

Alcohol

1. *At the time in your life when you were drinking the most alcohol, were you drinking it:*
- Every day, or nearly every day (5 points)
 - Three or more days a week (4 points)
 - Every weekend, or most weekends and holidays (3 points)
 - Once a week or less (2 points)
 - A few times a year, on special occasions (1 point)
 - Never (0 points)

Frequency Score

2. *When was this?*
3. *Are you drinking currently?*
4. *How long did this pattern of drinking last?*

- More than a year (3 points)
- Six months to one year (2 points)
- Less than six months (1 point)

Duration Score

(If Frequency Score = 0, 1, or 2, Score Duration as 0)

5. *During this time when you were drinking the most, how many drinks at a sitting or in a day would you typically drink?*
- Ten or more (5 points)
 - Five – ten (4 points)
 - Four – five (3 points)
 - Two – three (2 points)
 - One – two (1 point)
 - None (0 points)

Amount Score

6. *Is alcohol your drug of choice?*

Total Alcohol Score

Comments:

Age of first use

Tobacco

1. *At the time in your life when you were smoking the most (a) cigarettes or (b) cigars, were you smoking:*
- At regular intervals throughout the day, every day or most days (5 points)
 - In clusters, at specific times of day like coffee breaks or lunchtime, every day or most days (4 points)
 - Once a day, every day or most days (3 points)
 - 20 – 100 times in lifetime (2 points)
 - Fewer than 20 times in lifetime (1 point)
 - Never smoked (0 points)

Frequency Score

2. *When was this?*
3. *Are you smoking currently?*
4. *How long did this pattern of smoking last?*
- More than a year (3 points)
 - Six months to one year (2 points)
 - Less than six months (1 point)

Duration Score

(If Frequency Score = 0, 1, or 2, Score Duration as 0)

5. *How many packs per day of cigarettes would you typically smoke, at your heaviest use?*
- | | |
|--|---|
| <input type="radio"/> Two or more (5 points) | <input type="radio"/> Half a pack (2 points) |
| <input type="radio"/> One – two (4 points) | <input type="radio"/> Less than half a pack (1 point) |
| <input type="radio"/> One (3 points) | <input type="radio"/> None (0 points) |

Amount Score

6. *How many cigars per day would you typically smoke, at your heaviest use? (Not scored)*
7. *Is tobacco your drug of choice?*

Total Tobacco Score

Comments:

Age of first use

Cocaine

1. *At the time in your life when you were using the most cocaine or crack cocaine, were you using it:*

- Several times a day, every day or most days, or continuous use as long as drug is available (7 points)
- Three or more times a day, three to five days a week (6 points)
- Three or more times a day, one to three days a week (5 points)
- Once a day, every day or most days (4 points)
- More than 100 times in lifetime (3 points)
- 20 – 100 times in lifetime (2 points)
- Fewer than 20 times in lifetime (1 point)
- Never used (0 points)

Frequency Score

2. *When was this?*

3. *Are you currently using?*

4. *How long did this pattern of cocaine use last?*

- More than a year (3 points)
- Six months to one year (2 points)
- Less than six months (1 point)

Duration Score

(If Frequency Score = 0 or 1, Score Duration as 0)

5. *During this time when you were using the most cocaine, how much would you use/spend at one sitting?*

- Number of grams _____; Multiply by \$80
- Number of vials or "rocks" _____; Multiply by \$10
- Amount of money spent per day on cocaine: Total = \$

- | | | |
|--|--|--------------------------------------|
| <input type="radio"/> \$100 or more (6 points) | <input type="radio"/> \$40-59 (3 points) | <input type="radio"/> \$0 (0 points) |
| <input type="radio"/> \$80-99 (5 points) | <input type="radio"/> \$20-39 (2 points) | |
| <input type="radio"/> \$60-79 (4 points) | <input type="radio"/> \$1-19 (1 point) | |

Amount Score

7. *Is cocaine your drug of choice?*

Total Cocaine Score

Comments:

Age of first use

Heroin

1. *At the time in your life when you were using the most heroin, were you using it:*

- Several times a day, every day or most days (4 points)
- Once a day, every day or most days (3 points)
- 20 – 100 times in lifetime (2 points)
- Fewer than 20 times in lifetime (1 point)
- Never used (0 points)

Frequency Score

2. *When was this?*

3. *Are you currently using?*

4. *How long did this pattern of heroin and/or opiate use last?*

- More than a year (3 points)
 - Six months to one year (2 points)
 - Less than six months (1 point)
- Duration Score
(If Frequency Score = 0 or 1, Score Duration as 0)

5. *During this time when you were using the most heroin or opiates, how much would you typically use/spend at one sitting? (Score as doses)*

- Number of bags/packets (1 bag = 1 dose)
- Amount of money spent per day on heroin/opiates
(Dose equals dollar amount divided by 10) (Dose =)

6. *Amount Scoring*

- 10 or more doses (6 points)
- 8-9 doses (5 points)
- 6-7 doses (4 points)
- 4-5 doses (3 points)
- 2-3 doses (2 points)
- <1-1 doses (1 point)
- 0 doses (0 points)

Amount Score

8. *Is heroin your drug of choice?*

Total Heroin Score

Comments:

Age of first use