

## NHPHP Self-Report

NAME \_\_\_\_\_

DATE \_\_\_\_\_

Check your contract type: ( ) substance use: sobriety date \_\_\_\_\_ ( ) disruptive behavior ( ) mental health

Current Medications:

What has changed in your life since your last self-report?

Describe your biggest challenges this past month:

Work:

Home:

What goals in recovery / treatment are you working on?

How many times **in the last month** did you:

\_\_\_\_\_ Attend 12 step or recovery meetings

\_\_\_\_\_ Attend individual therapy

\_\_\_\_\_ Attend Caduceus group meetings

\_\_\_\_\_ Meditate for at least 10 minutes

\_\_\_\_\_ See or speak with your sponsor

\_\_\_\_\_ Talk with or email your practice coach

\_\_\_\_\_ Spend time with friends (other than spouse or children)

\_\_\_\_\_ Exercise How? \_\_\_\_\_

This past month: how many days off? \_\_\_\_\_ days on call? \_\_\_\_\_ days of CME? \_\_\_\_\_ days sick? \_\_\_\_\_

What are you reading for pleasure?

What new things are you trying or would like to try?

How do you think you are doing?

What do you need to do?

Signature of NHPHP participant: \_\_\_\_\_