Return-to-Use Response - Review journal

Review an attempt at return-to-use response and choose what to keep, change, or leave aside.

Adults; supported use as appropriate | 10 minutes

Fictional example: Jordan misses an appointment after a return to use and feels embarrassed to call.

Use an ordinary or fictional example, with a clinician when appropriate. A return to use calls for reassessment and support rather than shame.

Practice task

Draft a nonjudgmental plan to reconnect with care, review immediate safety, and ask what needs to change.

1. What I tried, or what happened in the fictional example:

2. What I noticed before, during, and after; what remains uncertain:

3. What helped, did not help, or was outside my control:

4. What message would make reconnecting easier? My optional adjustment or support request:

Scope and adaptation

Adapt to individualized assessment and the person's chosen recovery goals. Worksheets do not manage intoxication, overdose, or withdrawal. Abrupt cessation of alcohol or benzodiazepines can be dangerous: seek medical guidance rather than using a worksheet to stop or taper. Follow existing emergency and overdose-prevention plans; medication choices belong with qualified prescribers.

Original AI-assisted educational draft; independent clinical review pending. Version 1.0. Background: Substance Use Disorders. Full source links and scope: library.morethantherapy.org/recovery/resources/SUR-A07-5