

Returning to Care After Substance Use

Use this guide to ask for help after using again. Begin with safety and a direct account of what happened; you do not need to turn the conversation into an apology or wait until you can describe it perfectly.

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.

First, check for urgent danger

Act now for a possible overdose

If someone cannot be awakened or has slow or difficult breathing, give naloxone if opioids may be involved and it is available, call 911 and stay with the person. Follow dispatcher instructions. Do not leave an unresponsive person alone to sleep it off. [1]

After time without opioids, reduced tolerance can make a previously used amount dangerous. Also tell the team about alcohol, sedatives and other medicines; combinations can add serious breathing risks. Do not assume old dosing or treatment instructions are right for the present situation. [2] [3]

Stopping again may need medical help

If alcohol or benzodiazepines have been used regularly, ask a clinician how to make a safe change. Abrupt withdrawal can be dangerous, including seizures. This guide does not provide a home-detox or medicine-restart schedule. [4] [3]

Use the information to adjust care

A return to use can signal that the treatment plan or support needs review. NIAAA's guidance on alcohol treatment describes responding with additional help or adjusted care rather than treating a return to drinking as a moral failure. The change needed depends on an assessment, not a worksheet score. [5]

Opening words

Original script: "I have used again and want help with what happens next. I used ____ at about _____. I also took _____. My symptoms or worries right now are _____. How can I be assessed, and what should I do while I arrange that?" If you do not know what was in a substance, say so.

Information to bring to the conversation [5] [6]

- What you took, approximate amount if known, timing, route and other medicines or substances. Say when details are uncertain.
- Current symptoms, interrupted medications, recent treatment and what helped before.
- Changes in stress, housing, pain, relationships or access to treatment that you want help addressing.
- What you need now: assessment, medication review, a safer setting, transport or a supportive person for the call.

My return-to-care notes**The service or clinician I will contact**

Name, number, when I can reach them and a backup option.

What happened and current concerns

Keep sensitive details private and share with the clinical team; use another page if needed.

What was missing or not working

Treatment, practical barriers or support needs I want to discuss without blaming myself.

The agreed next step

Who, when, where, instructions before the visit, and what to do if it cannot happen.

If distress is making the call hard

In the U.S., call or text 988 or use 988lifeline.org for mental-health, suicide or substance-use crisis support. Use 911 for immediate physical danger or a medical emergency. [7] [8]

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

Find treatment services

<https://findtreatment.gov/>

988 support and chat

<https://988lifeline.org/>

Sources

[1] CDC: Preventing Opioid Overdose

<https://www.cdc.gov/overdose-prevention/prevention/>

[2] CDC: Clinical Practice Guideline for Prescribing Opioids for Pain, 2022

<https://www.cdc.gov/mmwr/volumes/71/rr/rr7103a1.htm>

[3] FDA: Benzodiazepine boxed-warning safety communication

<https://www.fda.gov/drugs/drug-safety-and-availability/fda-requiring-boxed-warning-updated-improve-safe-use-benzodiazepine-drug-class>

[4] NIAAA: Should You Cut Down or Quit?

<https://rethinkingdrinking.niaaa.nih.gov/thinking-about-change/cut-down-or-quit>

[5] NIAAA: Questions for alcohol treatment programs

<https://alcoholtreatment.niaaa.nih.gov/how-to-find-alcohol-treatment/10-questions-for-alcohol-treatment-programs>

[6] SAMHSA: Finding quality treatment

<https://www.samhsa.gov/find-support/learn-about-treatment/finding-quality-treatment>

[7] SAMHSA: 988 Frequently Asked Questions

<https://www.samhsa.gov/mental-health/988/faqs>

[8] SAMHSA: 988 versus 911

<https://www.samhsa.gov/resource/988/988-versus-911-social-media-post>