

# Study on alcohol and health

## Screening Questionnaire

	Site	Method	Number	Date of interview
Participant number				

GP: 01 – 05, TSS: 06

- 1 What is your name? \_\_\_\_\_
  - 2 What do you like to be called/Nickname? \_\_\_\_\_
  - 3 Date of birth \_\_\_\_\_
  - 4 Do you have a mobile phone? Yes  No
  - 5 Do you have a smart phone? Yes  No
  - 6 Will you be able to receive text messages for the next three months? Yes  No
  - 7 What is your mobile phone number? \_\_\_\_\_
  - 8 Have you drunk more than 8 units on two or more separate occasions in the last month? Yes  No
  - 9 Are you currently receiving any treatment or care for alcohol problems? Yes  No
  - 10 Are you willing to take part in this study Yes  No
- If yes,  
What is the best time to contact you again to enter the study? \_\_\_\_\_

### Eligibility:

To be eligible to take part in the study potential participants must answer:

Yes to questions 6, 8, 10

No to question 9