

June 5, 2015

Safford Municipal Court P.O. Box 272 Safford, AZ 85548

Re: Clinical Alcohol Assessment for Mark Wiley

Dear Safford Court Representative:

I performed a Clinical Alcohol Assessment for Mr. Wiley in reference to his DUI charge in May of 2013 in Safford County. This assessment included the administration of:

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

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

MAST: score = 0 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use (screening appeared valid)

AUDIT: score = 0 / *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. Wiley's written screenings provided indication of an alcohol use disorder that is in *sustained full remission*. He reported that he has been sober from all alcohol use since August of 2013 when he entered inpatient treatment for an alcohol use disorder. We discussed the factors that led to his DUI incident in 2013, the lifestyle changes he has made as a result and the tools and problem solving skills he regularly applies to remain sober. Mr. Wiley was non-defensive in his demeanor and the interview did not reveal any inconsistencies in written or verbal form. I gained the clinical perspective that Mr. Wiley has made substantial and sustainable changes that

decrease his likelihood of alcohol related incidents going forward. I did encouraged him to continue with AA attendance as a means of ongoing support which will further decrease his likelihood of relapse, but have no further treatment recommendations.

DSM 5 DIAGNOSIS in reference to substances: 303.90 Alcohol Use Disorder, Moderate, in Sustained Full Remission

Treatment Recommendations:

- 1) Abstinence, recommend abstaining from all alcohol use permanently;
- 2) AA Attendance, recommend ongoing AA or other 12 step meeting attendance;
- 3) <u>If another negative consequence</u> is incurred as a result of any alcohol use it is likely that an increased level of treatment will be recommended (e.g. IOP, Inpatient, residential treatment, etc.)

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

Sincerely,

Anita McLeod, LCSW, SAP

cc: Mark Wiley

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.

