

# Substance Use Disorder Intervention Plan Sample

## Client Information

Name	_____	Date of Birth	_____
Assessment Date	_____	Case ID	_____

## Diagnosis

Primary: \_\_\_\_\_ (e.g., Alcohol Use Disorder, Moderate)

Secondary: \_\_\_\_\_

## Summary of Substance Use

- Substances Used: \_\_\_\_\_
- Frequency & Duration: \_\_\_\_\_
- Prior Treatments: \_\_\_\_\_
- Medical/Psychiatric History: \_\_\_\_\_

## Goals & Objectives

### Goal 1: Achieve and maintain abstinence

- Objective 1.1: Develop relapse prevention plan within 30 days
- Objective 1.2: Attend weekly individual and group therapy

### Goal 2: Improve coping and life skills

- Objective 2.1: Participate in skill-building sessions biweekly
- Objective 2.2: Identify and utilize at least 3 healthy coping strategies

## Interventions

- Cognitive Behavioral Therapy (CBT) sessions (weekly)
- Referral to medical provider for evaluation and medical management
- 12-step program participation
- Family counseling (as needed)
- Urine drug screening (randomized schedule)

## Support & Resources

- Peer support group list provided
- Community resource referral for housing/employment
- Crisis helpline contact shared

## Evaluation & Follow Up

- Progress reviewed weekly and at multidisciplinary team meetings
- Plan updated monthly or as clinically indicated

**Signatures**

<b>Client</b>	<hr/>	<b>Date</b>	<hr/>
<b>Clinician</b>	<hr/>	<b>Date</b>	<hr/>