

TREATMENT ASSESSMENT

Patient Name: _____ Date: _____

Patient ID #: _____

1. What are the advantages of taking methadone?
2. What are some of the things that you can do to help methadone work?
3. What percentage of your success is due to methadone?
4. What percentage of your success is due to changes you have made?
5. What are you learning about yourself as a result of counseling?
6. What does the word "commitment" mean to you?
7. What was the best example of commitment you have had in your life?
8. What are the things that made you feel like this was a commitment?
9. Who was the person who made the commitment to you?
10. What is it about this person that makes you feel like you can count on them?
11. When have you made a commitment to yourself?
12. What did you do to fulfill the commitment?