

Cambridge Health Alliance Readiness for Gambling Expansion (CHARGE)



Division on
Addiction



HARVARD MEDICAL SCHOOL
TEACHING HOSPITAL

Host Data Reporting Form

Gambling Disorder Screening Day

March 10th, 2026

Thank you for hosting Gambling Disorder Screening Day! Screening Day is an international grassroots initiative made possible by people like you.

Please complete this optional form to let us know how Screening Day went. While not required, we strongly encourage hosts to complete this form. Data collected are used to improve Screening Day and track its reach, outcomes, and other indicators of progress.

Please do not include any Patient Health Information, such as patient name, on this form.

Your email address: _____

Total number of individuals invited to be screened: _____

Total number of individuals screened: _____

Total number of individuals with a positive screen (i.e., answered "yes" to at least one question): _____

Among those with a positive screen, please record the following information:

Gender: _____ Males _____ Females _____ Other/Unknown

Age: _____ 18 – 25 _____ 26 – 40 _____ 41 – 55 _____ 56+

The Division on Addiction relies on your feedback to improve Screening Day. Can we contact you for a short follow-up conversation about how you implemented Screening Day?

_____ Yes

_____ No

Please send completed forms to: klandauer@cha.harvard.edu