**PRESCRIPTION OPIOD MISUSE INDEX**

1. Do you ever use MORE of your medication, that is, take a higher dosage, than is prescribed for you? Yes No

2. Do you ever use your medication MORE OFTEN, that is, shorten the time between dosages? Yes No

3. Do you ever feel high or get a buzz after using your pain medication? Yes No

4. Do you ever take your pain medication because you are upset, using the medication to relieve or cope with problems other than pain? Yes No

5. Have you ever gone to multiple physicians including emergency room doctors, seeking more of your pain medication? Yes No

6. Do you ever need early refills for your pain medication? Yes No