

“Audit” Questionnaire

Plases circle the answer that is correct for you

1. How often do you have a drink containing alcohol?

Never (0) Monthly or less (1) 2-4/month (2) 2-3/week (3) 4-7/week (4)

2. How many drinks containing alcohol do you have on a typical day when you are drinking?

1 or 2 (0) 3 or 4 (1) 5 or 6 (2) 7 to 9 (3) 10 or more (4)

3. How often do you have six or more drinks on one occasion?

Never (0) Less than monthly (1) Monthly (2) Weekly (3) Daily/almost (4)

4. How often during the last year have you found that you were not able to stop drinking once you had started?

Never (0) Less than Monthly (1) Monthly (2) Weekly (3) Daily/almost (4)

5. How often during the last year have you failed to do what was normally expected from you because of drinking?

Never (0) Less than monthly (1) Monthly (2) Weekly (3) Daily/almost (4)

6. How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?

Never (0) Less than monthly (1) Monthly (2) Weekly (3) Daily/almost (4)

7. How often during the last year have you had a feeling of guilt or remorse after drinking?

Never (0) Less than monthly (1) Monthly (2) Weekly (3) Daily/almost (4)

8. How often during the last year have you been unable to remember what happened the night before because you had been drinking?

Never (0) Less than monthly (1) Monthly (2) Weekly (3) Daily/almost (4)

9. Have you or someone else been injured as a result of your drinking?

No (0) Yes but not in the last year (2) Yes, during the last year (4)

10. Has a relative or friend, or a doctor or other health worker been concerned about your drinking or suggested you cut down?

No (0) Yes but not in the last year (2) Yes, during the last year (4)

APPENDIX 1: HOW TO USE THE AUDIT QUESTIONNAIRE

1. Patients tend to answer most accurately when
 - The interviewer is friendly and non-threatening
 - The purpose of the questions is clearly related to a diagnosis of their health status
 - The patient is alcohol- and drug-free at the time of the screening
 - The information is considered confidential
 - The questions are easy to understand
2. Try to interview patients under the best possible circumstances. For patients requiring emergency treatment or who are severely impaired, it is best to wait until their condition has stabilized and they have become accustomed to the health setting where the interview is to take place.
3. Look for signs of alcohol or drug intoxication. Patients who have alcohol on their breath or who appear intoxicated may be unreliable respondents. Consider conducting the interview at a later time. If this is not possible, make note of these findings on the patient's record.
4. The best way to introduce the AUDIT questions is to give the patient a general idea of the content of the questions, the purpose for asking them, and the need for accurate answers. The following is an illustrative introduction: "Now I am going to ask you some questions about your use of alcoholic beverages during the past year. Because alcohol use can affect many areas of health (and may interfere with certain medications), it is important for us to know how much you usually drink and whether you have experienced any problems with your drinking. Please try to be as honest and as accurate as you can be." This statement should be followed by a description of the types of alcoholic beverages typically consumed in the population to which the patient belongs (e.g., "By alcoholic beverages we mean your use of wine, beer, vodka, sherry, etc.") If necessary, include a description of beverages that may not be considered alcoholic, e.g., cider, low alcohol beer, etc. . . .
5. It is important to read the questions as written and in the order indicated. By following the exact wording, better comparability will be obtained between your results and those obtained by other interviewers.

APPENDIX 1: HOW TO SCORE THE AUDIT QUESTIONNAIRE

Total score:

Add up the score (in brackets on the questionnaire) from questions 1 to 10

There are no definite cut-off scores.

A total score of 8 or more suggests a pattern of **hazardous or harmful alcohol consumption**.

A total score of 13 or more suggests **alcohol dependency**.

These should be confirmed by checking the responses and by asking some supplementary questions.

Subscale score:

Questions 1 to 3:

A combined score of ≥ 4 for women or ≥ 5 for men suggests **hazardous drinking**.

Questions 4 to 6

A combined score of 4 or more suggests **psychological or physical dependence on alcohol**.

Questions 7 to 10

A combined score of 4 or more suggests **significant alcohol-related problems**.