

FAMILY MEDICINE ADDICTION MEDICINE www.hhfamilymedicine.com

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SOAPP -R

DATE:

SCORE:

Interpretation:

HI risk opiate abuse ≥ 22

Moderate risk 10-21

Low risk <9

_____1. How often do you have mood swings?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

_2. How often have you felt a need for higher doses of medication to treat your pain?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

___3. How often have you felt impatient with your doctors?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

___4. How often have you felt that things are just too overwhelming that you can't handle them?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

_____5. How often is there tension in the home?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

____6. How often have you counted pain pills to see how many are remaining?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

_____7. How often have you been concerned that people will judge you for taking pain medication?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

_____8. How often do you feel bored?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

9. How often have you taken more pain medication than you were supposed to?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

_10. How often have you worried about being left alone?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

_____11. How often have you felt a craving for medication?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

12. How often have others expressed concern over your use of medication?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

13. How often have any of your close friends had a problem with alcohol or drugs?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

_____14. How often have others told you that you had a bad temper?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

___15. How often have you felt consumed by the need to get pain medication?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

_16. How often have you run out of pain medication early?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

17. How often have others kept you from getting what you deserve?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

18. How often, in your lifetime, have you had legal problems or been arrested?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

_____19. How often have you attended an AA or NA meeting?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

_____20. How often have you been in an argument that was so out of control that someone got hurt?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

____21. How often have you been sexually abused?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

____22. How often have others suggested that you have a drug or alcohol problem?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

23. How often have you had to borrow pain medications from your family or friends?

0 Never

1 Seldom

2 Sometime

3 Often

4 Very often

_24. How often have you been treated for an alcohol or drug problem?

0 Never

- 1 Seldom
- 2 Sometime
- 3 Often
- 4 Very often