**Rapid Alcohol Problems Screen – Quantity Frequency (RAPS4-QF)**

1. During the last year have you had a feeling of guilt or remorse after drinking? *(Remorse)*

2. During the last year has a friend or a family member ever told you about things you said or did while you were drinking that you could not remember? *(Amnesia)*

3. During the last year have you failed to do what was normally expected from you because of drinking? *(Perform)*

4. Do you sometime take a drink when you first get up in the morning? *(Starter)* OR
   During the last year do you drink as often as once a month? *(Frequency)* AND
   During the last year have you had 5 or more drinks on at least one occasion *(Quantity)*

*(Cherpitel CJ. Alcohol Clin Exp Res 2002; 26:1686-1691)*