The CRAFFT Screening Interview

Begin: “I’m going to ask you a few questions that I ask all my patients. Please be honest. I will keep your answers confidential.”

**Part A**

During the PAST 12 MONTHS, did you:  

<table>
<thead>
<tr>
<th>No</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Drink any <strong>alcohol</strong> (more than a few sips)? (Do not count sips of alcohol taken during family or religious events.)</td>
<td>☒</td>
</tr>
<tr>
<td>2. Smoke any <strong>marijuana</strong> or hashish?</td>
<td>☐</td>
</tr>
<tr>
<td>3. Use <strong>anything else</strong> to get high? (“anything else” includes illegal drugs, over the counter and prescription drugs, and things that you sniff or “huff”)</td>
<td>☒</td>
</tr>
</tbody>
</table>

For clinic use only: Did the patient answer “yes” to any questions in Part A?  

No ☐ Yes ☒  

Ask CAR question only, then stop  
Ask all 6 CRAFFT questions

**Part B**

<table>
<thead>
<tr>
<th>No</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Have you ever ridden in a <strong>CAR</strong> driven by someone (including yourself) who was “high” or had been using alcohol or drugs?</td>
<td>☒</td>
</tr>
<tr>
<td>2. Do you ever use alcohol or drugs to <strong>RELAX</strong>, feel better about yourself, or fit in?</td>
<td>☒</td>
</tr>
<tr>
<td>3. Do you ever use alcohol or drugs while you are by yourself, or <strong>ALONE</strong>?</td>
<td>☒</td>
</tr>
<tr>
<td>4. Do you ever <strong>FORGET</strong> things you did while using alcohol or drugs?</td>
<td>☒</td>
</tr>
<tr>
<td>5. Do your <strong>FAMILY</strong> or <strong>FRIENDS</strong> ever tell you that you should cut down on your drinking or drug use?</td>
<td>☒</td>
</tr>
<tr>
<td>6. Have you ever gotten into <strong>TROUBLE</strong> while you were using alcohol or drugs?</td>
<td>☒</td>
</tr>
</tbody>
</table>

**CONFIDENTIALITY NOTICE:**

The information recorded on this page may be protected by special federal confidentiality rules (42 CFR Part 2), which prohibit disclosure of this information unless authorized by specific written consent. A general authorization for release of medical information is NOT sufficient for this purpose.

© CHILDREN’S HOSPITAL BOSTON, 2009. ALL RIGHTS RESERVED.

Reproduced with permission from the Center for Adolescent Substance Abuse Research, CeASAR, Children’s Hospital Boston. (www.ceasar.org)
SCORING INSTRUCTIONS: FOR CLINIC STAFF USE ONLY

CRAFFT Scoring: Each “yes” response in Part B scores 1 point. A total score of 2 or higher is a positive screen, indicating a need for additional assessment.

Probability of Substance Abuse/Dependence Diagnosis Based on CRAFFT Score

![Bar Graph]

**DSM-IV Diagnostic Criteria** (Abbreviated)

**Substance Abuse (1 or more of the following):**
- Use causes failure to fulfill obligations at work, school, or home
- Recurrent use in hazardous situations (e.g. driving)
- Recurrent legal problems
- Continued use despite recurrent problems

**Substance Dependence (3 or more of the following):**
- Tolerance
- Withdrawal
- Substance taken in larger amount or over longer period of time than planned
- Unsuccessful efforts to cut down or quit
- Great deal of time spent to obtain substance or recover from effect
- Important activities given up because of substance
- Continued use despite harmful consequences

© Children’s Hospital Boston, 2009. This form may be reproduced in its exact form for use in clinical settings, courtesy of the Center for Adolescent Substance Abuse Research, Children’s Hospital Boston, 300 Longwood Ave, Boston, MA 02115, U.S.A., (617) 355-5433, www.ceasar.org.

**References:**