

The Subjective Opiate Withdrawal Scale (SOWS)

Please describe how you are feeling now by circling one number for each of these statements.

	Not at all	A little	Moderately	Quite a Bit	Extremely
1. I feel anxious	0	1	2	3	4
2. I feel like yawning	0	1	2	3	4
3. I'm perspiring	0	1	2	3	4
4. My eyes are tearing	0	1	2	3	4
5. My nose is running	0	1	2	3	4
6. I have goose flesh	0	1	2	3	4
7. I am shaking	0	1	2	3	4
8. I have hot flashes	0	1	2	3	4
9. I have cold flashes	0	1	2	3	4
10. My bones and muscles ache	0	1	2	3	4
11. I feel restless	0	1	2	3	4
12. I feel nauseous	0	1	2	3	4
13. I feel like vomiting	0	1	2	3	4
14. My muscles twitch	0	1	2	3	4
15. I have cramps in my stomach	0	1	2	3	4
16. I feel like shooting up now	0	1	2	3	4

Handelsman, L., Cochrane, K. J., Aronson, M. J., & Ness, R. (1987). Two new rating scales for opiate withdrawal. *The American Journal of Drug and Alcohol Abuse*, 13(3), 293-308. Reproduced by permission.