The Cannabis Use Disorder Identification Test - Revised (CUDIT-R)

Have you used any cannabis over the past six months? YES / NO

If YES, please answer the following questions about your cannabis use. Circle the response that is most correct for you in relation to your cannabis use *over the past six months*

	in relation to your cumius.	is use over the past six month	13		
1.	•				
	Never	Monthly or less	2-4 times a month	2-3 times a week	4 or more times a week
	0	1	2 month	3	a week
2.					
	Less than 1	1 or 2 1	3 or 4 2	5 or 6 3	7 or more 4
	· ·	1	2	3	•
3.	How often during the pa	st 6 months did you find that	t you were not able to	stop using cannabis onc	-
	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
	0	1	2	3	4
4.	How often during the past 6 months did you fail to do what was normally expected from you because of using cannab Daily or				
	Never	Less than monthly	Monthly	Weekly	Daily of
		•	•	·	almost daily
	0	1	2	3	4
5.	How often in the past 6 cannabis?	months have you devoted a g	great deal of your time	to getting, using, or rec	overing from
	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
	0	1	2	3	annost dany 4
				-	
6.	How often in the past 6 months have you had a problem with your memory or concentration after using cannabis?				
	Never	Less than monthly	Monthly	Weekly	Daily or
	110101	Less than monthly	Willing	Weekly	almost daily
	0	1	2	3	4
7.	How often do you use cannabis in situations that could be physically hazardous, such as driving, operating machinery, or caring for children:				
	Never	Less than monthly	Monthly	Weekly	Daily or
	0	Less than monthly	2	3	almost daily 4
	U	1	2	J	Т
8.	Have you ever thought about cutting down, or stopping, your use of cannabis?				
	Yes, but not in the past 6			5	Yes, during the past
	Never		months		6 months
	0		2		4

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