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Alcohol Withdrawal Symptom Checklist, Modified

Investigator:	Dr.Mohsin Qayyum
eCRF ID:	A103-006
Filled By:	Subject
Scale:	Double-blind Treatment (Day 42)
Date:	7/24/2025
nervousness Answer: not at all	
sweating Answer: not at all	
tremor Answer: not at all	
nausea Answer: not at all	

vomiting

Answer: not at all

seizures

Answer: not at all

hallucinations

Answer: not at all

confusion

Answer: not at all

chills or feeling hot

Answer: not at all

headache

Answer: not at all

sleep disturbance

Answer: not at all

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