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Patient Health Questionnaire (AUDIT-C)

Name: _____

Date of Visit: _____

1. -Did you have a drink containing alcohol in the past year?

- Yes
 No

If "yes": How often did you have a drink containing alcohol in the past year?

- Never (0 point)
 Monthly or less (1 point)
 2 to 4 times a month (2 points)
 2 to 3 times a week (3 points)
 4 or more times a week (4 points)

If "yes": How many drinks did you have on a typical day when you were drinking in the past year?

- 1 or 2 drinks (0 point)
 3 or 4 drinks (1 point)
 5 or 6 drinks (2 points)
 7 to 9 drinks (3 points)
 10 or more drinks (4 points)

If "yes": How often did you have 6 or more drinks on one occasion in the past year?

- Never (0 point)
 Less than monthly (1 point)
 Monthly (2 points)
 Weekly (3 points)
 Daily or almost daily (4 points)

Interpretation

- Positive
 Negative

Interpretation

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 a positive.
- In women, a score of 3 or more is considered positive.