# **Kiveton Park Primary Care Centre Patient Alcohol Questionnaire**

### **Patients Details**

Name		
Date of Birth	/,	/

# AUDIT – C

Questions	Scoring system					Your
	0	1	2	3	4	score
How often do you have a drink containing alcohol?	Never	Monthly or less	2 - 4 times per month	2 - 3 times per week	4+ times per week	
How many <b>units</b> of alcohol do you drink on a typical day when you are drinking?	1 -2	3 - 4	5 - 6	7 - 9	10+	
How often have you had 6 or more <u>units</u> if female, or 8 or more if male, on a single occasion in the last year?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	

### .Scoring:

A total of 5+ indicates increasing or higher risk drinking. An overall total score of 5 or above is AUDIT-C positive.



## Please continue over page if you score 5 or above

### Score from AUDIT- C (other side)

Carried over from other side

SCORE

### **Remaining AUDIT questions**

Questions	Scoring system				Your score	
Questions	0	1	2	3	4	four score
How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you failed to do what was normally expected from you because of your drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you needed an alcoholic drink in the morning to get yourself going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you had a feeling of guilt or remorse after drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you been unable to remember what happened the night before because you had been drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
Have you or somebody else been injured as a result of your drinking?	No		Yes, but not in the last year		Yes, during the last year	
Has a relative or friend, doctor or other health worker been concerned about your drinking or suggested that you cut down?	No		Yes, but not in the last year		Yes, during the last year	

FOR HEALTH CARE STAFF: Please do the following when you have completed the Audit

### Scoring and protocols

- **0** Reinforce that not drinking is good for patient's health;
- 1 7 Lower risk; Use it to signpost upper limits to this category; Code "Alcohol intake within sensible limits"
- **8 –15 Increasing risk**: Give information leaflet/advice to patient; Code "brief intervention completed"
- **16–19 Higher risk**: Give leaflet/advice to patient, then; Code "Harmful alcohol use & brief intervention completed" but also send invitation to see Practice Alcohol Counsellor.

### 20+ Possible dependence: Give leaflet to patient, then; Code "Brief intervention completed" and send invitation to see practice alcohol worker; Pass to usual GP, to consider discretionary 'possible dependence' code.

