

酒精篩查問卷

(AUDIT – Cantonese – traditional)

我哋嘅診所每年至少詢問所有患者一次飲酒情況。

飲酒會影響您的健康以及您可能服用的一些藥物。

請回答以下問題，幫助我們為您提供最好的醫療服務。

杯嘢飲等於：



12盎司
啤酒



5盎司
酒



1.5盎司
酒

1. 你幾耐飲一次含酒精嘅嘢飲？	從不	每月或更少	2 - 4 每月次	2 - 3 每周1次	每周4 次或以上
2. 你通常每日飲幾多杯含酒精嘅嘢飲？	0 - 2	3 or 4	5 or 6	7 - 9	10 個或更多
3. 你一次飲四杯或更多杯酒嘅頻率係幾多？	從不	少於 每月	每月	周刊	每日或 幾乎 每日
4. 在過去一年中， 你發現開始飲酒後無法戒酒嘅頻率係幾多？	從不	少於 每月	每月	周刊	每日或 幾乎 每日
5. 在過去的一年中， 您有多少次因為飲酒而沒有按照通常的期望去做？	從不	少於 每月	每月	周刊	每日或 幾乎 每日
6. 舊年幾耐一次 你需要早上嘅第一杯飲料 獲取 自己在酗酒後要去嗎？	從不	少於 每月	每月	周刊	每日或 幾乎 每日
7. 舊年你幾耐嘍酒後感到內疚或懊悔？	從不	少於 每月	每月	周刊	每日或 幾乎 每日
8. 在過去的一年中， 你有幾多次因為喝酒而記不起隔夜夜晚發生嘅事情？	從不	少於 每月	每月	周刊	每日或 幾乎 每日
9. 您或其他人是否因飲酒而受傷？	唔係		是的， 但舊年 冇		是的， 去年
10. 有親戚、朋友、醫生或其他醫療保健服務 工作人員擔心您的飲酒或建議 你斫了？	唔係		是的， 但舊年 冇		是的， 去年

0

1

2

3

4

你是否曾因飲酒而接受治療？ 從不 現時 過去

I II III IV

M: 0-4 5-14 15-19 20+

W, GM, ≥65: 0-3 4-12 13-19 20+

(For the health professional)

Scoring and interpreting the AUDIT:

Each answer receives a point ranging from 0 to 4. Points are added for a total score that correlates with a zone of use that can be circled on the bottom left corner of the page.

Note: Question #3 on this AUDIT asks about four or more drinks, reflecting the U.S. definition of a standardized drink.

Note: many factors are involved in determining how much alcohol impacts an individual's health. Determining the category of risk should be influenced by clinician judgment. The cut-off scores below are informed by validation studies, real-world experience of implementing the AUDIT into multiple primary care settings, and a gender-inclusive approach to patient care. However, they are offered for guidance only - clinics may choose different cut-off scores.

AUDIT score			
Women, gender minorities, all age ≥65	Men age <65	Category of risk	Indicated action
0 - 3	0 - 4	I – Low risk Low risk of health problems related to alcohol use.	Brief education
4 - 12	5 - 14	II - Risky Increased risk of health problems related to alcohol use.	Brief intervention
13 - 19	15 - 19	III – Harmful Increased risk of health problems related to alcohol use and a possible mild or moderate alcohol use disorder.	Brief intervention (offer options that include medications and referral to treatment)
20+	20+	IV – Severe Increased risk of health problems related to alcohol use and a possible moderate or severe alcohol use disorder.	

Brief education: Informing patients about low-risk consumption levels and the morbidity associated with risky alcohol use.

Brief intervention: Patient-centered discussion that employs Motivational Interviewing principles to raise a patient's awareness of their substance use and enhance their motivation to reduce harm from their use. Brief interventions are typically performed in 3-15 minutes, and should occur in the same session as the initial screening. Repeated sessions are more effective than a one-time intervention.

If a patient is ready to accept treatment, a referral is a proactive process that facilitates access to specialized care for individuals likely experiencing a substance use disorder. These patients are referred to alcohol and drug treatment experts for more definitive, in-depth assessment and, if warranted, treatment. However, treatment also includes prescribing medications for substance use disorder as part of the patient's normal primary care.

More resources: www.sbirtoregon.org

Citations:

Johnson J, Lee A, Vinson D, Seale P. "Use of AUDIT-Based Measures to Identify Unhealthy Alcohol Use and Alcohol Dependence in Primary Care: A Validation Study." *Alcohol Clin Exp Res*, Vol 37, No S1, 2013: pp E253–E259

Flentje A, Barger BT, Capriotti MR, Lubensky ME, Tierney M, Obedin-Maliver J, et al. "Screening Gender Minority People for Harmful Alcohol Use." *PLoS ONE*. 15(4). 2020.

Thomas F. Babor, John C. Higgins-Biddle, John B. Saunders, Maristela G. Monteiro. *The Alcohol Use Disorders Identification Test Guidelines for Use in Primary Care*. 2nd Edition. World Health Organization. Department of Mental Health and Substance Dependence. 2001