

## ENGELSK – Basisregistrering

# National quality register for the treatment of harmful substance use or addiction (Kvarus)

## INITIAL REGISTRATION

### *Patient questions*

#### Social conditions (*Sosiale forhold*)

*Living situation* **ved inntak**

**Residence** (*if the patient has their own residence but is in an institution or in prison when taken into treatment or later during treatment, register the alternative “Private residence (owned or rented)”. Public housing encompasses institutions, nursing homes and shared accommodation of permanent nature. Temporary residences are institutions, prison, hospice, half-way house etc. Patients older than the age of 18 who live with a caregiver without a special agreement, register the alternative “Temporary residence”.*)

- ☐ Private residence (owned or rented)
- ☐ Public housing or other similar institution
- ☐ Temporary residence
- ☐ Without residence
- ☐ Don't want to answer

#### *Children*

**Living with or have regular contact with children below the age of 18** (*this applies to children below the age of 18 regardless of whether it is the child of the patient, cohabitant, younger sibling etc. Regular contact can be digital contact, visitation or visits during weekends, whole days, during vacations, sporadic visits etc.*)

- ☐ No
- ☐ Yes
- ☐ Don't want to answer

#### *Education*

**Highest completed level of education**

- ☐ No completed education
- ☐ Primary school
- ☐ High school. First grade
- ☐ High school
- ☐ Vocational education
- ☐ Higher education
- ☐ Don't want to answer

#### *Work and activity*

- ☐ Not in any form of work, education, or activity
- ☐ Full time work
- ☐ Part time work
- ☐ In education
- ☐ Participating in regular unpaid activity or work

#### *Income*

- ☐ Income from work
- ☐ Arbeidsavklaringspenger (AAP)
- ☐ Retirement pension
- ☐ Uføretrygd
- ☐ Public financial assistance
- ☐ Student loan
- ☐ Supported by others
- ☐ Unemployment benefits while in prison
- ☐ None of the above

### **Events and experiences (*Hendelser og erfaringer*)**

I dette punktet spørres det om opplevde negative hendelser og erfaringer. Spørsmålene omhandler sensitive temaer og du velger selv hva du vil svare på.

Been witness to psychological or physical violence

- ☐ Før fylte 16 år ☐ Etter fylte 16 år ☐ Både før og etter fylte 16 år

Been subject to psychological or physical violence

- ☐ Før fylte 16 år ☐ Etter fylte 16 år ☐ Både før og etter fylte 16 år

Subjected others to physical or psychological violence

☐ Før fylte 16 år ☐ Etter fylte 16 år ☐ Både før og etter fylte 16 år

Persons in my family of upbringing have had issues connected to substance use

☐ Før fylte 16 år ☐ Etter fylte 16 år ☐ Både før og etter fylte 16 år

Persons in my family of upbringing have had psychological issues

☐ Før fylte 16 år ☐ Etter fylte 16 år ☐ Både før og etter fylte 16 år

Persons in my family of upbringing have attempted to, or have, taken their life

☐ Før fylte 16 år ☐ Etter fylte 16 år ☐ Både før og etter fylte 16 år

Experienced the loss of a close family member or others who were dear to me

☐ Før fylte 16 år ☐ Etter fylte 16 år ☐ Både før og etter fylte 16 år

Experienced child neglect in my upbringing

☐ Før fylte 16 år ☐ Etter fylte 16 år ☐ Både før og etter fylte 16 år

Been subject to serious bullying (by bullying we mean harassment/threats/systematically ignored, excluded or treated as unimportant. This applies to both physical bullying and psychological bullying in social media.)

☐ Før fylte 16 år ☐ Etter fylte 16 år ☐ Både før og etter fylte 16 år

Been sexually violated or abused (for example. Groped, raped, harassed)

☐ Før fylte 16 år ☐ Etter fylte 16 år ☐ Både før og etter fylte 16 år

Lived in a destructive romantic relationship (Persistently destructive relationship)

☐ Før fylte 16 år ☐ Etter fylte 16 år ☐ Både før og etter fylte 16 år

Been imprisoned continuously, 6 months or more

☐ Før fylte 16 år ☐ Etter fylte 16 år ☐ Både før og etter fylte 16 år

Experienced trauma linked to war, disasters, or serious accidents

☐ Før fylte 16 år ☐ Etter fylte 16 år ☐ Både før og etter fylte 16 år

Sexual services: sold or traded for benefits

☐ Før fylte 16 år ☐ Etter fylte 16 år ☐ Både før og etter fylte 16 år

### Physical health (*Fysisk helse*)

How tall are you without shoes?  cm

How much do you weigh without clothes and shoes?  kg

How many minutes are you physically active each week (*Activity with an intensity at least equivalent to a brisk walk*)?

Antall minutes

Do you smoke?

- ☐ No, I have never smoked, or quit more than 6 months ago
- ☐ No, but I quit less than 6 months ago
- ☐ Yes, but not daily the past 6 months
- ☐ Yes, daily the past 6 months

### **Mental health (*Psykisk helse*)**

*Self-reporting of mental health the last week (up to, and including, today)*

Suddenly scared for no reason

- ☐ Not at all
- ☐ A little
- ☐ Quite a bit
- ☐ Extremely

Feeling fearful

- ☐ Not at all
- ☐ A little
- ☐ Quite a bit
- ☐ Extremely

Faintness, dizziness or weakness

- ☐ Not at all
- ☐ A little
- ☐ Quite a bit
- ☐ Extremely

Feeling tense or keyed up

- ☐ Not at all
- ☐ A little
- ☐ Quite a bit

- ☐ Extremely

Blaming yourself for things

- ☐ Not at all
- ☐ A little
- ☐ Quite a bit
- ☐ Extremely

Difficulties in falling asleep or staying asleep

- ☐ Not at all
- ☐ A little
- ☐ Quite a bit
- ☐ Extremely

Feelings of worthlessness

- ☐ Not at all
- ☐ A little
- ☐ Quite a bit
- ☐ Extremely

Feeling blue

- ☐ Not at all
- ☐ A little
- ☐ Quite a bit
- ☐ Extremely

A feeling everything is an effort

- ☐ Not at all
- ☐ A little
- ☐ Quite a bit
- ☐ Extremely

Feeling of hopeless about the future

- ☐ Not at all
- ☐ A little
- ☐ Quite a bit

☐ Extremely

### Substance use (*Bruk av rusmidler*)

Kryss av for rusmidler du har brukt, og svar på underspørsmålene. Legemidler tatt som foreskrevet skal ikke krysses av, men legemidler tatt for å oppnå rus skal krysses av.

- ☐ Alcohol
- ☐ Cannabis
- ☐ Syntetisk cannabis
- ☐ Opioider (inkludert heroin, metadon, fentanyl, subutex og subuxone (utenfor LAR) og andre opiatere)
- ☐ Sedativa, hypnotika og anxiolytika (benzodiazepiner)
- ☐ Cocaine
- ☐ Andre sentralstimulerende, inkl. amfetamin
- ☐ Hallusinogener
- ☐ Lightergass, lystgass og sniffing
- ☐ MDMA (ecstasy), MDA og tilsvarende
- ☐ Andre rusmidler og medikamenter
- ☐ Anabole steroider

### Follow up questions for all substances used:

Age when first brukt

years old

Years of problematisk use (minst 3 dager i uken eller i perioder med minst to sammenhengende dager i uken, til et nivå hvor normale aktiviteter vanskeliggjøres).

years

☐ Used the last 30 days

Number of days of use the last 30 days

days

Total number of days of substance use the last 30 days

days

Choose primary substance

- ☐ Alcohol
- ☐ Cannabis
- ☐ Syntetisk cannabis
- ☐ Opioider (inkludert heroin, metadon, fentanyl, subutex og subuxone (utenfor LAR) og andre opiater)
- ☐ Sedativa, hypnotika og anxiolytika (benzodiazepiner)
- ☐ Cocaine
- ☐ Andre sentralstimulerende, inkl. amfetamin
- ☐ Hallusinogener
- ☐ Lightergass, lystgass og sniffing
- ☐ MDMA (ecstasy), MDA og tilsvarende
- ☐ Andre rusmidler og medikamenter
- ☐ Anabole steroider

### Injection (*Injisering*)

Have you ever used a needle?

- ☐ No
- ☐ Yes

Total number of years you've used needles

years

How old were you when you first used a needle?

years old

Have you used a needle the past 30 days?

- ☐ No
- ☐ Yes
- ☐ Don't want to answer

Have you used a needle the past 12 months?

- ☐ No
- ☐ Yes
- ☐ Don't want to answer

- ☐ Don't want to answer

## Overdose or alcohol poisoning (*Overdose/alkoholforgiftning*)

Tidligere overdose eller alkoholforgiftning som krevde sykehusinnleggelse, livredning eller motgift

Previous overdose/alcohol poisoning

- ☐ No
- ☐ Yes
- ☐ Don't want to answer

## Motivation (*Motivasjon*)

On a scale from 1 to 10:

How important is it for you to change your substance use (*1 = Not important, 10 = Very important*)

How strong is your belief that you will manage to change your substance use (*1 = No belief, 10 = Very strong belief*)

## Life situation

How do you yourself think your physical health is presently?

- ☐ Very bad
- ☐ Bad
- ☐ Neither good or bad
- ☐ Good
- ☐ Very good

How do you yourself think your mental health is presently?

- ☐ Very bad
- ☐ Bad
- ☐ Neither good or bad
- ☐ Good
- ☐ Very good

How is your relationship with your partner presently?

- ☐ Very bad
- ☐ Bad
- ☐ Neither good or bad
- ☐ Good
- ☐ Very good

How is your relationship with your friends presently?

- ☐ Very bad
- ☐ Bad
- ☐ Neither good or bad
- ☐ Good
- ☐ Very good

How is your relationship with yourself presently?

- ☐ Very bad
- ☐ Bad
- ☐ Neither good or bad
- ☐ Good
- ☐ Very good

Total personal life situation

- ☐ Very bad
- ☐ Bad
- ☐ Neither good or bad
- ☐ Good
- ☐ Very good