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Alcohol Withdrawal Symptom Checklist, Modified

Investigator:	Dr Sangeetha Vulichi
eCRF ID:	A101-101
Filled By:	Subject
Scale:	Screening (Day X)
Date:	7/23/2025
nervousness Answer: moderate	
sweating	

Answer: light

tremor

Answer: not at all

nausea

Answer: light

vomiting

Answer: not at all

seizures

Answer: not at all

hallucinations

Answer: not at all

confusion

Answer: moderate

chills or feeling hot

Answer: not at all

headache

Answer: moderate

sleep disturbance

Answer: moderate

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