

EMA Morning (EMAM)-RISK

Have you drank any alcohol you have not yet reported?

No

Yes

Please indicate the date of the first drink that you have not yet reported:



Please select the hour of the first drink that you have not yet reported:



Please indicate the date of the last drink that you have not yet reported:



Su	Мо	Tu	We	Th	Fr	Sa
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	1	2	3	4	5	6

Please select the hour of the last drink that you have not yet reported:

▼

Is your goal still to remain abstinent in the future?

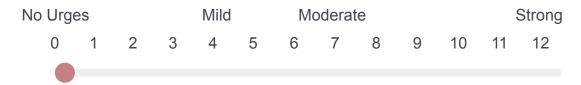
No

Uncertain

Yes

Since your last survey.....

How intense was your greatest urge to drink alcohol?



Since your last survey.....

Did you encounter any <u>risky situations</u> (people, places, or things)? If yes, rate the intensity of the situation. If you experienced more than one <u>risky situation</u>, rate the most intense one.



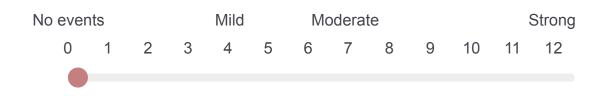
Since your last survey.....

Has a <u>hassle or stressful</u> event occurred? If yes, rate the intensity of the event. If you experienced more than one <u>hassle or stressful</u> event, rate the most intense one.



Since your last survey.....

Has a <u>pleasant or positive</u> event occurred? If yes, rate the intensity of the event. If you experienced more than one <u>pleasant or positive</u> event, rate the most intense one.



How are you <u>feeling</u> right now?

