

IS MY LOVED ONE ADDICTED TO FENTANYL?



READ EACH STATEMENT AND ANSWER YES OR NO.

01	HAVE YOU NOTICED YOUR LOVED ONE USING PILLS OR POWDERS THAT MIGHT CONTAIN FENTANYL, EVEN IF THEY DENY IT?	YES ☐	NO ☐
02	DO THEY SEEM DROWSY, "NODDING OFF," "FOLDED OVER," OR UNABLE TO STAY AWAKE AT UNUSUAL TIMES OF DAY?	YES ☐	NO ☐
03	HAVE YOU FOUND ANY FOIL SQUARES, BURNT SPOONS, OR SMALL BAGGIES AMONG THEIR BELONGINGS?	YES ☐	NO ☐
04	DO THEY HAVE FREQUENT, UNEXPLAINED FLU-LIKE SYMPTOMS — SWEATING, CHILLS, NAUSEA — THAT COME AND GO?	YES ☐	NO ☐
05	HAVE THEY BECOME SECRETIVE ABOUT WHERE THEY GO OR WHO THEY SPEND TIME WITH?	YES ☐	NO ☐
06	ARE THEY STRUGGLING TO KEEP A JOB, ATTEND SCHOOL, OR MEET FAMILY RESPONSIBILITIES BECAUSE OF SUBSTANCE USE?	YES ☐	NO ☐
07	HAVE YOU NOTICED MOOD SWINGS, ANXIETY, OR DEPRESSION WHEN THEY STOP USING?	YES ☐	NO ☐
08	DO THEY SPEND MONEY QUICKLY OR ASK FOR MONEY WITHOUT EXPLANATION?	YES ☐	NO ☐



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HAVE YOU SEEN THEM EXPERIENCE
WITHDRAWAL SYMPTOMS LIKE RESTLESSNESS,
MUSCLE PAIN, OR INTENSE CRAVINGS?

YES

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NO

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DO YOU WORRY THAT THEIR USE IS PLACING
THEM IN DANGER OF FENTANYL OVERDOSE?

YES

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NO

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SCORING YOUR RESULTS:

IF YOU ANSWERED YES TO THREE OR MORE QUESTIONS, YOUR LOVED ONE MAY BE AT RISK FOR FENTANYL ADDICTION. YOU DON'T HAVE TO FACE IT ALONE — ICARUS BEHAVIORAL HEALTH IDAHO CAN HELP YOU LEARN ABOUT SAFE DETOX, RECOVERY PROGRAMS, AND FAMILY SUPPORT OPTIONS.

DISCLAIMER:

OUR QUIZ IS INTENDED FOR SELF-EXAMINATION ONLY. IT SHOULD NOT BE CONSIDERED A PROFESSIONAL DIAGNOSIS OR MEDICAL ADVICE. IF YOU NEED HELP AFTER COMPLETING THE QUIZ, PLEASE CALL ICARUS NEVADA AT 208.907.8881 TO SCHEDULE A PROFESSIONAL ASSESSMENT.

