

PROMIS Severity of Substance Abuse

In the past 30 days

Have you used any illegal drugs, other than alcohol or prescription drugs that were not prescribed to you?

- Yes
- No

Please choose any of the following you used other than prescribed medication:

- Depressants (i.e. Valium) Stimulants (i.e. cocaine) Psychedelics (i.e. LSD, PCP)
- Opioids (i.e. heroin) Cannabinoids (marijuana)

- Continue

In the past 30 days

I felt that my drug use was out of control

- Not at all
- A little bit
- Somewhat
- Quite a bit
- Very much

In the past 30 days

My desire to use drugs seemed overpowering

- Never
- Rarely
- Sometimes
- Often
- Very often

In the past 30 days

Drugs were the only thing I could think about

- Never
- Rarely
- Sometimes
- Often
- Very often

In the past 30 days

My drug use caused problems with people close to me

- Never
- Rarely
- Sometimes
- Often
- Very often

In the past 30 days

I have a drug problem

- Not at all
- A little bit
- Somewhat
- Quite a bit
- Very much

In the past 30 days

I craved drugs

- Never
- Rarely
- Sometimes
- Often
- Very often

In the past 30 days

I spent a lot of time using drugs

- Never
- Rarely
- Sometimes
- Often
- Very often