

Tower House Surgery

FAST ALCOHOL SCREENING TEST (FAST)

Name

Date of Birth

Male / Female

Date completed



| Questions | Scoring system | | | | | Your score |
|--|----------------|-------------------|-------------------------------|--------|---------------------------|------------|
| | 0 | 1 | 2 | 3 | 4 | |
| How often have you had 6 or more units if female, or 8 or more if male, on a single occasion in the last year? | Never | Less than monthly | Monthly | Weekly | Daily or almost daily | |
| <p>Only answer the following questions if the answer above is Less than monthly (1) or Monthly (2)</p> <p>Stop here if the answer is Never (0), Weekly (3) or Daily (4).</p> | | | | | | |
| How often during the last year have you failed to do what was normally expected from you because of your drinking? | Never | Less than monthly | Monthly | Weekly | Daily or almost daily | |
| How often during the last year have you been unable to remember what happened the night before because you had been drinking? | Never | Less than monthly | Monthly | Weekly | Daily or almost daily | |
| Has a relative or friend, doctor or other health worker been concerned about your drinking or suggested that you cut down? | No | | Yes, but not in the last year | | Yes, during the last year | |



A pint of regular beer, lager or cider



A pint of "strong"/"premium" beer, lager or cider



Alcopop or a 275ml bottle of regular lager



440ml can of "regular" lager or cider



440ml can of "super strength" lager



250ml glass of wine (12%)



Bottle of wine (12.5%)