

AUDIT – Screening Tool (World Health Organisation)

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 within the Substance Misuse Service, so please be honest. In event that these results need to be shared as part of your care plan, we will discuss with you why sharing is necessary, seek your consent to share and ask you to sign a Release of Information Form. You may refuse at any time to have these results shared.

For each question in the chart below, please X in one box that best describes your answers as per the Irish Standard Drinks.

Standard Drink Guidance (HRB)

Ireland’s standard drink contains 10 grams of pure alcohol. Examples are: <div style="text-align: center;"> A pub measure of spirits (35.5ml) A small glass of wine (100ml & 12.5% volume) Half pint of normal beer/cider An Alco-pop (275ml bottle) </div>			
	Millilitre	% Alcohol	No. Standards Drink (Rounded to the nearest whole number)
Bottle			
Wine	750ml	12.5	7
Vodka	700ml	37.5	21
Brandy	700ml	40	22
Whiskey	700ml	40	22
Gin	700ml	38	21
NAGGIN			
Vodka	175ml	37.5	5
Brandy	175ml	40	6
Whiskey	175ml	40	6
Gin	175ml	38	5
FLAGGON			
Cider	2 Litres	4.5	7

AUDIT Questions Classifications
Questions 1 – 3 assesses drinking behaviour
Questions 4 – 6 assesses dependence
Questions 7 – 10 assesses consequences or problems related to drinking

	Questions	0	1	2	3	4	Score Totals	Sub Scores
1	How often do you have a drink containing alcohol?	NEVER	Monthly or less	2 to 4 times a month	2 to 3 times a week	4 or more times a week		
2	How many standard 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 5 or more drinks in 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 started?	NEVER	Less than monthly	Monthly	Weekly	Daily or almost daily		
5	How often in 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 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 last year		Yes, during the last year		
Total								

AUDIT Scoring Guidance

Scoring the AUDIT

- The columns in the AUDIT are scored from left to right.
- **Questions 1 to 8** are scored on a five-point scale from **0, 1, 2, 3, and 4**.
- **Questions 9 & 10** are scored on a three-point scale from **0, 2 and 4**.
- Record the score for each question in the **“score”** column on the right, including a zero for questions **2 to 8** if ‘skipped’.
- Record a total score in the **“TOTAL”** box at the bottom of the column.
The maximum score is 40.

Consumption score

- Add up **questions 1 to 3** and place this sub-score in the adjacent single box in the far right column (maximum score possible = 12). A score of 6 or 7 may indicate a risk of alcohol-related harm, even if this is also the total score for the AUDIT (e.g. consumption could be over the recommended weekly intake of 28 for men and 14 for females in the absence of scoring on any other questions).
- Scores of 6 to 7 may also indicate potential harm for those groups more susceptible to the effects of alcohol, such as young people, women, the elderly, people with mental health problems and people on medication. Further inquiry may reveal the necessity for harm reduction advice.

Dependence score

- Add up **questions 4 to 6** and place this sub-score in the adjacent single box in the far right column (maximum score possible = 12). In addition to the total AUDIT score, a secondary ‘dependence’ score of 4 or more as a subtotal of questions 4 to 6, suggests the possibility of alcohol dependence (and therefore the need for more intensive intervention if further assessment confirms dependence).

Alcohol-related problems score

Any scoring on **questions 7 to 10** warrants further investigation to determine whether the problem is of current concern and requires intervention.

AUDIT Total Score	Dependence Score	Risk Level	Possible Interventions
0 – 7	0 – 7	Low-risk	Harm reduction advice may be appropriate for those in susceptible groups (see consumption scores above)
8 -15	Below 4	Risky or hazardous Level Moderate risk of harm. May include some clients currently experiencing harm (especially those who have minimised their reported intake and problems).	Brief Intervention - Feedback of AUDIT and harm reduction advice may be sufficient. Ideally also: <ul style="list-style-type: none"> ○ Setting goals and limits ○ A motivational interview ○ Self-monitoring of drinking ○ Counselling may be required

	Above 4	Assess for dependency	
16 - 19	Below 4	High-risk or harmful level. Drinking that will eventually result in harm, if not already doing so.	<ul style="list-style-type: none"> • Brief Intervention (all components) is a minimum requirement. • Assessment for more intensive intervention. • Counselling using CBT principles and motivational interviewing in individual sessions and/or in groups. • Follow-up and referral where necessary.
	Above 4	May be dependent. Assess for dependence	
20 or more	Below 4	High-risk Definite harm, also likely to be alcohol dependent. Assess for dependence. .	<ul style="list-style-type: none"> • Further assessment preferably including family and significant others. • More intensive counselling and/or group program. • Consider referral to GP or Tier 4 services for withdrawal management. • Pharmacotherapy to manage cravings. • Relapse prevention, longer-term follow-up and support
	4 or more	Almost certainly dependent. Assess for dependency	