

The Alcohol Use Disorders Identification Test: Self-Report Version Retrospective Survey for Change in Caregiver

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

Please circle the response that best describes how you **would have answered each question before beginning services.**

Questions	0	1	2	3	4
1. How often did 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 did you have on a typical day when you were drinking?	1 or 2	3 or 4	5 or 6	7 to 9	10 or more
3. How often did you have six or more drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
4. How often in the month before beginning services had 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 in the month before beginning services did you fail to do what was normally expected of you because of drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
6. How often in the month before beginning services did you need 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 in the month before beginning services did you have a feeling of guilt or remorse after drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
8. How often in the month before beginning services were you unable to remember what happened the night before because of your drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
9. Had you or someone else been injured because of your drinking?	No		Yes, but not in the last 30 days		Yes, during the last 30 days
10. Had 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 30 days		Yes, during the last 30 days
Total					