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The study we are conducting is on behalf of the U.S. Food and Drug Administration.

### Screening Question

The question below is about stimulants. Some stimulants are used to treat attention deficit disorder (ADD), attention deficit hyperactivity disorder (ADHD), shift work disorder, sleep apnea, or narcolepsy. They are also known to aid with losing weight, staying awake, or studying. Some stimulants are available without a prescription or are made illegally (not by a drug company). We will be asking about both types of stimulants in this survey.

B1. Have you ever used the **stimulant** below? Select yes or no.

Yes

No

Stimulants	Variable Name
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	
<b>Amphetamine not made by a drug company</b> (Bennies, Black Beauties, Crosses, Hearts, LA Turnaround, Speed, Truck Drivers, Uppers)	
<b>Cathinones</b> (mephedrone, bath salts)	
<b>Cocaine Powder</b> (Blow, Bump, Coke, Charlie, Flake, Snow, Toot)	
<b>Crack Cocaine</b> (Candy, Crack, Charlie, Rock)	
<b>MDMA</b> (Ecstasy, Molly, Adam, Clarity, Eve, Lover's Speed, Peace, Uppers)	
<b>Methamphetamine</b> (Crank, Chalk, Crystal, Fire, Glass, Go Fast, Ice, Meth, Speed, Crystal Meth)	

Age

B2. What is your age in years?  
Enter a whole number.

B3 . The list below shows events that may happen to someone during their life. Please choose any 5 events that have happened to you.

Event	Variable Name
Graduated high school	
Got married	
Had first child	
Had first relationship	
Started college	
Graduated college	
Got first job	
Moved out of parent's house	
Bought own house	
Moved to another state/city	
Got divorced	
Death of a loved one	
Travelled abroad for the first time	
Left a job that was meaningful to me	
Got a pet	
Bought first car	
Add an event not listed	
Add an event not listed	
Add an event not listed	
Add an event not listed	
Add an event not listed	

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Please be specific.

Please type in

Please type in

Please type in

Please type in

Please type in

B4. Please place the 5 major events you identified on the timeline below.  
Drag and drop the flag on the timeline to answer the question.

B5. When you first used each of the **stimulants** below, what was your age in years?

Drag and drop the flag on the timeline to answer the question. If you do not remember, please provide your best estimate.

<b>Stimulants</b>	<b>Variable Name</b>
<b>Used amphetamine made by a drug company</b>	
<b>Used atomoxetine</b>	
<b>Used methylphenidate</b>	
<b>Used modafinil</b>	
<b>Used amphetamine not made by a drug company</b>	
<b>Used cathinones</b>	
<b>Used cocaine powder</b>	
<b>Used crack cocaine</b>	
<b>Used MDMA</b>	
<b>Used methamphetamine</b>	

Behavior NMU

B5.1. Have you ever **injected** the stimulant below?

Select yes or no for each.

Yes

No

<b>Stimulants</b>	<b>Variable Name</b>
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	
<b>Amphetamine not made by a drug company</b> (Bennies, Black Beauties, Crosses, Hearts, LA Turnaround, Speed, Truck Drivers, Uppers)	
<b>Cathinones</b> (mephedrone, bath salts)	
<b>Cocaine Powder</b> (Blow, Bump, Coke, Charlie, Flake, Snow, Toot)	
<b>Crack Cocaine</b> (Candy, Crack, Charlie, Rock)	
<b>MDMA</b> (Ecstasy, Molly, Adam, Clarity, Eve, Lover's Speed, Peace, Uppers)	
<b>Methamphetamine</b> (Crank, Chalk, Crystal, Fire, Glass, Go Fast, Ice, Meth, Speed, Crystal Meth)	

B5.2. Have you ever **shared a needle** with another person while injecting the stimulant below? Select yes or no for each.

Yes

No

<b>Stimulants</b>	<b>Variable Name</b>
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	
<b>Amphetamine not made by a drug company</b> (Bennies, Black Beauties, Crosses, Hearts, LA Turnaround, Speed, Truck Drivers, Uppers)	
<b>Cathinones</b> (mephedrone, bath salts)	
<b>Cocaine Powder</b> (Blow, Bump, Coke, Charlie, Flake, Snow, Toot)	

<b>Crack Cocaine</b> (Candy, Crack, Charlie, Rock)	
<b>MDMA</b> (Ecstasy, Molly, Adam, Clarity, Eve, Lover's Speed, Peace, Uppers)	
<b>Methamphetamine</b> (Crank, Chalk, Crystal, Fire, Glass, Go Fast, Ice, Meth, Speed, Crystal Meth)	

B5.3. Have you ever used the stimulant below **at the same time as another drug**? Please say no if you took a drug at the same time as another drug as directed by your healthcare provider. Select yes or no for each.

- Yes
- No

Stimulants	Variable Name
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	
<b>Amphetamine not made by a drug company</b> (Bennies, Black Beauties, Crosses, Hearts, LA Turnaround, Speed, Truck Drivers, Uppers)	
<b>Cathinones</b> (mephedrone, bath salts)	
<b>Cocaine Powder</b> (Blow, Bump, Coke, Charlie, Flake, Snow, Toot)	
<b>Crack Cocaine</b> (Candy, Crack, Charlie, Rock)	
<b>MDMA</b> (Ecstasy, Molly, Adam, Clarity, Eve, Lover's Speed, Peace, Uppers)	
<b>Methamphetamine</b> (Crank, Chalk, Crystal, Fire, Glass, Go Fast, Ice, Meth, Speed, Crystal Meth)	

B5a.3.1. What was the other drug you used at the same time as **amphetamine made by a drug company**? If you used more than one, list the one you have used most often.

- Enter just one drug.
- I prefer not to answer

B6a.3.1. At what age did you first use [PIPE OET B5a.3.1] in a way not directed by your healthcare provider?

Drag and drop the flag on the timeline to answer the question.

B5a.3.2. What was the other drug you used at the same time as **atomoxetine**? If you used more than one, list the one you have used most often.

Enter just one drug.

I prefer not to answer

B6a.3.2. At what age did you first use [PIPE OET B6a.3.2] in a way not directed by your healthcare provider?

Drag and drop the flag on the timeline to answer the question.

B5a.3.3. What was the other drug you used at the same time as **methylphenidate**? If you used more than one, list the one you have used most often.

Enter just one drug.

I prefer not to answer

B6a.3.3. At what age did you first use [PIPE OET B6a.3..3] in a way not directed by your healthcare provider?

Drag and drop the flag on the timeline to answer the question.

B5a.3.4. What was the other drug you used at the same time as **modafinil**? If you used more than one, list the one you have used most often.

Enter just one drug.

I prefer not to answer

B6a.3.4. At what age did you first use [PIPE OET B6a.3..4] in a way not directed by your healthcare provider?

Drag and drop the flag on the timeline to answer the question.

B5a.3.5. What was the other drug you used at the same time as **amphetamine not made by a drug company**? If you used more than one, list the one you have used most often.

Enter just one drug.

I prefer not to answer

B6a.3.5. At what age did you first use [PIPE OET B6a.3..5] in a way not directed by your healthcare provider?

Drag and drop the flag on the timeline to answer the question.

B5a.3.6. What was the other drug you used at the same time as **cathinones**? If you used more than one, list the one you have used most often.

Enter just one drug.

I prefer not to answer

B6a.3.6. At what age did you first use [PIPE OET B6a.3..6] in a way not directed by your healthcare provider?

Drag and drop the flag on the timeline to answer the question.

B5a.3.7. What was the other drug you used at the same time as **cocaine powder**? If you used more than one, list the one you have used most often.

Enter just one drug.

[Check box] I prefer not to answer

B6a.3.7. At what age did you first use [PIPE OET B6a.3..7] in a way not directed by your healthcare provider?

Drag and drop the flag on the timeline to answer the question.

B5a.3.8. What was the other drug you used at the same time as **crack cocaine**? If you used more than one, list the one you have used most often.

Enter just one drug.

[Check box] I prefer not to answer

B6a.3.8. At what age did you first use [PIPE OET B6a.3..8] in a way not directed by your healthcare provider?

Drag and drop the flag on the timeline to answer the question.

B5a.3.9. What was the other drug you used at the same time as **MDMA**? If you used more than one, list the one you have used most often.

Enter just one drug.

[Check box] I prefer not to answer

B6a.3.9. At what age did you first use [PIPE OET B6a.3..9] in a way not directed by your healthcare provider?

Drag and drop the flag on the timeline to answer the question.

B5a.3.10. What was the other drug you used at the same time as **methamphetamine**? If you used more than one, list the one you have used most often.

Enter just one drug.

[Check box] I prefer not to answer

B6a.3.10. At what age did you first use [PIPE OET B6a.3..10] in a way not directed by your healthcare provider?

Drag and drop the flag on the timeline to answer the question.

B5.4. Have you ever **snorted** the stimulant below?

Select yes or no for each.

Yes

No

Stimulants	Variable Name
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or	



other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	
<b>Amphetamine not made by a drug company</b> (Bennies, Black Beauties, Crosses, Hearts, LA Turnaround, Speed, Truck Drivers, Uppers)	
<b>Cathinones</b> (mephedrone, bath salts)	
<b>Cocaine Powder</b> (Blow, Bump, Coke, Charlie, Flake, Snow, Toot)	
<b>Crack Cocaine</b> (Candy, Crack, Charlie, Rock)	
<b>MDMA</b> (Ecstasy, Molly, Adam, Clarity, Eve, Lover's Speed, Peace, Uppers)	
<b>Methamphetamine</b> (Crank, Chalk, Crystal, Fire, Glass, Go Fast, Ice, Meth, Speed, Crystal Meth)	

B5.5. Have you ever used the stimulant below **to feel good or get high?**

Select yes or no for each.

Yes

No

Stimulants	Variable Name
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	
<b>Amphetamine not made by a drug company</b> (Bennies, Black Beauties, Crosses, Hearts, LA Turnaround, Speed, Truck Drivers, Uppers)	
<b>Cathinones</b> (mephedrone, bath salts)	
<b>Cocaine Powder</b> (Blow, Bump, Coke, Charlie, Flake, Snow, Toot)	
<b>Crack Cocaine</b> (Candy, Crack, Charlie, Rock)	
<b>MDMA</b> (Ecstasy, Molly, Adam, Clarity, Eve, Lover's Speed, Peace, Uppers)	
<b>Methamphetamine</b> (Crank, Chalk, Crystal, Fire, Glass, Go Fast, Ice, Meth, Speed, Crystal Meth)	

B5.6. Have you ever used the stimulant below **to improve professional or academic performance without being told to by a healthcare professional?**

Select yes or no for each.

Yes

No

Stimulants	Variable Name
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	
<b>Amphetamine not made by a drug company</b> (Bennies, Black Beauties, Crosses, Hearts, LA Turnaround, Speed, Truck Drivers, Uppers)	
<b>Cathinones</b> (mephedrone, bath salts)	
<b>Cocaine Powder</b> (Blow, Bump, Coke, Charlie, Flake, Snow, Toot)	
<b>Crack Cocaine</b> (Candy, Crack, Charlie, Rock)	
<b>MDMA</b> (Ecstasy, Molly, Adam, Clarity, Eve, Lover's Speed, Peace, Uppers)	
<b>Methamphetamine</b> (Crank, Chalk, Crystal, Fire, Glass, Go Fast, Ice, Meth, Speed, Crystal Meth)	

B5.7. Have you ever purchased the stimulant below **from the Internet without a prescription**? Select yes or no for each.

Yes  
No

Stimulants	Variable Name
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	
<b>Amphetamine not made by a drug company</b> (Bennies, Black Beauties, Crosses, Hearts, LA Turnaround, Speed, Truck Drivers, Uppers)	
<b>Cathinones</b> (mephedrone, bath salts)	
<b>Cocaine Powder</b> (Blow, Bump, Coke, Charlie, Flake, Snow, Toot)	
<b>Crack Cocaine</b> (Candy, Crack, Charlie, Rock)	
<b>MDMA</b> (Ecstasy, Molly, Adam, Clarity, Eve, Lover's Speed, Peace, Uppers)	
<b>Methamphetamine</b> (Crank, Chalk, Crystal, Fire, Glass, Go Fast, Ice,	

Meth, Speed, Crystal Meth)	
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B5.8. Have you ever purchased the stimulant below **from a dealer**?

Select yes or no for each.

Yes

No

Stimulants	Variable Name
<b>Amphetamine</b> made by a drug company such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	
<b>Amphetamine not made by a drug company</b> (Bennies, Black Beauties, Crosses, Hearts, LA Turnaround, Speed, Truck Drivers, Uppers)	
<b>Cathinones</b> (mephedrone, bath salts)	
<b>Cocaine Powder</b> (Blow, Bump, Coke, Charlie, Flake, Snow, Toot)	
<b>Crack Cocaine</b> (Candy, Crack, Charlie, Rock)	
<b>MDMA</b> (Ecstasy, Molly, Adam, Clarity, Eve, Lover's Speed, Peace, Uppers)	
<b>Methamphetamine</b> (Crank, Chalk, Crystal, Fire, Glass, Go Fast, Ice, Meth, Speed, Crystal Meth)	

B5.9. Have you ever **received a prescription for yourself** for the stimulant below?

Select yes or no for each.

Yes

No

Stimulants	Variable Name
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	

B5a.9.1. When you first **received a prescription for yourself** for **amphetamine made by a drug company**, for what medical condition or symptom did you receive the prescription?

Please select one

Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD)\_

Narcolepsy

Shift work sleep disorder

Another medical condition or symptom

B5a.9.2. When you first **received a prescription for yourself** for **atomoxetine**, for what medical condition or symptom did you receive the prescription?

Please select one

Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD)\_

Narcolepsy

Shift work sleep disorder

Another medical condition or symptom

B5a.9.3. When you first **received a prescription for yourself** for **methylphenidate**, for what medical condition or symptom did you receive the prescription?

Please select one

Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD)\_

Narcolepsy

Shift work sleep disorder

Another medical condition or symptom

B5a.9.4. When you first **received a prescription for yourself** for **modafinil**, for what medical condition or symptom did you receive the prescription?

Please select one

Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD)\_

Narcolepsy

Shift work sleep disorder

Another medical condition or symptom

B5.10. Have you ever **given away or sold the drugs from your prescription** for the stimulant below?

Select yes or no for each.

Yes

No

Stimulants	Variable Name
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	

<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	

B5.11. Have you ever received the stimulant below **from a friend or family member**?

Select yes or no for each.

- Yes
- No

<b>Stimulants</b>	<b>Variable Name</b>
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	
<b>Amphetamine not made by a drug company</b> (Bennies, Black Beauties, Crosses, Hearts, LA Turnaround, Speed, Truck Drivers, Uppers)	
<b>Cathinones</b> (mephedrone, bath salts)	
<b>Cocaine Powder</b> (Blow, Bump, Coke, Charlie, Flake, Snow, Toot)	
<b>Crack Cocaine</b> (Candy, Crack, Charlie, Rock)	
<b>MDMA</b> (Ecstasy, Molly, Adam, Clarity, Eve, Lover's Speed, Peace, Uppers)	
<b>Methamphetamine</b> (Crank, Chalk, Crystal, Fire, Glass, Go Fast, Ice, Meth, Speed, Crystal Meth)	

B5.12. Have you ever **tampered** with the prescription stimulant below before using it? Tampering could include crushing, chewing, heating, dissolving, or changing the drug in a way not directed by a healthcare professional.

Select yes or no for each.

- Yes
- No

<b>Stimulants</b>	<b>Variable Name</b>
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®,	

Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	

B5.13. Have you ever **smoked** the stimulant below?

Select yes or no for each.

Yes

No

Stimulants	Variable Name
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	
<b>Amphetamine not made by a drug company</b> (Bennies, Black Beauties, Crosses, Hearts, LA Turnaround, Speed, Truck Drivers, Uppers)	
<b>Cathinones</b> (mephedrone, bath salts)	
<b>Cocaine Powder</b> (Blow, Bump, Coke, Charlie, Flake, Snow, Toot)	
<b>Crack Cocaine</b> (Candy, Crack, Charlie, Rock)	
<b>MDMA</b> (Ecstasy, Molly, Adam, Clarity, Eve, Lover's Speed, Peace, Uppers)	
<b>Methamphetamine</b> (Crank, Chalk, Crystal, Fire, Glass, Go Fast, Ice, Meth, Speed, Crystal Meth)	

B5.14. Have you ever used the stimulant below **to improve athletic performance without being told to by a healthcare professional?**

Select yes or no for each.

Yes

No

Stimulants	Variable Name
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®,	

Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	
<b>Amphetamine not made by a drug company</b> (Bennies, Black Beauties, Crosses, Hearts, LA Turnaround, Speed, Truck Drivers, Uppers)	
<b>Cathinones</b> (mephedrone, bath salts)	
<b>Cocaine Powder</b> (Blow, Bump, Coke, Charlie, Flake, Snow, Toot)	
<b>Crack Cocaine</b> (Candy, Crack, Charlie, Rock)	
<b>MDMA</b> (Ecstasy, Molly, Adam, Clarity, Eve, Lover's Speed, Peace, Uppers)	
<b>Methamphetamine</b> (Crank, Chalk, Crystal, Fire, Glass, Go Fast, Ice, Meth, Speed, Crystal Meth)	

B5.15. Have you ever used the stimulant below **to lose weight**?

Select yes or no for each.

Yes

No

Stimulants	Variable Name
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	
<b>Amphetamine not made by a drug company</b> (Bennies, Black Beauties, Crosses, Hearts, LA Turnaround, Speed, Truck Drivers, Uppers)	
<b>Cathinones</b> (mephedrone, bath salts)	
<b>Cocaine Powder</b> (Blow, Bump, Coke, Charlie, Flake, Snow, Toot)	
<b>Crack Cocaine</b> (Candy, Crack, Charlie, Rock)	
<b>MDMA</b> (Ecstasy, Molly, Adam, Clarity, Eve, Lover's Speed, Peace, Uppers)	
<b>Methamphetamine</b> (Crank, Chalk, Crystal, Fire, Glass, Go Fast, Ice, Meth, Speed, Crystal Meth)	

B5.16. Have you ever used the stimulant below **as a replacement for another drug**?

Select yes or no for each.

Yes

No

Stimulants	Variable Name
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®,	

Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	
<b>Amphetamine not made by a drug company</b> (Bennies, Black Beauties, Crosses, Hearts, LA Turnaround, Speed, Truck Drivers, Uppers)	
<b>Cathinones</b> (mephedrone, bath salts)	
<b>Cocaine Powder</b> (Blow, Bump, Coke, Charlie, Flake, Snow, Toot)	
<b>Crack Cocaine</b> (Candy, Crack, Charlie, Rock)	
<b>MDMA</b> (Ecstasy, Molly, Adam, Clarity, Eve, Lover's Speed, Peace, Uppers)	
<b>Methamphetamine</b> (Crank, Chalk, Crystal, Fire, Glass, Go Fast, Ice, Meth, Speed, Crystal Meth)	

B5.17. Have you ever **swallowed** the stimulant below?

Select yes or no for each.

Yes

No

Stimulants	Variable Name
<b>Amphetamine made by a drug company</b> such as Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics	
<b>Atomoxetine</b> such as Strattera® or other generics	
<b>Methylphenidate</b> such as Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics	
<b>Modafinil</b> such as Nuvigil®, Provigil®, or other generics	
<b>Amphetamine not made by a drug company</b> (Bennies, Black Beauties, Crosses, Hearts, LA Turnaround, Speed, Truck Drivers, Uppers)	
<b>Cathinones</b> (mephedrone, bath salts)	
<b>Cocaine Powder</b> (Blow, Bump, Coke, Charlie, Flake, Snow, Toot)	
<b>Crack Cocaine</b> (Candy, Crack, Charlie, Rock)	
<b>MDMA</b> (Ecstasy, Molly, Adam, Clarity, Eve, Lover's Speed, Peace, Uppers)	
<b>Methamphetamine</b> (Crank, Chalk, Crystal, Fire, Glass, Go Fast, Ice, Meth, Speed, Crystal Meth)	



Behavior NMU Age

B6.1. The following refers to your use of **amphetamine made by a drug company** (Adderall®, Adderall XR®, Adzenys ER™, Adzenys XR-ODT™, Desoxyn®, Dexedrine®, Dyanavel® XR, Evekeo®, Evekeo® ODT™, Mydayis®, Vyvanse®, or other generics). Please place the events on the timeline below according to the first time you did each one.

Drag and drop the flag on the timeline to answer the question. If you do not remember, please provide your best estimate.

Stimulants	Variable Name
<b>Injected</b>	
<b>Shared a needle</b>	
<b>Used at the same time as another drug</b>	
<b>Snorted</b>	
<b>Used to feel good or get high</b>	
<b>Used to improve professional or academic performance</b>	
<b>Purchased from the Internet without a prescription</b>	
<b>Purchased from a dealer</b>	
<b>Received a prescription for yourself</b>	
<b>Gave away or sold the drugs from your prescription</b>	
<b>Received from a friend or family member</b>	
<b>Tampered with</b>	
<b>Smoked</b>	
<b>Used to improve athletic performance</b>	
<b>Used to lose weight</b>	
<b>Used as a replacement for another drug</b>	
<b>Swallowed</b>	

B6.2. The following refers to your use of **atomoxetine** (Strattera® or other generics). Please place the events on the timeline below according to the first time you did each one.

Drag and drop the flag on the timeline to answer the question. If you do not remember, please provide your best estimate.

Stimulants	Variable Name
<b>Injected</b>	
<b>Shared a needle</b>	
<b>Used at the same time as another drug</b>	
<b>Snorted</b>	
<b>Used to feel good or get high</b>	
<b>Used to improve professional or academic performance</b>	
<b>Purchased from the Internet without a prescription</b>	
<b>Purchased from a dealer</b>	
<b>Received a prescription for yourself</b>	
<b>Gave away or sold the drugs from your prescription</b>	
<b>Received from a friend or family member</b>	
<b>Tampered with</b>	

<b>Smoked</b>	
<b>Used to improve athletic performance</b>	
<b>Used to lose weight</b>	
<b>Used as a replacement for another drug</b>	
<b>Swallowed</b>	

B6.3. The following refers to your use of **methylphenidate** (Adhansia XR®, Aptensio XR®, Concerta®, Cotempla XR-ODT™, Daytrana®, Focalin®, Focalin XR®, Metadate CD®, Metadate® ER, Methylin™ ER, Quillichew ER™, Quillivant XR®, Ritalin®, Ritalin LA®, Ritalin SR®, or other generics). Please place the events on the timeline below according to the first time you did each one

Drag and drop the flag on the timeline to answer the question. If you do not remember, please provide your best estimate.

<b>Stimulants</b>	<b>Variable Name</b>
<b>Injected</b>	
<b>Shared a needle</b>	
<b>Used at the same time as another drug</b>	
<b>Snorted</b>	
<b>Used to feel good or get high</b>	
<b>Used to improve professional or academic performance</b>	
<b>Purchased from the Internet without a prescription</b>	
<b>Purchased from a dealer</b>	
<b>Received a prescription for yourself</b>	
<b>Gave away or the sold the drugs from your prescription</b>	
<b>Received from a friend or family member</b>	
<b>Tampered with</b>	
<b>Smoked</b>	
<b>Used to improve athletic performance</b>	
<b>Used to lose weight</b>	
<b>Used as a replacement for another drug</b>	
<b>Swallowed</b>	

B6.4. The following refers to your use of **modafinil** (Nuvigil®, Provigil®, or other generics). Please place the events on the timeline below according to the first time you did each one.

Drag and drop the flag on the timeline to answer the question. If you do not remember, please provide your best estimate.

<b>Stimulants</b>	<b>Variable Name</b>
<b>Injected</b>	
<b>Shared a needle</b>	
<b>Used at the same time as another drug</b>	
<b>Snorted</b>	
<b>Used to feel good or get high</b>	
<b>Used to improve professional or academic performance</b>	
<b>Purchased from the Internet without a prescription</b>	
<b>Purchased from a dealer</b>	
<b>Received a prescription for yourself</b>	

<b>Gave away or sold the drugs from your prescription</b>	
<b>Received from a friend or family member</b>	
<b>Tampered with</b>	
<b>Smoked</b>	
<b>Used to improve athletic performance</b>	
<b>Used to lose weight</b>	
<b>Used as a replacement for another drug</b>	
<b>Swallowed</b>	

B6.5. The following refers to your use of **amphetamine not made by a drug company** (bennies, black beauties, crosses, hearts, la turnaround, speed, truck drivers, uppers). Please place the events on the timeline below according to the first time you did each one.

Drag and drop the flag on the timeline to answer the question. If you do not remember, please provide your best estimate.

<b>Stimulants</b>	<b>Variable Name</b>
<b>Injected</b>	
<b>Shared a needle</b>	
<b>Used at the same time as another drug</b>	
<b>Snorted</b>	
<b>Used to feel good or get high</b>	
<b>Used to improve professional or academic performance</b>	
<b>Purchased from the Internet without a prescription</b>	
<b>Purchased from a dealer</b>	
<b>Received from a friend or family member</b>	
<b>Smoked</b>	
<b>Used to improve athletic performance</b>	
<b>Used to lose weight</b>	
<b>Used as a replacement for another drug</b>	
<b>Swallowed</b>	

B6.6. The following refers to your use of **cathinones** (mephredone, bath salts). Please place the events on the timeline below according to the first time you did each one

Drag and drop the flag on the timeline to answer the question. If you do not remember, please provide your best estimate.

<b>Stimulants</b>	<b>Variable Name</b>
<b>Injected</b>	
<b>Shared a needle</b>	
<b>Used at the same time as another drug</b>	
<b>Snorted</b>	
<b>Used to feel good or get high</b>	
<b>Used to improve professional or academic performance</b>	
<b>Purchased from the Internet without a prescription</b>	
<b>Purchased from a dealer</b>	
<b>Received from a friend or family member</b>	

<b>Smoked</b>	
<b>Used to improve athletic performance</b>	
<b>Used to lose weight</b>	
<b>Used as a replacement for another drug</b>	
<b>Swallowed</b>	

B6.7. The following refers to your use of **cocaine powder** (blow, bump, coke, charlie, flake, snow, toot). Please place the events on the timeline below according to the first time you did each one  
 Drag and drop the flag on the timeline to answer the question. If you do not remember, please provide your best estimate.

<b>Stimulants</b>	<b>Variable Name</b>
<b>Injected</b>	
<b>Shared a needle</b>	
<b>Used at the same time as another drug</b>	
<b>Snorted</b>	
<b>Used to feel good or get high</b>	
<b>Used to improve professional or academic performance</b>	
<b>Purchased from the Internet without a prescription</b>	
<b>Purchased from a dealer</b>	
<b>Received from a friend or family member</b>	
<b>Smoked</b>	
<b>Used to improve athletic performance</b>	
<b>Used to lose weight</b>	
<b>Used as a replacement for another drug</b>	
<b>Swallowed</b>	

B6.8. The following refers to your use of **crack cocaine** (candy, crack, charlie, rock). Please place the events on the timeline below according to the first time you did each one  
 Drag and drop the flag on the timeline to answer the question. If you do not remember, please provide your best estimate.

<b>Stimulants</b>	<b>Variable Name</b>
<b>Injected</b>	
<b>Shared a needle</b>	
<b>Used at the same time as another drug</b>	
<b>Snorted</b>	
<b>Used to feel good or get high</b>	
<b>Used to improve professional or academic performance</b>	
<b>Purchased from the Internet without a prescription</b>	
<b>Purchased from a dealer</b>	
<b>Received from a friend or family member</b>	
<b>Smoked</b>	
<b>Used to improve athletic performance</b>	
<b>Used to lose weight</b>	

<b>Used as a replacement for another drug</b>	
<b>Swallowed</b>	

B6.9. The following refers to your use of **MDMA** (ecstasy, molly, adam, clarity, eve, lover's speed, peace, uppers). Please place the events on the timeline below according to the first time you did each one  
 Drag and drop the flag on the timeline to answer the question. If you do not remember, please provide your best estimate.

<b>Stimulants</b>	<b>Variable Name</b>
<b>Injected</b>	
<b>Shared a needle</b>	
<b>Used at the same time as another drug</b>	
<b>Snorted</b>	
<b>Used to feel good or get high</b>	
<b>Used to improve professional or academic performance</b>	
<b>Purchased from the Internet without a prescription</b>	
<b>Purchased from a dealer</b>	
<b>Received from a friend or family member</b>	
<b>Smoked</b>	
<b>Used to improve athletic performance</b>	
<b>Used to lose weight</b>	
<b>Used as a replacement for another drug</b>	
<b>Swallowed</b>	

B6.10. The following refers to your use of **methamphetamine** (crank, chalk, crystal, fire, glass, go fast, ice, meth, speed, crystal meth). Please place the events on the timeline below according to the first time you did each one  
 Drag and drop the flag on the timeline to answer the question. If you do not remember, please provide your best estimate.

<b>Stimulants</b>	<b>Variable Name</b>
<b>Injected</b>	
<b>Shared a needle</b>	
<b>Used at the same time as another drug</b>	
<b>Snorted</b>	
<b>Used to feel good or get high</b>	
<b>Used to improve professional or academic performance</b>	
<b>Purchased from the Internet without a prescription</b>	
<b>Purchased from a dealer</b>	
<b>Received from a friend or family member</b>	
<b>Smoked</b>	
<b>Used to improve athletic performance</b>	
<b>Used to lose weight</b>	
<b>Used as a replacement for another drug</b>	
<b>Swallowed</b>	



Perceived Risk

C1. Complete each question below. **Instructional Text:** Drag the slider to answer the question.

No Risk  
Slight Risk  
Moderate Risk  
Great Risk

Scrolling Text	Variable Name
How much do people risk harming themselves physically and in other ways when they <b>use a prescription stimulant as directed by a healthcare professional?</b>	
How much do people risk harming themselves physically and in other ways when they <b>use someone else's prescription stimulant once a month?</b>	
How much do people risk harming themselves physically and in other ways when they <b>inject a prescription stimulant once a month?</b>	
How much do people risk harming themselves physically and in other ways when they <b>use cocaine once a month?</b>	
How much do people risk harming themselves physically and in other ways when they <b>use methamphetamine once a month?</b>	
How much do people risk harming themselves physically and in other ways when they <b>use a prescription stimulant more often than directed by a healthcare professional?</b>	
How much do people risk harming themselves physically and in other ways when they <b>use a prescription stimulant at a higher dose than directed by a healthcare professional?</b>	
How much do people risk harming themselves physically and in other ways when they <b>use a prescription stimulant at different times than directed by a healthcare professional?</b>	

### Diagnosis

D1. Have you ever been diagnosed with Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD) by a healthcare professional? Select yes or no.

Yes  
No

D2. When you were first diagnosed with Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD) by a healthcare professional, what was your age in years?

Enter a whole number.

D3. Have you ever been diagnosed with narcolepsy by a healthcare professional? Select yes or no.

Yes  
No

D4. When you were first diagnosed with narcolepsy by a healthcare professional, what was your age in years?

Enter a whole number.

D5. Have you ever been diagnosed with shift work sleep disorder by a healthcare professional? Select yes or no.

Yes  
No

D6. When you were first diagnosed with shift work sleep disorder by a healthcare professional, what was your age in years?

Enter a whole number.

D7. Have you ever been diagnosed with sleep apnea by a healthcare professional? Select yes or no.

Yes  
No

D8. When you were first diagnosed with sleep apnea by a healthcare professional, what was your age in years?

Enter a whole number.

### End of Survey

E.1 Please describe just **one** more way in which you have used stimulants.

[Text Box] Please be specific.

[Check box] I prefer not to answer

E2. Should we trust your answers to this survey? Select yes or no.

Yes  
No

E3. We know some of these questions are difficult to answer and we appreciate your honesty. If you ever think about hurting yourself, are worried about a friend or loved one, or would like emotional support, please call this free and confidential service for support and information about self-harm: [National Suicide Prevention Lifeline](https://www.national suicide prevention lifeline.org/) at 1-800-273-8255 (En Español: 1-888-628-9454; Deaf and Hard of Hearing: 1-800-799-4889) or the [Crisis Text Line](https://www.crisistextline.org/) by texting 741741.



**Press "Continue" to finish the survey.**