

<i>Txhua yam lus uas koj teb rau hauv no txog kev haus dejcaw thiab siv yeebtshuaj yuav tsi pub qhia rau leejtwg yog tias tsi tau ntauv tsocai los ntawm koj. (Your answers to questions about alcohol and drug use cannot be released to others without your special written permission.)</i>		For Clinical Use		
		Interventions Code/Date/Initials		
Koj Puas: (Do You:)				
11.	Haus luamyeeb lossis cov luamyeeb loj uas yog cigar lossis siv dua lwm yam luamyeeb? <i>(Smoke cigarettes or cigars or use any other kinds of tobacco?)</i>	<input type="checkbox"/> Tsishaus	<input type="checkbox"/> Haus	<input type="checkbox"/> Hla
12.	Siv yeebtshuaj lossis kuabtshuaj kom tsaugzog zoo, kom siab tus, nyob tswm, kaj siab, lossis ua kom poob phaus? <i>(Use any drugs or medicines to go to sleep, relax, calm down, feel better, or lose weight?)</i>	<input type="checkbox"/> Tsissiv	<input type="checkbox"/> Siv	<input type="checkbox"/> Hla
13.	Pheej haus tej yam muaj cawv tov tshaj li ib hnuv ob zaug? <i>(Often have more than 2 drinks containing alcohol in one day?)</i>	<input type="checkbox"/> Tsishaus	<input type="checkbox"/> Haus	<input type="checkbox"/> Hla
14.	Xav tias tej zaum koj lossis tus koj deev nrog ntawd cev xeebtub lawm? <i>(Think you or your partner could be pregnant?)</i>	<input type="checkbox"/> Tsixeeb	<input type="checkbox"/> Xeeb	<input type="checkbox"/> Hla
15.	Xav tias tej zaum koj lossis tus koj deev nrog ntawd muaj kabmob kis tau los ntawm kev sibdeev? <i>(Think you or your partner could have a sexually transmitted disease?)</i>	<input type="checkbox"/> Tsismuaj	<input type="checkbox"/> Muaj	<input type="checkbox"/> Hla
Puas Yog Koj: (Have You:)				
16.	Lossis tej neeg uas koj deev nrog yeej tsis tau siv khoom tivthaiv kom txhob muaj menyuam lub xyoo dhau los? <i>(Or your partner(s) had sex without using birth control in the last year?)</i>	<input type="checkbox"/> Tsisyog	<input type="checkbox"/> Yog	<input type="checkbox"/> Hla
17.	Lossis tus uas koj deev nrog ntawd twb tau deev dua lwm tus neeg lub xyoo dhau los? <i>(Or your partner(s) had sex with other people in the past year?)</i>	<input type="checkbox"/> Tsistau	<input type="checkbox"/> Tau	<input type="checkbox"/> Hla
18.	Lossis tus uas koj deev nrog ntawd twb tsis siv hnab loj lub xyoo dhau los? <i>(Or your partner(s) had sex without a condom in the past year?)</i>	<input type="checkbox"/> Tsissiv	<input type="checkbox"/> Siv	<input type="checkbox"/> Hla
19.	Raug dua lwm tus quabyuam lossis mos deev? <i>(Ever been forced or pressured to have sex?)</i>	<input type="checkbox"/> Tsistau	<input type="checkbox"/> Tau	<input type="checkbox"/> Hla
20.	Raug dua lwm tus ntaus, npuaj, ncaws, lossis ua kom mobnqaij mobtawv? <i>(Ever been hit, slapped, kicked, or physically hurt by someone?)</i>	<input type="checkbox"/> Tsistau	<input type="checkbox"/> Tau	<input type="checkbox"/> Hla
21.	Koj puas muaj lwm yam lus nug lossis kev txhawjxeeb txog koj kev nojqab nyobzoo? <i>(Do you have other questions or concerns about your health?)</i> <i>(Thov qhia saib yog dabtsi) (Please identify) _____</i> _____ _____ _____	<input type="checkbox"/> Tsismuaj	<input type="checkbox"/> Muaj	<input type="checkbox"/> Hla

For Clinical Use

Intervention Codes: C: Counseling EM: Educational Materials R: Referral F: Follow-up Needed SPN: See Progress Notes

Kev ceev lus

Txoj kevcai ceev lus uas tsimtsa xyoo 1977 (California Civil Code 1798) thiab Tseemhvw Qibsiab txoj kevcai ceev lus (5USC 552a, Subdivision (E)(3)) samhwm kom yuav tsum tau muab txoj cai no los qhia thaum yuav nug ib yam dabtsi txog ntawm lawv tuskheej. Cov lus teb no yog xav tau los ntawm koj tus kws khomob, koomhaum khomob, thiab phab saib kev kho mobnkees kom lawv paub npaj kev cobqhia txog sab kev nojqab nyobzoo. Qhov yuav teb thiab tsis teb cov lus no nyob ntawm tus neegmob xaiv. Txawm tus neegmob tsis teb tej lus nug no los yuav tsis muaj kev rau txim dabtsi rau nws. Cov lus teb hauv daim ntawm no yuav muab ceev nrog nws cov ntaubntawv khomob uake, thiab muaj txoj cai los txwv tsis pub neeg paub tibyam li cov ntaubntawv khomob. Txoj kevblig kevcai thiab kev tswjfwfwm hauv lub xeev txog kev ceev lus rau tus neegmob mas yog hais tag nrho rau cov lus teb nyob hauv daim ntawm no huvsu. Vim kevcai thiab kev tswjfwfwm pom zoo mas qho yam lus teb hauv no yuav tau xa rau hauv tseemfwv loj tej chaw ua haujlwm nyob hauv xeev thiab hauv tej zejzox thiab tej chaw tsimtsa kevlig kevcai, tej koomhaum pab kev khomob, thiab tej kws khomob.