

December 1, 2015

Joe Roush, P.O.
City of Upper Arlington
3600 Tremont Rd.
Upper Arlington, Ohio 43221

Re: Clinical Alcohol Assessment for Karl Steinhauser

Dear Mr. Roush:

I performed a Clinical Alcohol Assessment for Karl Steinhauser in reference to his OVI charge in July of 2015 in Franklin County. This assessment included a complete clinical interview by telephone and the administration of:

- A Michigan Alcohol Screening Test (MAST)
- An Alcohol Use Disorder Identification Test (AUDIT)
- A General anxiety/depression screening

The following items provide a summary of the screening results, my diagnostic opinion and professional recommendations:

MAST: score = 2 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use (screening appeared valid)

AUDIT: score = 5 / *NEGATIVE SCREEN*; scores of 8 or more indicate hazardous use, 15 or more (men) indicates moderate to severe disorder present. (respondent appeared to provide forthright responses to questions)

DSM/Other Substance Related Concerns: clinical interview revealed 0 of 11 DSM 5 substance related symptoms found / denies subtle indicators of problem alcohol use including pattern of mild hangovers, mild memory loss after use, repeat use to relieve emotional or work stress, previous treatment, conflict with significant others during or shortly after use of alcohol, guilt or regret associated with use

Anxiety/Depression Screening: no clinically significant concerns reported

Substance Related Legal History Reported: denies any previous history of alcohol or substance related arrests/legal charges

Clinical Interview/Summary: Mr. Steinhauser's written screenings provided no indication of an alcohol use disorder at any level (mild, moderate or severe); however his clinical interview provided some indication of misuse of alcohol over the past 5-10 years. He reported his normal use of alcohol as 3-4 drinks on 2-3 occasions per week.

He also acknowledged use of 6 drinks on 2-3 special occasions (weddings, birthdays, etc.) per year.

Mr. Steinhauser and I discussed his OVI incident and general use of alcohol at length. He was forthcoming throughout the interview regarding the significant factors related to his charges. In addition, he was also remorseful about his choice to drive after consuming an excessive amount of alcohol prior to the morning he was charged. However, I do have some concerns because of his high BAC (0.188) and ongoing and regular use of alcohol. Although his written test results did not reveal an alcohol related diagnosis, my clinical opinion is that some sessions with a substance abuse professional will not only prove helpful for the prevention of future alcohol related incidents, but also ensure that there are no concerns with his ongoing use

It is my understanding that Mr. Steinhauser has attended a Victim Impact Panel, an alcohol education class and has had his license suspended for 6 months duration. I do find this appropriate considering his charges. Below you will find the additional treatment recommendations I have referenced.

“DSM- 5” DIAGNOSIS in reference to substance use: Z03.89 (suspected substance use condition not found) mental condition not found)

Treatment Recommendations:

- 1) Counseling, recommend 3-4 outpatient sessions with a professional substance abuse counselor; update recommendations at session four;
- 2) If another negative consequence is incurred as a result of any alcohol use it is recommended Mr. Steinhauser seek further evaluation and follow all treatment recommendations.

Thank you for the opportunity to assist the court, Mr. Steinhauser, and yourself in this important matter.

Sincerely,



Anita McLeod, LCSW, SAP
LIC # 079668-1
cc: Karl Steinhauser

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or other information is not sufficient for this purpose. The Federal rules restrict any use of information to criminally investigate or prosecute any alcohol or drug abuse client. Drug abuse patient records are also protected under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), 45 C.R.R parts 160 & 165. (These conditions apply to every page disclosed and a copy of this authorization will accompany every disclosure.)

Diagnostic Conclusions / Limitations: Directions Counseling Group provides Clinical Alcohol Assessments based on objective and standardized screenings and interviewing methods as well as self-reported information. Clinical conclusions are made to the best of the professional's ability with data on hand at the time of the assessment. Expanded assessments which involve additional background research, collateral information and third party verification can be provided as an additional service upon request.