





Alcohol Use Disorders Identification Test (AUDIT)

Directions: Place the number that corresponds to your answer for each question to in the blank box. When you are finished, add up the scores for each question and place that number in the blank box next to **Total**. For a guideline of what a standard drink is equivalent to, see the following page. An explanation of your score is given on the third page.

Questions	0	1	2	3	4	
1. How often do 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 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 six or more drinks on 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 had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
5. How often during 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 the 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 the last year		Yes, during the last year	
					Total	

STANDARD DRINK EQUIVALENTS	APPROXIMATE NUMBER OF STANDARD DRINKS IN:
BEER or COOLER	
<p>12 oz.</p>  <p>~5% alcohol</p>	<p>12 oz. = 1 16 oz. = 1.3 22 oz. = 2 40 oz. = 3.3</p>
MALT LIQUOR	
<p>8-9 oz.</p>  <p>~7% alcohol</p>	<p>12 oz. = 1.5 16 oz. = 2 22 oz. = 2.5 40 oz. = 4.5</p>
TABLE WINE	
<p>5 oz.</p>  <p>~12% alcohol</p>	<p>a 750 mL (25 oz.) bottle = 5</p>
80-proof SPIRITS (hard liquor)	
<p>1.5 oz.</p>  <p>~40% alcohol</p>	<p>a mixed drink = 1 or more* a pint (16 oz.) = 11 a fifth (25 oz.) = 17 1.75 L (59 oz.) = 39</p> <p>*Note: Depending on factors such as the type of spirits and the recipe, one mixed drink can contain from one to three or more standard drinks.</p>

What Does My Score Mean?

Score	Risk Zone	Risk Description	Suggested Action
Men: 0-4 Women: 0-3	Low Risk	Low risk of health problems related to alcohol use	Continue to practice safe drinking behaviors
Men: 5-14 Women: 4-12	Risky	Increased risk of health problems related to alcohol use	Reduce drinking level to that considered low risk; consult health provider if needed
Men: 15-19 Women 13-19	Harmful	Increased risk of health problems related to alcohol use and a possible mild or moderate alcohol use disorder	Consultation with a health provider is recommended
Men: 20+ Women: 20+	Severe	Increased risk of health problems related to alcohol use and a possible moderate or severe alcohol use disorder	Consultation with a health provider is highly recommended

If you believe you need help, please access the resources found on the Buffalo County Community Partners website at <https://bcchp.org>.