

The following are the six dimensions of ASAM:

1. Intoxication, Withdrawal and Addiction Medicine

The first dimension assesses a person's immediate risk related to acute intoxication and anticipated withdrawal. Clinicians can evaluate the severity of signs and symptoms to determine the appropriate level of medical management. This can include evaluating the need for Medications for Opioid Use Disorder (MOUD) to prevent opioid withdrawal.

2. Biomedical Conditions

The second dimension considers the individual's need for physical health services. It also explores the relationship between substance use and co-occurring physical health challenges. The goal is to determine whether the person needs additional physical health services. Medically managed care can include acute stabilization, prenatal care and ongoing management of a chronic condition.

3. Psychiatric and Cognitive Conditions

The third dimension evaluates the need to address co-occurring mental health challenges. This may include cognitive, behavioral, psychiatric and trauma-related conditions. Clinicians also consider the relationship between substance use and any co-occurring mental health problems. The goal is to determine whether signs and symptoms can be addressed safely through addiction treatment (i.e., mood swings due to drug use) or warrant additional mental health services (i.e., mood swings due to concurrent bipolar disorder).

4. Substance Use-Related Risks

The fourth dimension assesses the likelihood that an individual will engage in risky substance use and related behaviors. It considers: the person's recent and historical patterns of use, the potential

for dangerous consequences (i.e., overdose, injury, driving while impaired, risky sexual behavior or criminal behavior), the likely imminency of these consequences, exposure to triggers in the person's daily environment, awareness of triggers, access to substances and ability to cope with stressors and cravings.

5. Recovery Environment Interactions

The fifth explores an individual's ability to function, safety and support in their current environment. If a person is not currently functioning effectively, they may benefit from developing their social skills or independent living skills. A person's needs in this dimension also could include housing, financial, vocational, educational, legal, transportation or child care services. Clinicians can also examine whether family members, significant others or school, work and living situations pose a threat to the person's treatment and recovery.

6. Person-Centered Considerations

The sixth dimension is completed after the other five dimensions are assessed. In this dimension, we consider a person's obstacles to care, treatment preferences and need to enhance motivation. The goal is for the clinician and patient to practice shared decision-making to determine the appropriate level of care, respecting the person's autonomy, culture, social determinants of health, trauma, etc.

ASAM ASSESSMENT COLLATERAL INFORMATION:

ASAM assessment collateral information" refers to details gathered from sources other than the patient themselves, like family members, friends, or previous healthcare providers, during an ASAM (American Society of Addiction Medicine) assessment, used to gain a more comprehensive picture of the patient's substance use history and current situation, particularly when the patient might not provide fully accurate information due to denial or impairment.

Key points about ASAM assessment collateral information:

- **Purpose:**

To verify information provided by the patient, identify potential inconsistencies, and gather crucial details about the patient's substance use patterns, social support network, and overall functioning that might be missed in a self-report alone.

- **Sources of collateral information:**

- Family members
- Close friends
- Previous treatment providers
- Employers (with consent)
- Legal records (if relevant)

- **Information gathered from collaterals:**

- Substance use history (types of drugs, frequency, quantity)
- Past treatment attempts
- Impact of substance use on relationships and work
- Observable behavioral changes related to substance use
- Medical history related to substance use

Important considerations when using collateral information:

- **Patient consent:**

Always obtain informed consent from the patient before contacting any collateral source.

- **Confidentiality:**

Maintain strict confidentiality when discussing information obtained from collateral sources.

- **Accuracy checks:**

Compare information provided by the patient with the collateral information to identify potential discrepancies and address them with the patient.