

MAST (Michigan Alcohol Screening Test)

The following questions are about your use of alcoholic beverages during **the past 12 months**. Carefully read each statement and decide if your answer is “Yes” or “No”. If you have difficulty with a statement, choose the response that is mostly right.

| These Questions Refer To the Last 12 Months | | Circle Your Response | |
|---|---|----------------------|--------------------|
| 1. | Do you feel that you are a normal drinker? | YES | <u>NO-2</u> |
| 2. | Do friends or relatives think you are a normal drinker? | YES | <u>NO-2</u> |
| 3. | Have you attended a meeting of Alcoholic Anonymous (AA)? | <u>YES-5</u> | NO |
| 4. | Have you lost friends or girlfriend/boyfriends because of your drinking? | <u>YES-2</u> | NO |
| 5. | Have you gotten into trouble at work because of your drinking? | <u>YES-2</u> | NO |
| 6. | Have neglected your obligations, your family, or your work for two or more days in a row because you were drinking? | <u>YES-2</u> | NO |
| 7. | Have you had delirium tremens (DT's), severe shaking, heard voices or seen things that were not there after heavy drinking? | <u>YES-2</u> | NO |
| 8. | Have you gone to anyone for help about your drinking? | <u>YES-2</u> | NO |
| 9. | Have you been in a hospital because of drinking? | <u>YES-2</u> | NO |
| 10. | Have you received a 24-hour roadside suspension or have you been charged for impaired driving? | <u>YES-2</u> | NO |
| Total Points = | | | |

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| Scoring: If the client answered any of the bolded answers above add up the number associated with that response. | |
| 0 - 9 | Probably do not have an alcohol abuse or dependency problem |
| 10 - 12 | A probable chance of having an alcohol abuse or dependency problem |
| 13 and up | A significant probability of having an alcohol abuse or dependency problem |