



Alcohol Use Disorders Identification Test (AUDIT)

www.drugabuse.gov/sites/default/files/audit.pdf

Resource summary: This validated screening tool was designed by WHO to assess alcohol misuse. The modified version is useful for screening older adults, using a lower cutoff score than used for general adult populations. The adapted provider interview and client self-report versions are included here.

Alcohol Use Disorders Identification Test (AUDIT): Interview Version

Read questions as written. Record answers carefully. Begin the AUDIT by saying “Now I am going to ask you some questions about your use of alcoholic beverages during this past year.” Explain what is meant by “alcoholic beverages” by using local examples of beer, wine, vodka, etc. Code answers in terms of “standard drinks.” Place the correct answer number in the box at the right.

<p>1. How often do you have a drink containing alcohol?</p> <p>(0) Never [Skip to Qs 9-10] (1) Monthly or less (2) 2 to 4 times a month (3) 2 to 3 times a week (4) 4 or more times a week</p> <p style="text-align: right;"><input type="text"/></p>	<p>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?</p> <p>(0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily</p> <p style="text-align: right;"><input type="text"/></p>	
<p>2. How many drinks containing alcohol do you have on a typical day when you are drinking?</p> <p>(0) 1 or 2 (1) 3 or 4 (2) 5 or 6 (3) 7, 8, or 9 (4) 10 or more</p> <p style="text-align: right;"><input type="text"/></p>	<p>7. How often during the last year have you had a feeling of guilt or remorse after drinking?</p> <p>(0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily</p> <p style="text-align: right;"><input type="text"/></p>	
<p>3. How often do you have six or more drinks on one occasion?</p> <p>(0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily</p> <p><i>Skip to Questions 9 and 10 if Total Score for Questions 2 and 3 = 0</i></p> <p style="text-align: right;"><input type="text"/></p>	<p>8. How often during the last year have you been unable to remember what happened the night before because you had been drinking?</p> <p>(0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily</p> <p style="text-align: right;"><input type="text"/></p>	
<p>4. How often during the last year have you found that you were not able to stop drinking once you had started?</p> <p>(0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily</p> <p style="text-align: right;"><input type="text"/></p>	<p>9. Have you or someone else been injured as a result of your drinking?</p> <p>(0) No (2) Yes, but not in the last year (4) Yes, during the last year</p> <p style="text-align: right;"><input type="text"/></p>	
<p>5. How often during the last year have you failed to do what was normally expected from you because of drinking?</p> <p>(0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily</p> <p style="text-align: right;"><input type="text"/></p>	<p>10. Has a relative or friend or a doctor or another health worker been concerned about your drinking or suggested you cut down?</p> <p>(0) No (2) Yes, but not in the last year (4) Yes, during the last year</p> <p style="text-align: right;"><input type="text"/></p>	
Record total of specific items here		<input type="text"/>
<p>Scoring: The cutoff score indicating hazardous and harmful alcohol use for the AUDIT is generally 8; however, for older adults a score of 5 indicates a need for clarifying questions and further assessment.¹⁴⁵¹</p> <p><i>Adapted from Barbor et al. (2001).¹⁴⁵²</i></p>		

Alcohol Use Disorders Identification Test (AUDIT): Self-Report Version

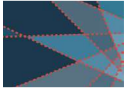
CLIENT: Alcohol use can affect your health and interfere with some medications and treatments, so it's important that we ask some questions about your alcohol use. Your answers will remain confidential; please be honest.

Place an X in one box that best describes your answer to each question.

Questions	0	1	2	3	4	
1. How often do you have a drink containing alcohol?	Never	Monthly or less	2-4 times a month	2-3 times a week	4 or more times a week	
2. How many drinks containing alcohol do you have on a typical day when you are drinking?	1 or 2	3 or 4	5 or 6	7 to 9	10 or more	
3. How often do you have six or more drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
4. 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	
5. How often during the last year have you failed to do what was normally expected of you because of drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
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	Less than monthly	Monthly	Weekly	Daily or almost daily	
7. 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	
8. How often during the last year have you been unable to remember what happened the night before because of your drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
9. Have you or someone else been injured because of your drinking?	No		Yes, but not in the last year		Yes, during the last year	
10. Has a relative, friend, doctor, or other health care worker been concerned about your drinking or suggested you cut down?	No		Yes, but not in the last year		Yes, during the last year	
					Total	

Adapted from Barbor et al. (2001).¹⁴⁵³

Provider Note: The self-report version should be given to older clients to fill out. Ask them to return it to you, and then discuss the results with them. A cutoff score of 5 means you need to assess further.¹⁴⁵⁴



Alcohol Use Disorders Identification Test-C (AUDIT-C)

Resource summary: The AUDIT-C is a much shorter version of the AUDIT that can help you identify alcohol misuse in your clients. It contains only three questions, which add up to a total score of 0–12. A higher score usually means the client is engaging in more hazardous alcohol use. The AUDIT-C is scored as follows:

- For Questions 1 and 3, assign 0 points to response a, 1 point to response b, 2 points to response c, 3 points to response d, and 4 points to response e.
- For Question 2, assign 0 points to responses a and b, 1 point to response c, 2 points to response d, 3 points to response e, and 4 points to response f.

A total score of 3 or higher for women and 4 or higher for men means problematic alcohol use. In such cases, you should assess further (or refer for formal assessment) to learn more about the client’s drinking habits and determine whether AUD is present. Learn more about the AUDIT-C, including how to score and interpret results, at www.queri.research.va.gov/tools/alcohol-misuse/alcohol-faqs.cfm#top.

Alcohol Use Disorders Identification Test-C (AUDIT-C)

Patient Name: _____	Date: _____
<p>1. How often do you have a drink containing alcohol?</p> <p><input type="checkbox"/> a. Never</p> <p><input type="checkbox"/> b. Monthly or less</p> <p><input type="checkbox"/> c. 2-4 times a month</p> <p><input type="checkbox"/> d. 2-3 times a week</p> <p><input type="checkbox"/> e. 4 or more times a week</p>	
<p>2. How many drinks containing alcohol did you have on a typical day when you were drinking in the past year?</p> <p><input type="checkbox"/> a. 0 drinks</p> <p><input type="checkbox"/> b. 1 or 2</p> <p><input type="checkbox"/> c. 3 or 4</p> <p><input type="checkbox"/> d. 5 or 6</p> <p><input type="checkbox"/> e. 7 to 9</p> <p><input type="checkbox"/> f. 10 or more</p>	
<p>3. How often do you have six or more drinks on one occasion?</p> <p><input type="checkbox"/> a. Never</p> <p><input type="checkbox"/> b. Less than monthly</p> <p><input type="checkbox"/> c. Monthly</p> <p><input type="checkbox"/> d. Weekly</p> <p><input type="checkbox"/> e. Daily or almost daily</p>	
<p><i>Adapted from material in the public domain.^{1455,1456}</i></p>	