

The CAGE and CAGE-AID Questionnaires

(with questions regarding to drug use, include illegal drugs as well as the use of prescription drugs other than prescribed)

Do you drink alcohol? Yes No

Have you ever experimented with drugs? Yes No

In the last three months, have you felt you should cut down or stop drinking or using drugs?

Yes No

In the last three months, has anyone annoyed you or gotten on your nerves by telling you to cut down or stop drinking or using drugs?

Yes No

In the last three months, have you felt guilty or bad about how much you drink or use drugs?

Yes No

In the last three months, have you been waking up wanting to have an alcoholic drink or use drugs?

Yes No

Patient Name _____

Patient Signature _____ Date _____

