

Alcohol Withdrawal Symptom Checklist, Modified

Investigator:

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eCRF ID:

A101-096

Filled By:

Subject

Scale:

Baseline (Day 0)

Date:

7/23/2025

nervousness

Answer: moderate

sweating

Answer: significant

tremor

Answer: extreme

nausea

Answer: extreme

vomiting

Answer: significant

seizures

Answer: extreme

hallucinations

Answer: extreme

confusion

Answer: extreme

chills or feeling hot

Answer: light

headache

Answer: moderate

sleep disturbance

Answer: significant

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