

**SYNTHETIC EXAMPLE**

Alcohol Use Disorders Identification Test - Consumption

AUDIT-C - presentation preview

CLIENT

John Doe

ADMINISTERED

Example date

RESPONSE MODE

Self-report

INSTRUMENT

AUDIT-C

SOURCE

**World Health
Organization**

CLINICAL ROLE

**Brief alcohol screening
support**

What this report lays out

- Named instrument, version, and provenance
- Item-level response pattern without source wording
- Methodology, references, and clinical boundary
- Responsible clinician review rather than automated conclusions

CLINICIAN REVIEW REQUIRED

This document demonstrates Lirena's report design using fictional data. It does not represent a scored AUDIT-C result, cannot establish a diagnosis, and must not be placed in a clinical record.

AUDIT-C does not diagnose alcohol use disorder. It cannot capture withdrawal, harm, or dependence features that the full AUDIT and clinical interview address.



A report designed for clinical review

Clear structure, visible provenance, and an explicit boundary help a clinician review recorded evidence without mistaking a questionnaire for a conclusion.

REVIEW

Adults complete three consumption items. Positive screens should lead to fuller assessment according to local policy, not an automated diagnosis.

CONTEXT

Published AUDIT-C scoring is simple but cutoff choice is context-specific. This page does not independently verify a cutoff.

SOURCE

WHO AUDIT materials are the source. Confirm the form and local screening protocol. This catalogue entry does not assign the measure from the public site.

REPORT PRINCIPLE

Show the evidence, the version, and the boundary. Leave diagnosis and formulation with the clinician.



Item-level layout without source wording

This marketing sample uses invented item numbers and response labels only. It does not reproduce AUDIT-C item wording, and the pattern below is not a real result.

ITEM	ILLUSTRATIVE SCALE POINT	FICTIONAL RESPONSE
1	1 of 5	Not at all
2	4 of 5	Often
3	3 of 5	Sometimes
4	3 of 5	Sometimes
5	2 of 5	A little
6	1 of 5	Not at all
7	1 of 5	Not at all
8	1 of 5	Not at all
9	4 of 5	Often
10	5 of 5	Most days
11	3 of 5	Sometimes
12	5 of 5	Most days
13	2 of 5	A little
14	2 of 5	A little

Item numbers, scale points, and responses on this page are invented for layout demonstration. They are not this instrument's item set, scoring structure, or thresholds.



Source-led by design

Lirena separates published methodology, product implementation, and clinical approval. A citation does not by itself authorize administration or prove a software scoring rule.

INSTRUMENT

AUDIT-C asks about drinking frequency, typical quantity, and heavy-drinking frequency. It is a short consumption screen, not the full 10-item AUDIT and not a treatment plan.

ADMINISTRATION

Adults complete three consumption items. Positive screens should lead to fuller assessment according to local policy, not an automated diagnosis.

CLINICAL BOUNDARY

AUDIT-C does not diagnose alcohol use disorder. It cannot capture withdrawal, harm, or dependence features that the full AUDIT and clinical interview address.

GOVERNANCE

WHO AUDIT materials are the source. Confirm the form and local screening protocol. This catalogue entry does not assign the measure from the public site.

SELECTED REFERENCES

1. WHO AUDIT manual

World Health Organization. AUDIT: the Alcohol Use Disorders Identification Test.

SOURCE AND VERIFICATION Confirm the official form with the source before any live workflow.