The CRAFFT Questionnaire (version 2.1)

**To be completed by patient**

Please answer all questions **honestly**; your answers will be kept **confidential**.

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| **During the PAST 12 MONTHS, on how many days did you:** |
|  |
| **1.** Drink more than a few sips of beer, wine, or any drink  containing **alcohol**? Put “0” if none. # of days |
| **2.** Use any **marijuana** (weed, oil, or hash, by smoking, vaping, or in food) or “**synthetic marijuana**” (like “K2,” “Spice”) or  “vaping” **THC oil**? Put “0” if none. # of days |
| **3.** Use **anything else to get high** (like other illegal drugs, prescription or over-the-counter medications, and things  that you sniff, huff, or vape )? Put “0” if none. # of days |

**READ THESE INSTRUCTIONS BEFORE CONTINUING:**

* **If you put “0” in ALL of the boxes above, ANSWER QUESTION 4, THEN STOP.**
* **If you put “1” or higher in ANY of the boxes above, ANSWER QUESTIONS 4-9.**

|  |  |  |
| --- | --- | --- |
|  | **No** | **Yes** |
| **4.** Have you ever ridden in a **CAR** driven by someone (including yourself) who was “high” or had been using alcohol or drugs? | □ | □ |
| **5.** Do you ever use alcohol or drugs to **RELAX**, feel better about yourself, or fit in? | □ | □ |
| **6.** Do you ever use alcohol or drugs while you are by yourself, or **ALONE**? | □ | □ |
| **7.** Do you ever **FORGET** things you did while using alcohol or drugs? | □ | □ |
| **8.** Do your **FAMILY** or **FRIENDS** ever tell you that you should cut down on your drinking or drug use? | □ | □ |
| **9.** Have you ever gotten into **TROUBLE** while you were using alcohol or drugs? | □ | □ |

# NOTICE TO CLINIC STAFF AND MEDICAL RECORDS:

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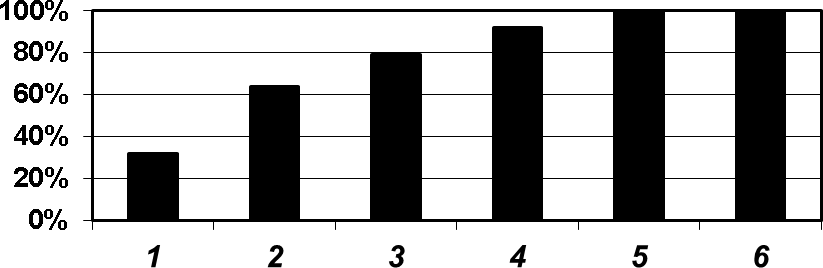
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| **The CRAFFT Interview (version 2.1)**  **To be orally administered by the clinician** | | | | |
| **Begin: “*I’m going to ask you a few questions that I ask all my patients. Please be honest. I will keep your answers confidential.*”** | | | | |
| ***Part A*** | | | | |
| **During the PAST 12 MONTHS, on how many days did you:** | | | | |
|  | | | | |
| **1.** Drink more than a few sips of beer, wine, or any drink containing  **alcohol**? Say “0” if none. | | | # of days | |
| **2.** Use any **marijuana** (weed, oil, or hash, by smoking, vaping, or in food) or “**synthetic marijuana**” (like “K2,” “Spice”) or “vaping” **THC oil**? Put “0” if none. | | | # of days | |
| **3.** Use **anything else to get high** (like other illegal drugs, prescription  or over-the-counter medications, and things that you sniff, huff, or vape)? Say “0” if none. | | | # of days | |
|  | | | | |
| **Did the patient answer “0” for all questions in Part A?** | | | | |
|  | **Yes** | **No** | |  |
|  | **Ask CAR question only, then stop** | **Ask all six CRAFFT\* questions below** | | |
| ***Part B*** | | **No** | | **Yes** |
| **C** | Have you ever ridden in a **CAR** driven by someone (including yourself) who was “high” or had been using alcohol or drugs? | | |  |
| **R** | Do you ever use alcohol or drugs to **RELAX**, feel better about yourself, or fit in? | | |  |
| **A** | Do you ever use alcohol or drugs while you are by yourself, or **ALONE**? | | |  |
| **F** | Do you ever **FORGET** things you did while using alcohol or drugs? | | |  |
| **F** | Do your **FAMILY** or **FRIENDS** ever tell you that you should cut down on your drinking or drug use? | | |  |
| **T** | Have you ever gotten into **TROUBLE** while you were using alcohol or drugs? | | |  |
|  | **\*Two or more YES answers suggest a serious problem and need for further assessment. See back for further instructions** | | | |

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| 1. **Show your patient his/her score on this graph and discuss level of risk for a substance use disorder.**   **Percent with a DSM-5 Substance Use Disorder by CRAFFT score\***  **100% 92% 100% 100%**  **80% 79%**  **64%**  **60%**  **40% 32%**  **20%**  **0%**  **CRAFFT Score**  \*Data source: Mitchell SG, Kelly SM, Gryczynski J, Myers CP, O’Grady KE, Kirk AS, & Schwartz RP. (2014). The CRAFFT cut-point and DSM-5 criteria for alcohol and other drugs: a reevaluation and reexamination. Substance Abuse, 35(4), 376–80.   1. **Use these talking points for brief counseling.** |
| 1. **REVIEW** screening results  For each “yes” response: *“Can you tell me more about that?”* |
| 2. **RECOMMEND** not to use  *“As your doctor (nurse/health care provider), my recommendation is not to use any alcohol, marijuana or other drug because they can: 1) Harm your developing brain; 2) Interfere with learning and memory, and 3) Put you in embarrassing or dangerous situations.”* |
| 3. **RIDING/DRIVING** risk counseling  *“Motor vehicle crashes are the leading cause of death for young people. I give all my patients the Contract for Life. Please take it home and discuss it with your parents/guardians to create a plan for safe rides home.”* |
| 4. **RESPONSE** elicit self-motivational statements  Non-users: *“If someone asked you why you don’t drink or use drugs, what would you say?”* Users: *“What would be some of the benefits of not using?”* |
| 5. **REINFORCE** self-efficacy  *"I believe you have what it takes to keep alcohol and drugs from getting in the way of achieving your goals."* |
| **3. Give patient Contract for Life.** Available at [www.crafft.org/contract](http://www.crafft.org/contract) |
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