

### 30. USE PATTERN CHART

Drug Classes		Used in this period?	Total Days	1	2	3	Oral Ingest	Smoke	Nasal Inhaled	Needle	Other
Alcohol	al							----	----	----	
Marijuana/ Cannabis	ma									----	
Tranquilizers	tr							----	----		
Sedatives/ Downers	do							----	----		
Steroids	sd							----	----		
Stimulants/ Uppers	up										
Cocaine	co										
Hallucinogens	ha										
Opiates	op										
Inhalants	in						----	----		----	
Other Drugs	xx										
<b>Totals</b>	<b>12</b>										

Tobacco	to									----	
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Use Categories: 1 = Single use      2 = Several uses      3 = Steady or heavier use

Enter days of each type of use. 1+2+3 must equal Total Days of use.

Enter days of each route of administration (use rules from manual). These must total at least to the number of days of use, but total may be higher if multiple routes of administration were used on the same day. If OTHER route of administration, specify drug(s) and route here: