

MICHIGAN ALCOHOLISM SCREENING TEST

YES = 1
NO = 0

- 1. Do you feel you are a normal drinker? (normal drink as much or less than most other people) _____
- 2. Have you ever awakened the morning after some drinking the night before and found that you could not remember a part of the evening? _____
- 3. Does any near relative or close friend ever worry or complain about your drinking? _____
- 4. Can you stop drinking without difficulty after one or two drinks? _____
- 5. Do you ever feel guilty about your drinking? _____
- 6. Have you ever attended a meeting of Alcoholics Anonymous? _____
- 7. Have you ever gotten into physical fights when drinking? _____
- 8. Has drinking ever created problems between you and a near relative or close friend? _____
- 9. Has any family member or close friend gone to anyone for help about your drinking? _____
- 10. Have you ever lost friends because of your drinking? _____
- 11. Have you ever gotten into trouble at work because of drinking? _____
- 12. Have you ever lost a job because of drinking? _____
- 13. Have you ever neglected your obligations, your family, or your work for two or more days in a row because you were drinking? _____
- 14. Do you drink before noon fairly often? _____
- 15. Have you ever been told you have liver trouble such as cirrhosis? _____
- 16. After heavy drinking have you ever had delirium tremens (DT's), severe shaking, visual or auditory hallucinations? _____
- 17. Have you ever gone to anyone for help about your drinking? _____
- 18. Have you ever been hospitalized because of drinking? _____
- 19. Has your drinking ever resulted in your being hospitalized in a psychiatric ward? _____
- 20. Have you ever gone to any doctor, social worker, clergyman or mental health clinic for help with any emotional problem in which drinking was part of the problem? _____
- 21. Have you been arrested more than once for driving under the influence of alcohol? _____
- 22. Have you ever been arrested, even for a few hours because of other behavior while drinking? (if yes how many times _____) _____

TOTAL **0**

0-2 No apparent problem
3-5 Early or middle problem drinker
>6 Problem drinker