Audit-C Questionnaire

Patient Name:	Date of Birth:	Date of Visit:	
13 - 5 1 1			

- 1. How often do you have a drink containing alcohol?
 - o Never
 - o Monthly or Less
 - o 2-4 times a month.
 - o 2-3 times a week
 - o 4 or more times a week
- 2. How many standard drinks containing alcohol do you have on a typical day?
 - o 1 or 2
 - o 3 or 4
 - o 5 or 6
 - o 7 to 9
 - o 10 or more
- 3. How often do you have six or more drinks on one occasion?
 - o Never
 - o Less then monthly
 - o Monthly
 - o Weekly
 - o Daily or almost daily

The AUDIT-C is scored on a scale of 0-12 (scores of 0 reflect no alcohol use). In men, a score of 4 or more is considered positive; in women, a score of 3 or more is considered positive. Generally, the higher the AUDIT-C score, the more likely it is that the patient's drinking is affecting his/her health and safety.

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Audit-C Questionnaire Spanish

Nombre: Fecha de nacimiento: Fecha d	Hoy:
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- 1. Con que frecuencia consume alguna bebida alcoholica?
 - o Nunca
 - Una o menos veces al mes
 - o 2 a 4 veces al mes
 - o 2 o 3 veces a la semana
 - o 4 o mas veces a la semana
- 2. Cuantas consumiciones de bebidas alcoholicas suele realizar en un dia de consumo normal?
 - 0 102
 - 0 304
 - 0 506
 - o 7a9
 - o 10 o mas
- 3. Con que frecuencia toma 6 o mas bebidas alcoholicas en un solo dia?
 - o nunca
 - o menos de una vez al mes
 - o mensualmente
 - o semanalmente
 - o a diario o casi a diario

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