Form Approved

OMB No. 0990-0379

Exp. Date 09/30/2020

**SBIRT Curriculum PRE-TEST**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Agree | Neutral | Disagree |
| I would willingly accept someone who has been treated for substance use as a close friend. | □ | □ | □ |
| I feel that entering treatment for substance use is a sign of personal failure. | □ | □ | □ |
| I think less of a person who has been in treatment for substance use. | □ | □ | □ |
| I would treat someone who has been treated for substance use just as I would treat anyone else. | □ | □ | □ |
| I believe that someone who has been treated for substance use is just as trustworthy as the average citizen. | □ | □ | □ |
| I believe that a person who has been treated for substance use is just as intelligent as the average person. | □ | □ | □ |

For the Statements below, please mark whether you Agree, Disagree, or are Neutral.

For the Questions below, please mark whether you believe the answer is True or False.

|  |  |  |
| --- | --- | --- |
|  | True | False |
| Universal screening increases stigma. | □ | □ |
| Substance use disorder is a diagnosable medical condition. | □ | □ |
| Opioids refers to both street drugs like Heroin and prescription drugs like Vicodin. | □ | □ |
| As addiction severity increases, treatment becomes more targeted. | □ | □ |
| Motivational interviewing is a one-sided, directive approach. | □ | □ |
| Open ended questions elicit “yes or no” responses. | □ | □ |
| SBIRT screenings and interventions are billable under Medicaid. | □ | □ |

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0990-0379 . The time required to complete this information collection is estimated to average 15 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, to review and complete the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer

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