

**Gambling Addiction Treatment Evaluation (GATE) Project in Tennessee**

Institute for Substance Abuse Treatment Evaluation (I-SATE), The University of Memphis

**Scoring Sheet for Admission Questionnaire (July 1, 2006 version)**

Client Case # \_\_\_\_\_ Date of Admission \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Client's Name \_\_\_\_\_ Interviewer's Name \_\_\_\_\_  
Last First Middle Last First Middle

**Section B: South Oaks Gambling Screen (SOGS)**

Scores are determined by adding up the number of questions that show an "at risk" response, indicated as follows.

Questions 1-3 are not counted.

- \_\_\_ Question 4: most of the time I lost, or every time lost
- \_\_\_ Question 5: yes, less than half the time I lose, or yes, most of the time
- \_\_\_ Question 6: yes, in the past, but not now, or yes
- \_\_\_ Question 7: yes
- \_\_\_ Question 8: yes
- \_\_\_ Question 9: yes
- \_\_\_ Question 10: yes
- \_\_\_ Question 11: yes
- Question 12 is not counted
- \_\_\_ Question 13: yes
- \_\_\_ Question 14: yes
- \_\_\_ Question 16: yes

- \_\_\_ Question 17a: yes
- \_\_\_ Question 17b: yes
- \_\_\_ Question 17c: yes
- \_\_\_ Question 17d: yes
- \_\_\_ Question 17e: yes
- \_\_\_ Question 17f: yes
- \_\_\_ Question 17g: yes
- \_\_\_ Question 17h: yes
- \_\_\_ Question 17i: yes

Questions 17j and 17k are not counted

Total = \_\_\_\_\_ (20 questions are counted)

3 or 4 = potential pathological gambler (problem gambler)  
5 or more = probable pathological gambler

Probable Diagnosis \_\_\_\_\_  
\_\_\_\_\_

**Section C: DSM IV**

Unfortunately there is no real scoring key for the DSM-IV assessment tool. However the prevailing wisdom in the literature is that five or more positive, or "yes" responses indicates a diagnosis of Pathological Gambling while 1-4 symptoms may be an indicative of Problem Gamblers.

Probable Diagnosis \_\_\_\_\_

**Section D: Alcohol Abuse Screen**

If the client has responded *Very True* or *Somewhat True* for any of the questions 1, 2, or 3, then circle Yes:

Positive Alcohol Screen                      Yes      No

Comments \_\_\_\_\_  
\_\_\_\_\_

**Section E: Drug Abuse Screen**

If the client has responded *Very True* or *Somewhat True* for any of the questions 1, 2, or 3, then circle Yes:

Positive Drug Screen                              Yes      No

Comments \_\_\_\_\_  
\_\_\_\_\_

**Section F: Smoking Screen**

If the client has responded Yes for any of the questions 1 or 2, then circle Yes:

Positive Smoking Screen                      Yes      No

Comments \_\_\_\_\_  
\_\_\_\_\_

**Section G: Depression Screen**

If the client has responded *Very True* or *Somewhat True* for any of the questions 1 or 2, then circle Yes:

Positive Depression Screen                      Yes      No

Comments \_\_\_\_\_  
\_\_\_\_\_

**Comments from the Interviewer** \_\_\_\_\_  
\_\_\_\_\_