

June 5, 2015

George Barreiro, Probation Officer
Florida Department of Corrections
12295 North West
133 Court
Miami FL 33186

Re: Clinical Alcohol Assessment for David Mrofki

Dear Mr. Barreiro:

I performed a Clinical Alcohol Assessment for Mr. Mrofki in reference to his *inappropriate exhibition of a forearm* charge in Palm Beach County in October of 2014. This assessment included the administration of:

- Michigan Alcohol Screening Test (MAST)
- Alcohol Use Disorder Identification Test (AUDIT)
- General anxiety/depression screening
- Clinical interview by telephone

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

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

AUDIT: score = 1 / *NEGATIVE SCREEN*; scores above 8 indicate hazardous use, above 13 indicates moderate to severe disorder present (screening appeared valid)

DSM/Other Substance Related Concerns: clinical interview revealed *0 of 11* DSM 5 alcohol 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. Mrofki's written screenings provided no indication of an alcohol use disorder at any level (mild, moderate or severe). He reported his normal use of alcohol as 1-2 drinks on 1 or less occasions per week. He also acknowledged use of the same amount on special occasions (weddings, birthdays, etc.), or on about 6 occasions per year. Mr. Landers and I discussed his *inappropriate exhibition of a*

firearm incident and general use of alcohol at length but I was unable to find the incident or his overall history and presentation indicative of someone experiencing DSM 5 alcohol use disorder symptoms. Mr. Mrofki indicated that on the evening of the incident he had not been drinking any alcohol. My clinical opinion is that alcohol was not a factor which contributed to his charges that evening and that his drinking behaviors which are moderate in nature provide a low risk of alcohol related incidents going forward. Therefore, I have no further treatment recommendations for Mr. Mrofki at this time.

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

Treatment Recommendations:

- 1) If another negative consequence is incurred as a result of any alcohol use it is recommended Mr. Mrofki seek further evaluation and follow all treatment recommendations.

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

Sincerely,



Anita McLeod, LCSW, SAP
cc: David Mrofki

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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.