

**Modified Simple Screening Instrument for Substance Abuse (MSSI-SA)
Scoring Sheet**

Name/ID No: _____ Date: _____

Place/Location: _____

Name of Clinician Completing Screen: _____

Items 1 and 15 are not scored. The following items are scored as 1 (yes) or 0 (no):

___ 2	___ 7	___ 12
___ 3	___ 8	___ 13
___ 4	___ 9	___ 14
___ 5 (any items listed)	___ 10	___ 16
___ 6	___ 11	

Total score: _____ Score range: 0-14

Preliminary interpretation of responses:

Score	Degree of Risk for Substance Abuse
0-1None to low
2 -3Minimal
≥4Moderate to high: indicates need for further assessment