

**Drug Abuse - Ask "Rx" -pert Underwriter
(ask our experts)**

Producer _____ Phone _____ Fax _____

Client _____ Age/DOB _____ Sex _____

your client has a history of drug abuse treatment, please answer the following:

1. What was the date of initial treatment or diagnosis _____

2. What drug(s) were used or abused? _____

3. Were there any relapses from sobriety/abstinence?

yes, please list dates _____

No

4. Were there any legal problems (such as DUI or other)?

Yes (Please give details) _____

No

4. Please describe frequency of attacks:

5. Have there been physical complications or additional psychiatric problems?

yes, please give details _____

No

6. Please list current medications:) _____

7. What is your client's current level of alcohol consumption? _____

8. Does your client currently participate in a group such as Narcotics Anonymous?

Yes

No

9. Has your client smoked cigarettes in the last 12 months?

Yes

No

10. Does your client have any other major health problems (ex: cancer, diabetes, ulcers, etc.)?

Yes (Please give details) _____

No

After reading the Rx for Success on Drug Abuse, please feel free to use this Ask "Rx" pert underwriter for an informal quote.

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