

## Introduction and Screening Questions

### Consumers

Thank you for being part of the GfK panel. This study is being conducted on behalf of the Food and Drug Administration (FDA). There has been a lot of discussion about pain medicines called opioids, and FDA wants to hear from the public about what they think about them.

The survey should take about 15 minutes to complete.

We'll start with a few basic questions.

**S1. Have you ever been prescribed any of the following opioids for pain not caused by cancer?**

|   | Yes | No |
|---|-----|----|
| Alfentanil (Alfenta)  |     |    |
| Buprenorphine (Belbuca, Bunavail, Buprenex, Butrans, Suboxone, Zubsolv)                       |     |    |
| butorphanol   |     |    |
| Codeine (Fioricet with codeine, Fiorinal with codeine, Tylenol with codeine)                  |     |    |
| Dihydrocodeine (Synalgos-DC)  |     |    |
| Fentanyl (Abstral, Actiq, Duragesic, Fentora, Ionsys, Lazanda, Sublimaze, Subsys)             |     |    |
| Hydrocodone (Anexsia, Hysingla ER, Lortab, Norco, Reprexain, Vicodin, Vicoprofen, Zohydro ER) |     |    |
| Hydromorphone (Dilaudid, Dilaudid-HP, Exalgo)   |     |    |
| Levorphanol (Levo-Dromoran)   |     |    |
| Meperidine (Demerol)  |     |    |
| Methadone (Dolophine, Methadose)  |     |    |
| Morphine (Astramorph PF, Duramorph PF, Embeda,  |     |    |

|   |  |  |
|---|--|--|
| Infumorph, Kadian, Morphabond, MS Contin)   |  |  |
| oxycodone (Oxaydo, Oxycet, Oxycontin, Percocet, Percodan, Roxicet, Roxicodone, Xartemis XR) |  |  |
| oxymorphone (Opana, Opana ER)   |  |  |
| pentazocine (Talwin)  |  |  |
| remifentanil (Ultiva)   |  |  |
| sufentanil (Sufenta)  |  |  |
| tapentadol (Nucynta, Nucynta ER)  |  |  |
| tramadol (Conzip, Ultracet, Ultram, Ultram ER)  |  |  |

|                      |  |                         |
|----------------------|--|-------------------------|
| Yes (to one or more) |  | → CONTINUE TO S2 and S3 |
| No                   |  | → CONTINUE AS GEN POP   |

**S2. When was the last time you were prescribed [FILL FROM S1]? (Select one)**

- a. I was prescribed an opioid in the past but am no longer taking it. [If yes, define as ever user]
- b. I am currently taking a prescription opioid for pain and have been taking it for less than one month. [If Yes, define as ever user]
- c. I am currently taking a prescription opioid for pain and have been taking it for more than one month but less than 3 months. [If yes, define as ever user]
- d. I am currently taking a prescription opioid for pain and have been taking it for 3 months or longer. [If Yes, define as chronic user]

**S3. For which of the following kinds of pain were you prescribed the opioid?**

- a. An injury (for example, from an accident, work or sports)
- b. Dental work or surgery
- c. A non-dental surgery where you went home the same day
- d. A non-dental surgery where you had to stay overnight in the hospital
- e. A medical condition other than cancer (for example, arthritis, low back pain, lupus, or fibromyalgia)

- f. Cancer [TERMINATE]
- g. Other (*specify*)