

# Basics of Substance Use Assessment

## Disclosure to Audience

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No one involved in the planning or presentation of this activity has any relevant financial relationships with a commercial interest to disclose

### **The following are North Star Behavioral Health's Content Controllers:**

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# Basics of Substance Use Assessment

**Date:** December 4, 2018

**Agency/Location:** North Star Behavioral Health

**Presenter:** Jerry Jenkins, M.Ed.

**Your comments are very important to us.**

At the conclusion of this activity, participants should be able to:	Not at All	Slightly	Moderately	Mostly	Completely
<b>Terminal Objective:</b> At the conclusion of this training, participants will be able to do a preliminary bio-psycho-social-spiritual assessment for determining if the interviewee has substance use disorder.					
<b>Enabling Objectives:</b> At the conclusion of this training, participants will have exposure to and be able to:					
1. Describe the role of the ASAM Patient Placement Criteria when there is an SUD					
2. Outline potential tools and models of assessment					
3. Describe the importance of developing a relationship with the interviewee					
4. Outline the assessment process					
5. Determine what collateral information is needed including previous assessments and results from assessment instruments					
6. Analyze results					

Was the presentation commercially biased in any manner?                      Yes ( )    No ( )

Please indicate your response to the following questions by marking the appropriate number from 1-6, where 1 indicates strong disagreement and 6 indicates strong agreement.

- |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| 1. The overall quality of today's session was excellent.  | 1 | 2 | 3 | 4 | 5 | 6 |
| 2. Today's session was relevant/valuable to my practice.  | 1 | 2 | 3 | 4 | 5 | 6 |
| 3. This presentation added to my clinical knowledge base. | 1 | 2 | 3 | 4 | 5 | 6 |

Based on this activity, what will you do differently in your practice? \_\_\_\_\_

Comments: \_\_\_\_\_

Printed Name of CME participant: \_\_\_\_\_ Physician { }

Agency/Organization: \_\_\_\_\_

Preferred Email: \_\_\_\_\_

**North Star Behavioral Health designates this live activity for a maximum of 3 AMA PRA Category 1 credit(s). Participants should claim only the credit commensurate with the extent of their participation in the activity.**