

## Assessment of Substance Use in Pregnancy

### Modified NIDA Quick Screen (Modified NIDA)

**Ask:** "In the past three months, how often have you used:"

Alcohol (four or more drinks a day)	<input type="checkbox"/> Never	<input type="checkbox"/> Once or twice	<input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly	<input type="checkbox"/> Daily
Tobacco products	<input type="checkbox"/> Never	<input type="checkbox"/> Once or twice	<input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly	<input type="checkbox"/> Daily
Prescriptions drugs not used as prescribed or any marijuana	<input type="checkbox"/> Never	<input type="checkbox"/> Once or twice	<input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly	<input type="checkbox"/> Daily
Illegal drugs	<input type="checkbox"/> Never	<input type="checkbox"/> Once or twice	<input type="checkbox"/> Monthly	<input type="checkbox"/> Weekly	<input type="checkbox"/> Daily

**Any answer other than "never" is a positive screen and should prompt follow-up questions to further characterize which substance(s) are being used, the amount, and the time course (see SUD1).**

*Adapted from the NIDA Quick Screen*

### Behaviors that may warrant clinical suspicion for a substance use disorder (SUD)

<ul style="list-style-type: none"> <li>Dose escalation</li> <li>Very focused on controlled substances</li> <li>Substantial effort/time/resources spent on obtaining controlled substances</li> <li>Requests early refills of controlled substances</li> <li>Evidence of tolerance</li> <li>History of withdrawal</li> </ul>	<ul style="list-style-type: none"> <li>Loses prescriptions for controlled substances</li> <li>Requesting specific agent, route, frequency</li> <li>Purchasing illicit drugs</li> <li>Taking diverted opioids (taking others' prescriptions)</li> <li>Multiple providers prescribing controlled substances</li> <li>Mood or personality changes</li> <li>Emotional lability</li> </ul>	<ul style="list-style-type: none"> <li>Clinical signs of intoxication (confused, sedated or hyperactive, rapid or slurred speech)</li> <li>Withdrawal</li> <li>Evidence of tampering with IV or hoarding pills while inpatient</li> <li>Crushing/injecting/snorting pills</li> <li>Seeing drug use paraphernalia (e.g., syringes or pipes)</li> <li>Physical signs of injection, stigmata of chronic alcohol use, intranasal irritation</li> </ul>
---	---	--

**Gather more history**

**Monitor closely**

**Intervene**

### Interpretation of Urine Drug Tests

**Urine drug tests are useful for monitoring high-risk women and preferred over universal screening because they can:**

- Detect undisclosed substances
- Help identify risk for neonatal withdrawal
- Help with risk assessment for medical complications (withdrawal, management of hypertension)
- Confirm use of prescribed medications

**Discussion of urine drug tests results with patients should focus on promoting safety and not be punitive in nature.**

#### Approximate Detection Times in Urine

Drugs	Duration of Detection in Urine
Buprenorphine	1-6 days
Methadone	Up to 14 days
Cannabinoids	Up to 60 days (in chronic users)
Cocaine	1-3 days
Heroin	1-3 days
Benzodiazepines	Up to 21 days

**Urine drug tests have limitations because:**

- They only reflect recent use, and detection times vary.
- Drug levels may vary widely depending on fluid intake, time elapsed since use, or individual variation.
- Providers need to know the characteristics of tests used within their institution because different assays may be used by different labs.
- They do not capture all illicit use (e.g., synthetic cannabinoids (K2/Spice), synthetic opioids (fentanyl, carfentanyl), hallucinogens (LSD)).
- Patients can tamper with their urine specimen.
- The opioid urine assay tests primarily for heroin, morphine, and codeine and **does not** test for synthetic opioids like oxycodone, fentanyl, methadone, and buprenorphine, which each have their own urine test.

**If the urine drug test is inconsistent with the patient's report, order confirmatory testing (e.g., Gas Chromatography/Mass Spectrometry – a.k.a. GC/MS).**

**Call MCPAP for Moms at: 855-MOM-MCPAP (855-666-6272)**

[www.mcpapformoms.org](http://www.mcpapformoms.org)