My First Week After Leaving Treatment

Use this sheet to arrange the next few days around your care team's instructions and your actual needs. It is a flexible planning window, not a required recovery stage or a test of success.

Keep completed notes private. Use short notes in each box; continue on another copy or separate paper when needed. Save the completed PDF on your device and reopen it to check your notes before closing.

Build around essentials and chosen support

Recovery can involve treatment, medication, peer support and other personally chosen approaches. SAMHSA describes health, a stable home, meaningful activity and supportive relationships as important dimensions. A first-week plan can therefore include food, sleep arrangements, transport and company as well as appointments. [1]

Use the clinical discharge plan for treatment and medicine instructions. Confirm the next appointment and how you will reach it; if an arrangement falls through, contact the service rather than leaving a referral unaddressed. Continuing support should fit the needs identified in treatment. [2]

An opioid-specific safety step
After reduced or no opioid use, tolerance can fall; returning to a previous amount can lead to overdose. Include naloxone access and training in the handoff if opioids are relevant to you. Unresponsiveness or slow/difficult breathing calls for 911 and naloxone if available, not waiting for the next visit. [3] [4]

An example of a small, workable plan

Hypothetical first-day plan — adapt, do not copy

Need	Arrangement	If it falls through
Follow-up visit	Confirmed Thursday at 10; clinic number saved.	Call the clinic about the next available option.
Medicine access	Check the written list with the pharmacy today.	Call the prescribing service if the medicine or coverage is unavailable.
Food and contact	Ask a friend to bring groceries and call this evening.	Use the backup contact already chosen.

Choose a few actions you can use. An unanswered item belongs on the follow-up list; it is not evidence that you have failed. These are original planning prompts, not a clinical program.

My week

Care and medicine arrangements

Appointments, pharmacy/clinic details, dates and whether each item is confirmed.

Where I will stay and daily essentials

Housing, food, phone, transport, caregiving or accessibility arrangements that need attention.

People and support I want

Who, the specific help I want, contact details and when we plan to connect.

A manageable routine

One or two activities that give the day structure; include rest and room for appointments.

The first unresolved item

What needs confirming, who can help, when I will ask and my backup if there is no answer.

What I want to tell my care team

New concerns, difficult situations, side effects or a plan that is not working.

Keep completed notes private. Share only what you choose with the people helping you. These are original educational and planning prompts, not a validated assessment.

Useful next steps

Explore recovery support principles

https://www.samhsa.gov/substance-use/recovery/about

Find treatment options

https://findtreatment.gov/

Sources

[1] SAMHSA: About Recovery
https://www.samhsa.gov/substance-use/recovery/about

[2] NIAAA: Questions for alcohol treatment programs
https://alcoholtreatment.niaaa.nih.gov/how-to-find-alcohol-treatment/10-questions-for-alcohol-treatment-programs

[3] CDC: Clinical Practice Guideline for Prescribing Opioids for Pain, 2022
https://www.cdc.gov/mmwr/volumes/71/rr/rr7103a1.htm

[4] CDC: Preventing Opioid Overdose
https://www.cdc.gov/overdose-prevention/prevention/