

BAM-R (BRIEF ADDICTION MONITORING-REVISED)



BAM-R Assessment (Brief Addiction Monitor)

Questions

In the past 30 days, how would you say your physical health has been?
In the past 30 days, how many nights did you have trouble falling asleep or staying asleep?
In the past 30 days, how many days have you felt depressed, anxious, angry or very upset throughout most of the day?
In the past 30 days, how many days did you drink ANY alcohol?
In the past 30 days, how many days did you have at least 5 drinks (if you are a man) or at least 4 drinks (if you are a woman)? Description: One drink is considered one shot of hard liquor (1.5 oz.) or 12-oz. can/bottle of beer or 5 oz. glass of wine.
In the past 30 days, how many days did you use any illegal or street drugs or abuse any prescription medications?



In the past 30 days, how many days did you use any of the following drugs: Marijuana (cannabis, pot, weed)? Sedatives and/or Tranquilizers (benzos, Valium, Xanax, Ativan, Ambien, barbs, Phenobarbital, downers, etc.) Cocaine and/or Crack? Other Stimulants (amphetamine, methamphetamine, Dexedrine, Ritalin, Adderall, speed, crystal meth, ice, etc.? Opiates (Heroin, Morphine, Dilaudid, Demerol, Oxycontin, oxy, codeine (Tylenol 2,3,4), Percocet, Vicodin, Fentanyl, etc.? Inhalants (glues, adhesives, nail polish remover, paint thinner, etc.)? Other drugs (steroids, non-prescription sleep and diet pills, Benadryl, Ephedra, other over-the-counter or unknown? medications) In the past 30 days, how much were you bothered by cravings or urges to drink alcohol or use of drugs? How confident are you that you will NOT use alcohol and drugs in the next 30 days? In the past 30 days, how many days did you attend self-help meetings like AA or NA to support your recovery? In the past 30 days, how many days were you in any situations or with any people that might put you at any increased risk for using alcohol or drugs (i.e. around risky, "people, places or things")? In the past 30 days, how many days did you contact or spend time with any family members or friends who are supportive of your recovery?



Does your religion or spirituality help support your recovery?
In the past 30 days, how many days did you spend much of the time at work, school, or doing volunteer work?
Do you have enough income (from legal sources) to pay for necessities such as housing, transportation, food and clothing for yourself and your dependents?
In the past 30 days, how much have you been bothered by arguments or problems getting along with any family members or friends?
How satisfied are you with your progress toward achieving your recovery goals?
In the past 30 days, how many days did you contact or spend time with any family members or friends who are supportive of your recovery?