

UNIVERSAL SCREENING

Overview

Implement universal screening for substance use disorder (SUD) with a standardized, evidence-based screening tool at all locations that provide medical care to pregnant women. A universal screening tool for self-reporting of substance use disorder and identification of risk for SUD should not be confused with toxicology testing.

Why We Recommend this Best Practice

Identification of pregnant patients with SUD as early as possible in pregnancy is critical in connecting them to treatment. Treatment for SUD, particularly OUD, during pregnancy results in better outcomes for the pregnant parent and their newborn.

Drug addiction affects all racial, ethnic, and social groups. Universally screening all pregnant patients minimizes the potential for implicit bias that can occur when providers use subjective risk factors to determine who should be screened and may also decrease the stigma associated with SUD and screening. Universal screening at the time of entry into prenatal care allows more time to intervene and mitigate the harm associated with SUD in pregnancy and to stabilize the home environment for newborns. If an individual screen is positive for risk of OUD or other SUD, a validated assessment tool (a deeper evaluation intended to solidify a diagnosis and severity of a condition) should be administered to determine the presence and severity of the SUD. It is important to remember that substance use is not synonymous with addiction.

Screening Tool	Description	Pros	Cons	Sensitivity/Specificity ¹
NIDA Quick Screen	<ul style="list-style-type: none"> • 3 questions • Approximately 3-5 minutes • Scripted tool to support provider standardization of substance use screening 	<ul style="list-style-type: none"> • Listed in ACOG bulletin • Existing online tool developed by NIDA • Free • SMFM recommended 	<ul style="list-style-type: none"> • Not specific to pregnancy • No training available 	Possible top recommendation
Integrated 5Ps Screening Tool	<ul style="list-style-type: none"> • Peers, Parents, Partner, Past and Pregnancy 	<ul style="list-style-type: none"> • Free • Designed specifically for pregnant women 		
Substance Use Risk Profile Pregnancy Scale	<p>4 questions Approximately 2 minutes Affiliated with MIECHV</p>	<ul style="list-style-type: none"> • Free • Specific to prenatal patients 	<ul style="list-style-type: none"> • Recently tested with prenatal patients 	<ul style="list-style-type: none"> • 90-100% sensitive for low-risk patients • 61-64% specific for low-risk patients • 48-100% sensitive for high-risk patients • 84-88% specific for high risk
4Ps Plus	<p>5 questions with follow-up if positive. Approximately 2-5 mins²</p>	<ul style="list-style-type: none"> • Validated tool for pregnant patients • Approved for identification of tobacco, alcohol and illicit drugs. • Additional questions related to domestic violence and depression can be included. <p>Listed in ACOG bulletin</p>	<ul style="list-style-type: none"> • Licensing fee • Indirect questions • Low specificity to illicit drug use 	<ul style="list-style-type: none"> • 87% sensitive for substance use • 75% specific for substance use

¹ AIM Outline of Screening Tools

http://apps.who.int/iris/bitstream/handle/10665/107130/9789241548731_eng.pdf;jsessionid=F026463023E46EC67AC194C5099B28E4?sequence=1

Step 1: Choose a screening tool

Choose a screening tool. Here is a breakdown of four popular, validated screening tools specific to drug use in pregnancy. We suggest you select one from the table below that will work best for your care team. Initial screening for risk takes little time and can be done at many points within care.

Step 2: Train staff

Educate staff on how to administer a validated screening tool and the importance of universal screening to reduce implicit bias

Step 3: Positive Screen

If screening is positive, use a validated verbal assessment tool to establish the diagnosis and severity of an actual SUD. Ideally this assessment should immediately follow a positive screen. Here are some of the most common tools:

- [AUDIT-C \(Alcohol Use Disorder Identification Test – Consumption\)](#)
- [AUDIT-C Plus 2](#)
- [ASSIST \(Alcohol, Smoking, and Substance Involvement Screening Test, Version 5\)](#)
- [DSAT-10](#)

A positive screen should stimulate a brief intervention and referral to appropriate treatment using resources within our setting and community (refer to section on SBIRT).

Inquire about polysubstance use. If smoking tobacco or drinking alcohol, provide brief intervention and referral to services. Encourage cessation and refer to cessation services to decrease risk for a variety of adverse pregnancy outcomes and to decrease severity of neonatal abstinence syndrome (NAS). If drinking alcohol, counsel the patient that there is no known safe amount of alcohol during pregnancy. Inform patient/family that alcohol is the leading known cause of birth defects.

Familiarize your team with [maternal urine toxicology and the role of explicit/implicit bias in decision making](#)

Step 4: Integrate screening tool and verbal assessment tool into EMR

Once a screening tool has been chosen, tested, and confirmed with unit staff and leadership, work towards integrated the tool into your hospitals EMR system. Don't wait until this step is complete to move on to the next steps. Start the process now but continue working on next steps.

ADDITIONAL RESOURCES FOR SCREENING

- [AIM Opioid Screening Tools.](#)
- [CRAFFT \(Car, Relax, Alone, Forget, Friends, Trouble\)](#)
- [Substance Use Risk Profile Pregnancy Scale](#)
- [TAPS \(Tobacco, Alcohol, Prescription medication, and other Substance use Tool\)](#)
- [T-ACE \(Tolerance, Avoidance, Cut Down, Eye-opener\)](#)
- [TWEAK \(Tolerance, Worried, Eye-openers, Avoidance, K\[C\] Cut-down](#)

- TICS (Two-Item Conjoint Screening)
- Accuracy of Three Screening Tools for Prenatal Substance Use.
- Ask Suicide-Screening Questions (ASQ)
- CES-D (Center for Epidemiologic Studies Depression Scale)
- C-SSRS (Columbia Suicide Severity Rating Scale)
- IES-R (Impact of Events Scale Revised)
- PASS (Perinatal Anxiety Screening Scale)
- PHQ-2 (Patient Health Questionnaire 2)
- Yale Brown Obsessive Compulsive Scale

