



## **CHAMP Short Opioid Screen (SOS)**

In response to the opioid epidemic, we routinely ask two questions about opioid use and offer expanded treatment opportunities in our clinic.

The answers to these questions will give us important information that we will use to take care of you in

| in the best way possible. |   |
|---------------------------|---|
| 1.                        | In the past <b>three</b> months, have you used opioid medications <b>prescribed for you</b> at <u>higher dosages</u> or <u>more often</u> than prescribed? ( <i>Includes: oxycodone [Oxycontin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine, tramadol, fentanyl etc.</i> ) |
|                           | Please Circle   |
|                           | YES   |
|                           | NO  |
| 2.                        | In the past <b>three</b> months, have you used any opioids <u>not</u> <b>prescribed for you</b> ? ( <i>Includes: oxycontin, fentanyl, heroin, kratom etc.</i> )?  |
|                           | Please Circle   |
|                           | YES   |
|                           | NO  |
| Scoring                   | g:  |
|                           | Yes = 1   |



No = 0

A positive score is > 0

