#)

Other resources

- [Alcohol Screening and Brief Intervention for Youth: A Practitioner's Guide](#)
- [Fast Tracker MN](#)
- [Substance Use and Prevention](#)
- [Psychiatric Assistance Line](#)
- [Youth Tobacco Cessation App](#)

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.

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Resource links

- [Traditional Tobacco and American Indian Communities in Minnesota \(www.health.state.mn.us/communities/tobacco/traditional/index.html\)](http://www.health.state.mn.us/communities/tobacco/traditional/index.html)
- [C&TC Early and Periodic Screening, Diagnostic, and Treatment resources \(https://mn.gov/dhs/partners-and-providers/policies-procedures/minnesota-health-care-programs/provider/types/ctc-resources\)](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 \(www.revisor.mn.gov/statutes/cite/144.343\)](http://www.revisor.mn.gov/statutes/cite/144.343)
- [Brief Screener for Alcohol, Tobacco, and other Drugs \(BSTAD\) \(https://nida.nih.gov/bstad/#/\)](https://nida.nih.gov/bstad/#/)
- [Screening to Brief Intervention \(S2BI\) \(https://nida.nih.gov/s2bi/#/\)](https://nida.nih.gov/s2bi/#/)
- [CRAFFT \(https://craftt.org/\)](https://craftt.org/)
- [Global Appraisal of Individual Needs Short Screener \(https://gaincc.org/instruments/\)](https://gaincc.org/instruments/)
- [Screening, Brief Intervention, and Referral to Treatment \(SBIRT\) \(www.samhsa.gov/sbirt\)](http://www.samhsa.gov/sbirt)
- [Harm Reduction \(https://www.health.state.mn.us/communities/overdose/harmreduce/index.html\)](https://www.health.state.mn.us/communities/overdose/harmreduce/index.html)
- [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 \(www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16_150092\)](http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16_150092)
- [Child and Teen Checkups \(C&TC\) \(www.health.state.mn.us/people/childreneyouth/ctc/index.html\)](http://www.health.state.mn.us/people/childreneyouth/ctc/index.html)
- [Quit Partner \(www.quitpartnermn.com/quit-your-way\)](http://www.quitpartnermn.com/quit-your-way)
- [Cannabis Materials \(https://www.health.state.mn.us/communities/cannabis/materials.html\)](https://www.health.state.mn.us/communities/cannabis/materials.html)

- [Alcohol Screening and Brief Intervention for Youth: A Practitioner’s Guide \(https://www.niaaa.nih.gov/alcohols-effects-health/professional-education-materials/alcohol-screening-and-brief-intervention-youth-practitioners-guide\)](https://www.niaaa.nih.gov/alcohols-effects-health/professional-education-materials/alcohol-screening-and-brief-intervention-youth-practitioners-guide)
- [Fast Tracker MN \(https://fasttrackermn.org\)](https://fasttrackermn.org)
- [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/)
- [Psychiatric Assistance Line \(https://www.mnpsychconsult.com/resources/\)](https://www.mnpsychconsult.com/resources/)
- [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/)

References

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