



DAST Questionnaire

Name

Date of Birth

Address

.....

.....

Please tick either Yes or No. Answer all questions.

Table with 3 columns: Question, Yes, No. Contains 28 questions about drug use.

Scoring

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
Y	Y	Y	N	N	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y

For each "yes" score 1 point except for questions except 4, 5, and 7, where you give yourself 1 point for a "no" answer..

A score of 12 or more indicates in most cases, that the client/patient has a problem with drugs.

Scores between 5 and 10 suggest there may be reason for is reason for concern and further investigation and seeking help..

A score below 6 indicates there is no cause for immediate concern.