**Pretest and Posttest for Hospital Consortium Opioid Training**

**Name:**

**Institution:**

**Specialty/Department:**

* 1. Addiction Medicine
	2. Emergency Medicine
	3. Family Medicine
	4. Infectious Disease
	5. Internal Medicine
	6. Obstetrics and Gynecology
	7. Pediatrics
	8. Psychiatry
	9. Other (*please specify*) \_\_\_\_\_\_\_\_\_\_
1. Are you interested in obtaining a DATA2000 waiver (also known as an X Waiver), which allows you to prescribe buprenorphine?
	1. Yes
	2. No
	3. I already have a DATA2000/X Waiver

**Demographics**

Please indicate your race.

American Indian or Alaskan Native

Asian

Black or African American

Hispanic/Latino

White

Other

I prefer not to answer.

Please indicate if you are of Hispanic/Latinx ethnicity.

Yes

No

Please indicate your gender.

Male

Female

Non-binary/Gender non-conforming

Please indicate your age group.

18-25 years

26-35 years

36-45 years

46-55 years

56-64 years

65 and older

**Please select the extent to which you agree or disagree to the following statements on a scale 1 to 5 where 1 means “Totally agree” and 5 means “Totally Disagree”.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Totally disagree****(1)** | **Somewhat disagree****(2)** | **Neither agree nor disagree****(3)** | **Somewhat agree****(4)** | **Totally agree****(5)** |
| 1. Opioid use disorder is different from other chronic diseases (e.g., diabetes, hypertension) because people who use misuse opioids are making a choice
 |  |  |  |  |  |
| 1. Opioid use disorder is a treatable disease
 |  |  |  |  |  |
| 1. There is little I can do to help patients with opioid use disorder
 |  |  |  |  |  |
| 1. I prefer not to work with patients with opioid use disorder
 |  |  |  |  |  |

**Thinking about your education, training, and work experience, please describe how prepared you feel to:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Very Unprepared****(1)** | **Somewhat Unprepared****(2)** | **Somewhat Prepared****(3)** | **Very Prepared****(4)** |
| 1. Screen for opioid use disorder
 |  |  |  |  |
| 1. Diagnose opioid use disorder
 |  |  |  |  |
| 1. Provide brief intervention and referral
 |  |  |  |  |
| 1. Discuss medication assisted treatment for opioid use disorder treatment with patients
 |  |  |  |  |
| 1. Discuss overdose prevention / naloxone with patients
 |  |  |  |  |

**Please select the extent to which you agree or disagree to the following statements on a scale 1 to 5 where 1 means “Totally agree” and 5 means “Totally Disagree”.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Totally disagree****(1)** | **Somewhat disagree****(2)** | **Neither agree nor disagree****(3)** | **Somewhat agree****(4)** | **Totally agree****(5)** |
| 1. If my practice treats for opioid use disorder, it will attract undesirable patients to our facility
 |  |  |  |  |  |
| 1. Medication (MAT) is effective as a long-term treatment for patients with opioid use disorder
 |  |  |  |  |  |
| 1. Medication (MAT) should be used to reduce craving or withdrawal, but not for long term treatment of opioid use disorder
 |  |  |  |  |  |
| 1. Using medications like methadone and buprenorphine (suboxone) for opioid use disorder is simply replacing one addiction with another
 |  |  |  |  |  |

**Additional knowledge question:**

**Name the three medications for opioid use disorder discussed in this presentation and how they bind with opioid receptors.**