

CAGE-AID Questionnaire

Patient Name \_\_\_\_\_ Date of Visit \_\_\_\_\_

When thinking about drug use, include illegal drug use and the use of prescription drug other than prescribed.

**Questions:** **YES** **NO**

1. Have you ever felt that you out to cut down on your drinking or drug use?		
2. Have people annoyed you by criticizing your drinking or drug use?		
3. Have you ever felt bad or guilty about your drinking or drug use?		
4. Have you ever had a drink or used drugs first thing in the morning to steady your nerves or to get rid of a hangover?		

**Scoring**

Regard one or more positive responses to the CAGE-AID as a positive screen.

Psychometric Properties

The CAGE-AID exhibited:	<b>Sensitivity</b>	<b>Specificity</b>
One or more YES responses	0.79	0.77
Two or more YES responses	0.70	0.85