

**Provider details and consultation**

<b>Provider ID</b> <i>(pre-printed)</i>	_____				<i>prov.id</i>
<b>Date consultation</b>	___ / ___ / ___ ( DD / MM / YY )				<i>date.day/ date.month/ date.year</i>
<b>Work environment</b>	<input type="checkbox"/> 1 – clinic <input type="checkbox"/> 2 – home	<b>Type of consultation</b>	<input type="checkbox"/> 1 – face-to-face <input type="checkbox"/> 2 – cell phone		<i>work.place type.consult</i>

**Patient details**





<b>Sex</b>	<input type="checkbox"/> 1 – Male <input type="checkbox"/> 2 – Female <input type="checkbox"/> 3 – Other	<b>Age</b>	_____ years		<i>sex/age</i>
<b>Education</b>	<input type="checkbox"/> 1 – Less than high school	<input type="checkbox"/> 2 – High school	<input type="checkbox"/> 3 – Any education beyond high school		<i>education</i>

**Pre- Screen Question**

Question	1 – Yes	2 – No	
Have you been asked about your alcohol use at an appointment in the last year?			<i>lastyear</i>
<b>If NO apply AUDIT – C Alcohol Screening. If YES end alcohol screening here, there is no need to screen again. MOVE to PHQ2 Depression Screening.</b>			

**AUDIT-C Alcohol Screening**

- Read questions as written and record answers carefully.
- Begin the AUDIT by saying “Now I am going to ask you some questions about your consumption of standard drinks of alcoholic beverages during the past three months.”
- Explain what is meant by “standard drinks” by using local examples of beer, wine, vodka, etc.  
*Alcoholic drinks contain different concentrations of alcohol, for example a full glass of brandy contains more alcohol than a full glass of beer. What we call a standard drink is a drink containing 12 grams of alcohol. As shown in these pictures, a standard drink is equivalent to: one glass of beer, one small glass (shot) of brandy or whisky, one medium glass of wine.*
- Code answers in terms of “standard drinks”. Place the correct answer number in the box at the right.

<b>1 Standard Drink:</b>	<b>250ml Beer (5%)</b> 	<b>100ml Wine (12%)</b> 	<b>30ml Spirits (40%)</b> 	<b>30ml Spirits (40%)</b> 		
	<b>Questions</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>

1	How often do you have a drink containing alcohol?	Never	Monthly or less	2-4 times per month	2-3 times per week	4+ times per week		<i>audit1</i>
2	How many standard drinks of alcohol do you drink on a typical day when you are drinking?	1-2	3-4	5-6	7-9	10+		<i>audit2</i>
3	How often do you have 6 or more standard drinks on one occasion?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily		<i>audit3</i>
Sum score AUDIT-C (possible range 0-12)								<i>audtc.sum</i>
<b>If AUDIT-C score <math>\geq</math> 8</b> <b>Provide Brief Advice, give Alcohol Brief Advice Booklet, and/or use your clinical judgement to consider if referral to specialist alcohol treatment services is appropriate.</b>								

**Pre- Screen Question**

Question	1 – Yes	2 – No
Have you been asked about your depression at an appointment in the last year?		
If NO apply PHQ2 Depression Screening. If YES end here, there is no need to screen again.		

*Last year.dep*

**PHQ-2 Depression Screening**

<b>Over the last 2 weeks, how often have you been bothered by any of the following problems?</b>				
	<b>Not at all</b>	<b>Several days</b>	<b>More than half the days</b>	<b>Nearly every day</b>
1 Little interest or pleasure in doing things	0	1	2	3
2 Feeling down, depressed, or hopeless	0	1	2	3
Sum score (possible range 0-6)				
<b>If PHQ-2 score <math>\geq</math> 3</b> <b>Give information leaflet for depression and/or use your clinical judgement to consider if referral to specialist depression treatment services is appropriate.</b>				

*phq1*  
*phq2*  
*phq2.sum*

**Suicide Risk Screening**

<b>Over the last 2 weeks, how often have you been bothered by any of the following problems?</b>				
	<b>Not at all</b>	<b>Several days</b>	<b>More than half the days</b>	<b>Nearly every day</b>
1 Thoughts that you would be better off dead, or of hurting yourself	0	1	2	3
<b>IF score <math>\geq</math> 2</b> <b>Stop and consider if monitoring of the patient or referral to specialist services for suicide risk are appropriate</b>				

*suicide*

**Taking record of brief advice and referral**

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**Brief advice and referral**  
*(more than one answer is possible)*

- 1 – Brief advice to reduce alcohol consumption given
  - 2 – Patient leaflet on alcohol given
  - 3 – Patient offered, but declined leaflet on alcohol
  - 4 – Continued monitoring
  - 5 – Patient referred to other provider in practice for brief advice to reduce alcohol consumption
  - 6 – Patient referred to other provider outside practice for brief advice to reduce alcohol consumption
  - 7 – Patient leaflet on depression given
  - 8 – Patient offered, but declined leaflet on depression
  - 9 – Patient referred to specialist service for alcohol
  - 10 – Patient referred to specialist service for depression/suicide risk
  - 11 – Other
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- 12 – Time did not allow, but
    - 13 – I made follow-up appointment
  - 14 – Patient declined brief advice to reduce alcohol consumption

*document1-14/  
document11.other*