

Name: _____

FAST ALCOHOL SCREENING TEST

We are offering a simple screening programme to all new patients to assess drinking patterns. Please **circle** the answer which best applies:

1 drink = ½ pint of beer or 1 glass of wine or 1 single spirits

MEN: How often do you have EIGHT or more drinks on one occasion? WOMEN: How often do you have SIX or more drinks on one occasion?				
0 Never	1 Less than monthly	2 Monthly	3 Weekly	4 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?				
0 Never	1 Less than monthly	2 Monthly	3 Weekly	4 Daily or almost daily
How often during the last year have you failed to do what was normally expected of you because of drinking?				
0 Never	1 Less than monthly	2 Monthly	3 Weekly	4 Daily or almost daily
In the last year has a relative or friend, or a doctor or other health worker been concerned about your drinking or suggested you cut down?				
0 No	2 Yes, on one occasion		4 Yes, on more than one occasion	
TOTAL SCORE:				

If you have any concerns about your, or someone else's, drinking habits, please do not hesitate to make an appointment to discuss this with your doctor.