

Alcohol Users Disorders Identification Test (AUDIT) C

Patients Name:

D.O.B

Ethnicity

1st Language Spoken

PLEASE CIRCLE YOUR ANSWER

QUESTIONS	0	1	2	3	4	
How often do you have a drink that contains alcohol?	Never	Monthly or less	2 - 4 times per month	2 - 3 times per week	4+ times per week	
How many standard alcoholic drinks do you have on a typical day when you are drinking?	1 - 2	3 - 4	5 - 6	7-8	10 +	
How often do you have 6 or more standard drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	