

Impaired Driver System (IDS) Quick Reference

For full instruction, please refer to the IDS User Manual

Screening Fields

*Screening Date	*Assessment Recommended	*Screening Tool Used	Other
<input type="text"/> <small>(mm/dd/yyyy)</small>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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- 1. Screening Date** – Indicates the date that the screening was conducted.
- 2. Assessment Recommended** – Represents the clinician’s determination that the client may need a full comprehensive assessment to determine whether or not there is evidence of an abuse or dependence diagnosis. The available drop down menu options are:
 - Yes
 - No
- 3. Screening Tool Used** – Indicates which screening instrument was administered to the client. IDS offers a list of the five screening tools recommended for use by OASAS approved providers but also provides an opportunity for the clinician to indicate the name of another screening instrument they have chosen to use instead. The available drop down menu options are:
 - The RIA Self Inventory (RIASI)
 - The AUDIT Alcohol Screening Test
 - Michigan Alcohol Screening Test for Alcohol and Drug (MAST/AD)
 - Simple Screening Instrument (SSI)
 - Drug Abuse Screening Test (DAST)
 - Other (You will be required to enter the name of the screening tool used) in the next field.
- 4. Other** – If “Other” is selected for **Screening Tool Used**, this field provides space for entry of the name of the screening tool used.