|  |  |
| --- | --- |
| Member Name:       | UCare ID #:       PMI#:       |
| Date:       |
| Care Coordinator Name:        |
| [ ]  UCare [ ]  Other Partner:       |

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**Michigan Alcohol Screening Test (MAST)**

Please check the answers to the following 22 YES or NO questions:

1. Do you feel you are a normal drinker?

("normal" - drink as much or less than most other people)

Check Answer: [ ]  YES or [ ]  NO

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?

Check Answer: [ ]  YES or [ ]  NO

3. Does any near relative or close friend ever worry or complain about your drinking?

Check Answer: [ ]  YES or [ ]  NO

4. Can you stop drinking without difficulty after one or two drinks?

Check Answer: [ ]  YES or [ ]  NO

5. Do you ever feel guilty about your drinking?

Check Answer: [ ]  YES or [ ]  NO

6. Have you ever attended a meeting of Alcoholics Anonymous (AA)?

Check Answer: [ ]  YES or [ ]  NO

7. Have you ever gotten into physical fights when drinking?

Check Answer: [ ]  YES or [ ]  NO

8. Has drinking ever created problems between you and a near relative or close friend?

Check Answer: [ ]  YES or [ ]  NO

9. Has any family member or close friend gone to anyone for help about your drinking?

Check Answer: [ ]  YES or [ ]  NO

10. Have you ever lost friends because of your drinking?

Check Answer: [ ]  YES or [ ]  NO

11. Have you ever gotten into trouble at work because of drinking?

Check Answer: [ ]  YES or [ ]  NO

12. Have you ever lost a job because of drinking?

Check Answer: [ ]  YES or [ ]  NO

13. Have you ever neglected your obligations, family, or work for two or more days in a row because you were drinking?

Check Answer: [ ]  YES or [ ]  NO

14. Do you drink before noon fairly often?

Check Answer: [ ]  YES or [ ]  NO

15. Have you ever been told you have liver trouble, such as cirrhosis?

Check Answer: [ ]  YES or [ ]  NO

16. After heavy drinking, have you ever had [delirium tremens (DTs)](http://www.nlm.nih.gov/medlineplus/ency/article/000766.htm), severe shaking, visual or auditory (hearing) hallucinations?

Check Answer: [ ]  YES or [ ]  NO

17. Have you ever gone to anyone for help about your drinking?

Check Answer: [ ]  YES or [ ]  NO

18. Have you ever been hospitalized because of drinking?

Check Answer: [ ]  YES or [ ]  NO

19. Has your drinking ever resulted in your being hospitalized in a psychiatric ward?

Check Answer: [ ]  YES or [ ]  NO

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?

Check Answer: [ ]  YES or [ ]  NO

21. Have you been arrested more than once for driving under the influence of alcohol?

Check Answer: [ ]  YES or [ ]  NO

22. Have you ever been arrested, or detained by an official for a few hours, because of other behavior while drinking?

Check Answer: [ ]  YES or [ ]  NO