

130.e10 Clinical Guidelines for the Use of Chronic Opioid Therapy in Chronic Noncancer Pain Appendix 4.

Risk Assessment Tool – Opioid Risk Tool (ORT)

Date _____

Patient Name _____

OPIOID RISK TOOL

	Mark each box that applies	Item Score If Female	Item Score If Male
1. Family History of Substance Abuse	Alcohol <input type="checkbox"/>	1	3
	Illegal Drugs <input type="checkbox"/>	1	3
	Prescription Drugs <input type="checkbox"/>	4	4
2. Personal History of Substance Abuse	Alcohol <input type="checkbox"/>	3	3
	Illegal Drugs <input type="checkbox"/>	4	4
	Prescription Drugs <input type="checkbox"/>	5	5
3. Age (Mark box if 16 – 45)	<input type="checkbox"/>	1	1
4. History of Preadolescent Sexual Abuse	<input type="checkbox"/>	3	0
5. Psychological Disease	Attention Deficit Disorder <input type="checkbox"/>	2	2
	Obsessive Compulsive Disorder <input type="checkbox"/>	2	2
	Bipolar Schizophrenia <input type="checkbox"/>	2	2
	Depression <input type="checkbox"/>	1	1
TOTAL	<input type="checkbox"/>		

Total Score Risk Category Low Risk 0 – 3 Moderate Risk 4 – 7 High Risk \geq 8

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Attachment is Archived with policy Effective 01/01/2022 Pursuant to DHCS APL 20-020 and the Medi-Cal Rx Program.