

# STAR/SISAP TEST

## SCREENING INSTRUMENT FOR SUBSTANCE ABUSE POTENTIAL

QUESTION	CAUTION
1. How many alcoholic drinks/day?	Men: $\geq 5$ drinks/day or $\geq 17$ /wk Women: $\geq 4$ drinks/day or $\geq 13$ /wk
2. How many alcoholic drinks/week?	
3. Use of marijuana/hashish in last year?	Admission of recent use
4. Have you ever smoked cigarettes?	Persons who are younger than 40 years and smoke
5. What is your age?	

Patient Name: \_\_\_\_\_