

June 30, 2015

Lindsay Serbousek, Public Defender
Cascade Division Court
415 E Burke Arlington
Arlington, WA 98223

Re: Clinical Alcohol Assessment for Kevin Loven

Dear Ms. Serbousek:

I performed a Clinical Alcohol Assessment for Mr. Loven in reference to his November 2014 DUI charge in Snohomish County. This assessment included the administration of:

- Michigan Alcohol Screening Test (MAST)
- Alcohol Use Disorder Identification Test (AUDIT)
- General anxiety/depression screening
- 50 minute in-person clinical interview by telephone

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 = 4 / *NEGATIVE SCREEN*; scores above 8 indicate hazardous use, above 13 indicates moderate to severe disorder present (respondent appeared to provide forthright responses to questions)

DSM/Other Substance Related Concerns: 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. Loven's written screenings provided no indication of an alcohol use disorder at any level (mild, moderate or severe). Mr. Loven presented as transparent and non-defensive about his use of alcohol. He reported his normal use of alcohol as 4-6 drinks on 2-4 occasions per month. He also acknowledged use of 6-9 drinks on special occasions (weddings, birthdays, etc.), less than 5 occasions per year.

Mr. Loven and I discussed his OVI incident and general use of alcohol at length. While his weight (260 lbs.) makes some adjustment to recommended maximum consumption guidelines, I pointed out some risk factors that he should consider, and recommended some modest reduction in the quantity of alcohol he consumes per occasion. While I was unable to find him meeting enough DSM criteria to identify an alcohol use disorder he readily acknowledged that preventative measures were appropriate along with other concerns I had about his long term unemployment status and losing motivation to pursue vocational development (which could be further impacted if alcohol use became problematic).

My provided recommendations will focus on driver safety as well as counseling that should help him moderate his use of alcohol and improve his overall motivation. Mr. Loven expressed an eagerness to comply with the recommendations for a number of personal benefits.

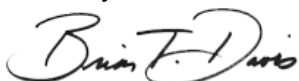
DSM 5 DIAGNOSIS in reference to substances: V71.09 (none found)

Treatment Recommendations:

- 1) Attend a local MADD Victim Impact Panel;
- 2) Counseling, recommend 4-6 outpatient sessions with a professional substance abuse counselor; update recommendations at session four; recommend incorporating discussion of overall motivation, mild depressive/anxiety symptoms and vocational/career direction;
- 3) If unable to reduce and maintain a lower level of alcohol use, advise Mr. Loven to consult with mental health and/or substance abuse professional(s) regarding additional treatment and support (temporary abstinence period, Intensive Outpatient Program, 12 step meeting attendance, etc.)

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

Sincerely,



Brian Davis, LISW-S, SAP
cc: Kevin Loven

Prohibition Against Re-Disclosure: This information has been disclosed to you from records protected by Federal Confidentiality rules. The Federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 C.F.R Part 2. A general authorization for the release of medical 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.