



Addiction Care of Excellence

An Outpatient Medical Recovery Program

Substance Use History Questionnaire				
Name		Date of Birth		
Part I: Substance Abuse History				
Substance	Ever Used? (Y or N)	Ever a Problem? (Y or N)	Age of 1 st Use	Last time used
Alcohol				
Barbiturates				
Benzodiazepines				
Caffeine				
Cocaine				
Crack				
Ecstasy				
Ephedra				
Gasoline				
Glue				
Heroin				
Other inhalants				
LSD				
Marijuana or hash				
Methadone				
Methamphetamine				
Mescaline				
Mushrooms				
Nicotine				
Nitrous Oxide				
Opiates				
Opium				
PCP				



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Peyote				
Poppers				
Prescription Drugs				
Psilocybin				
Quaaludes				
Seconaol				
Speedballs				
Steroids				
Tuinol				

How did you get started using drugs/alcohol?

When you consume alcohol, what do you usually drink

(circle)? Beer Wine Vodka Gin Tequila Whiskey Scotch Rum Other:

How many drinks do you usually have per day? _____ Per week? _____

How much (name of drug) do you usually have per day? _____

Per week? _____

How have you ingested (the drug)? Swallow Smoke Sniff Inject Mix with other

What is the best thing about getting high?

What is your favorite thing to do when drinking or using drugs?

Are there any times you tend to use these substances less? More? When?

Are there any times you have successfully stopped? When? For how long?

How much do you spend each week on your drugs/alcohol?

Do you usually drink/use drugs alone or with others? At home or elsewhere?

What time of day do you usually start using drugs/drinking? Is there a pattern to

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your use?

What effects does drinking/using drugs have on you? (circle)

Feel happier Feel more important Feel more alert Reduces physical
discomfort Increased irritability Less shy Think more clearly More creative
Have more fun Reduce stress/tension Help to sleep Relax socially
Express self more easily Avoid negative emotions (depression, anger, grief,
boredom) Forget something that happened Concentrate better

Have you ever experienced any of the following symptoms when you use drugs or
alcohol (circle)?

Seizures Blackouts Hallucinations Paranoia Personality changes
Decreased need for sleep Increased aggression Increased sexual arousal
Severe weight loss Ulcers or other stomach problems Headaches
Excessive bleeding Sinus problems Heart palpitations Suicidal thoughts
Panic attacks Memory problems Depression Loss of sex drive
Sex with strangers Other: _____

Do you or have you ever experienced any physical symptoms when you try to stop
drinking or use drugs? Yes No

If so, which ones?

Shakes/tremors Sweating Seizures Continuous vomiting Sleeplessness
Disorientation Hallucinations Depression Hypersomnia Increased appetite
Other: _____

Do you gamble when you drink or use drugs? Yes No

Is your gambling out of control or excessive? Yes No

Have you ever had an eating disorder (bulimia, anorexia, obesity)? Yes No

Part II: Family History

Which family members have had a drug or alcohol problem (circle)?

None Mother Father Brother(s) Sister(s) Stepparent



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Grandparent Uncle/Aunt

How were you affected by your family member's drug abuse?

Does anyone in your current household use drugs or drink? Yes No

If so, who?

Do most of your friends drink or use drugs? Yes No

Part III: Consequences Related to Alcohol or Drug Use

Please circle any problems that have persisted following your use of drugs or alcohol:

Hepatitis or liver problems Persistent cough Hallucinations Strange thoughts
Congestion or wheezing Heart problems Depression Mania
Loss of sex drive

Please circle any social or relationship problems that have resulted from your use of alcohol or drugs:

Arguments with spouse or partner Thrown out of house Social isolation
Arguments with parents or siblings Loss of friends Spouse or partner left you
Other: _____

Please circle any job or financial problems caused or worsened by your use of drugs or alcohol:

Lost a job Less productive at work Behind in paying bills Late to work
In debt Missed days at work Missed opportunities for raise or promotion
Other: _____

Please circle any legal problems caused or worsened by your use of alcohol or drugs:

Arrest for possession Arrest for forging prescriptions
Auto accident while intoxicated Arrested for assault
Arrested for embezzlement or forgery Arrested for selling drugs
Arrested for driving under the influence Arrested for theft or robbery



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Part IV: Treatment History	
Have you ever attended a 12-step program?	Yes No
Have you ever attended an outpatient program for drugs or alcohol?	Yes No
Have you ever been treated in an inpatient facility for drugs or alcohol?	Yes No
Have you ever been given a medication to help you abstain from drinking or using drugs?	Yes No
Have you ever been treated in an emergency room for a drug overdose or alcohol poisoning?	Yes No
Have you ever made a suicide attempt while intoxicated or using?	Yes No
What is the longest you have been able to stop drinking/using drugs?	
How were you able to remain abstinent or sober this long?	
Why do you want to stop drinking or using drugs?	
What do you think will happen if you do not stop drinking or using drugs?	

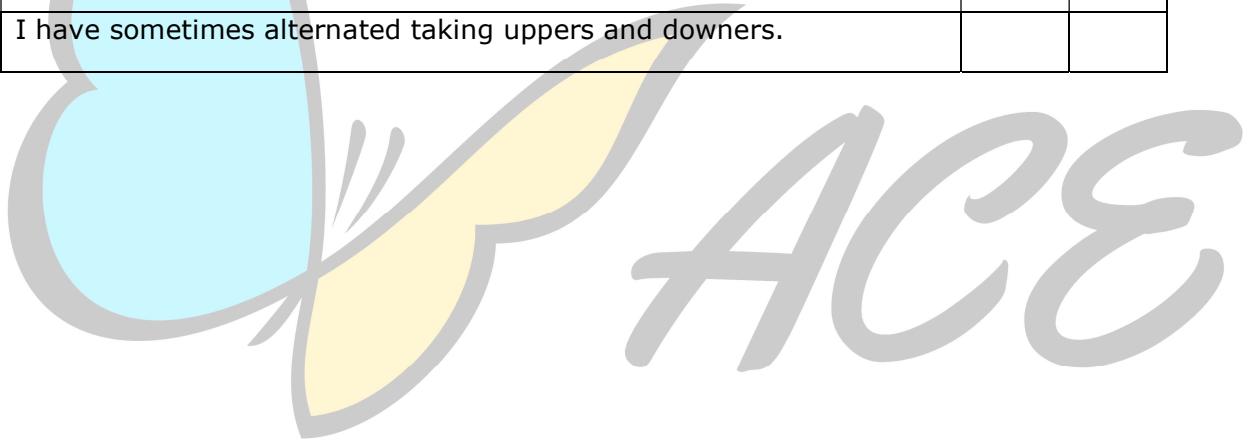
Part V: True/False Questions		
	True	False
I drink/use drugs when I feel anxious.		
I often try to hide or minimize my drinking/drug use.		
Many of my friends drink or use drugs.		
I sell, or used to sell drugs.		
I would never consider going to a 12-step program.		
Drinking or using drugs has never really caused me any problems.		
I have tried to stop using drugs/drinking in the past.		
I drink/use drugs when I feel depressed.		
When I drink, I usually get drunk.		
I feel more confident when I drink or use drugs.		
Sometimes I use drugs or drink in the morning.		
Friends or family have told me I should stop drinking or using drugs.		
I spend too much time thinking about drinking or using drugs.		



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I become very anxious if I am unable to have a drink or do drugs.		
I have never stolen in order to buy drugs or alcohol.		
I am an alcoholic.		
I am a drug addict.		
I have experienced the need to use more drugs to get the effect I had the first time I used them.		
If I stopped using drugs or drinking, I would lose many of my friends.		
I am not a religious person.		
I think better when I have a few drinks or use drugs.		
I enjoy sex more when I'm high.		
Drinking or using drugs helps me forget about my problems and relax.		
I have never used drugs and alcohol at the same time.		
I have sometimes alternated taking uppers and downers.		



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