



Alcohol Use Disorders Identification Test (AUDIT)

NAME: AUDIT Example

DATE: Oct 16 2017

DOB: Jun 17 1975

INSTRUMENT

The Alcohol Use Disorders Identification Test (AUDIT) is a 10-item screening tool developed by the World Health Organization (WHO) to assess alcohol consumption, drinking behaviors, and alcohol-related problems.

A score of 8 or more is considered to indicate hazardous or harmful alcohol use. The AUDIT has been validated across genders and in a wide range of racial/ethnic groups and is well-suited for use in primary care settings.

BRIEF EDUCATION:

An opportunity to educate patients about low-risk consumption levels and the risks of excessive alcohol use.

BRIEF INTERVENTION:

Patient-centered discussion that employs Motivational Interviewing concepts to raise an individual's awareness of his/her substance use and enhancing his/her motivation towards behavioral change. Brief interventions are typically performed in 3-15 minutes, and should occur in the same session as the initial screening. Repeated sessions are more effective than a one-time intervention.

The recommended behavior change is to cut back to low-risk drinking levels unless there are other medical reasons to abstain (liver damage, pregnancy, medication contraindications, etc.).

Patients with numerous or serious negative consequences from their drinking, or patients with likely dependence who cannot or will not obtain conventional specialized treatment, should receive more numerous and intensive interventions with follow up. The recommended behavior change in this case is to either cut back to low-risk drinking levels or abstain from use.

REFERRAL TO SPECIALIZED TREATMENT:

A proactive process that facilitates access to specialized care for individuals who have been assessed to have substance use dependence. These patients are referred to alcohol and drug treatment experts for more definitive, in-depth assessment and, if warranted, treatment. The recommended behavior change is to abstain from use and accept the referral.

SCORING

(36) Zone IV - Dependent

Referral to specialized treatment

SURVEY ANSWERS

How often do you have a drink containing alcohol?	2 - 3 times a week
How many drinks containing alcohol do you have on a typical day when you are drinking?	10 or more
How often do you have six or more drinks on one occasion?	Daily or almost daily
How often during the last year have you found that you were not able to stop drinking once you had started?	Daily or almost daily
How often during the last year have you failed to do what was normally expected of you because of drinking?	Weekly
How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?	Weekly
How often during the last year have you had a feeling of guilt or remorse after drinking?	Daily or almost daily
How often during the last year have you been unable to remember what happened the night before because of your drinking?	Weekly
Have you or someone else been injured because of your drinking?	Yes, in the last year
Has a relative, friend, doctor, or other health care worker been concerned about your drinking or suggested you cut down?	Yes, in the last year
Have you ever been in treatment for an alcohol problem?	In the past
What is your sex?	Female