

## ALCOHOL PRESCREENING QUESTIONNAIRE

1. Do you sometimes drink beer, wine, or other alcoholic beverages?

- Yes     No

If you answered "Yes," look at this card showing the size of standard drinks:



2. **Women:** How many times in the past 12 months have you had four (4) or more standard drinks in a day?

- Zero     One or more times

**Men:** How many times in the past 12 months have you had five (5) or more standard drinks in a day?

- Zero     One or more times