Addiction Medicine Intake		
Substance Use History (Age at first use? Pattern of use? How often? Quantity? Route? Last use?)		
Alcohol		
Cannabis		
Opiates/kratom		
Amphetamines/Methamphetamine/club drugs		
Benzodiazepines/sedatives		
Cocaine		
Hallucinogens		
Nicotine		
Any other drugs?		
Substance Use Disorder Treatment History (including treatment programs and medications)		
Periods of sustained abstinence of drug use:		
What helped them be successful during these times?		

Consequences of Use:		
Medical (i.e., Overdose, Abscess, endocarditis)		
Complicated withdrawal (i.e., Precipitated withdrawal, seizures, DTs)		
Social		
Occupational		
Current Medications:		
Medical/Surgical History (HIV and Hep C status, birth control in women of reproductive age)		
Past Psychiatric History (Did symptoms predate substance use? Hospitalizations? Medications?)		
Family History		
Chemical dependency:		
Mental Health:		
Ask about housing, employment, family &	Social History children, social support, education & literacy, religion, sexual history	

Addiction Medicine Follow-Ups		
How are you doing?		
Drug or alcohol use		
Cravings		
Opioid withdrawal symptoms		
Bupe or opioid side effects		
Mood/suicidal ideation		
Sleep		
Pain		
Triggers/Stress management		
Review UDS results		