

**C**

**HAVE YOU EVER FELT LIKE  
YOU SHOULD CUT DOWN  
ON YOUR DRINKING/USING?**

**A**

**HAVE PEOPLE ANNOYED  
YOU BY CRITICIZING  
YOUR DRINKING?**

**ASK  
YOURSELF...**

**G**

**HAVE YOU EVER FELT BAD  
OR GUILTY ABOUT WHAT  
YOU HAVE DONE / SAID  
DURING DRINKING?**

**E**

**HAVE YOU EVER HAD A DRINK  
FIRST THING IN THE MORNING  
TO STEADY YOUR NERVES OR  
TO GET RID OF A HANGOVER  
(AN EYE-OPENER)?**

**The CAGE Questionnaire is a screening test for alcohol misuse.  
Answering yes to any of these questions may indicate that a  
further assessment is needed. We are always here to help.**



**We are here to help.**

[thecounselingteam.com](https://thecounselingteam.com) | 800.222.9691

*This content is provided as a support resource and is not intended to replace recommendations from a physician or licensed mental health professional. Dial 911 for life threatening events.*

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