

July 19, 2016

Superior Court  
Snohomish County Courthouse  
3000 Rockefeller Avenue M/S 502  
Everett, WA 98201-4046

**Re: Clinical Alcohol Assessment for Aaron Hanson (DOB – 07/20/1977)**

To whom it may concern:

I performed a Clinical Alcohol Assessment for Mr. Hanson in reference to his child custody proceedings in Snohomish County. This assessment included a 60-minute clinical interview by telephone, and the administration of:

- A Michigan Alcohol Screening Test (MAST)
- An Alcohol Use Disorders Identification Test (AUDIT)
- A general anxiety/depression screening
- Collateral Information Review -10 signed character reference letters

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

**MAST:** score = 1 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use

**AUDIT:** score = 1 / *NEGATIVE SCREEN*; scores of 8 or more indicate *hazardous use*, scores of 15 or more in men indicate *moderate to severe* disorder present

**Alcohol Use Risk Factors:**

- ☒ previous legal history – one DUI reported 2007
- ☐ severity of incident – no legal records available but 9 year history without new incident mitigates risk
- ☐ anxiety/depression/mental health – none found
- ☐ other substance use – none found
- ☐ family history – none reported
- ☐ prior treatment history – *Positive Choices* at Alpine Recovery – 2008 for “mild disorder” / given timeframe without new legal incidents this history mitigates risk
- ☐ peer influences– NA
- ☐ work environment – NA
- ☐ contraindicated prescription use – NA
- ☐ general health problems – NA
- ☐ current family stress – NA

*Summary - 1 of 11 risks/concerns*

**DSM - 5 Alcohol Use Symptoms:**

- ☐ Use beyond intention – not found by direct or indirect questioning
- ☐ Persistent desire or unsuccessful efforts to reduce/quit use – not found
- ☐ Substantial time spent obtaining, using, or recovering from use – not found
- ☐ Strong craving/desire – not found
- ☐ Failure to fulfill a major role (work, home, school) – denies/ not found
- ☐ Use despite recurrent social/interpersonal problems - not found
- ☐ Important social, occupational, recreational activities relinquished – not found
- ☐ Physically hazardous use – 2007 DUI but pattern of hazardous use not found
- ☐ Continued use despite knowledge of contra physical or psychological condition – not found
- ☐ Tolerance – not found by direct or indirect questioning
- ☐ Withdrawal symptoms – not found by direct or indirect questioning

*Summary - 0 of 11 symptoms, no basis for alcohol use diagnosis*

**Clinical Interview/Summary:** Mr. Hanson's written screenings and clinical provided no indication of an alcohol use disorder at any level (mild, moderate or severe). He reported his normal use of alcohol (prior to abstaining since 5/2016) as 2-3 drinks on 1-2 occasions per week. He reported no difference in the amount consumed if he was attending a special event or celebration.

Mr. Hanson and I discussed his 2007 DUI arrest, his general use of alcohol, and his decision to stop using alcohol. Arresting officer reports are no longer available for corroboration of his 2007 DUI and I did not find any of Mr. Hanson's description providing indications or suspicion of a DSM-5 alcohol use diagnosis at the time. I did a little research on his treatment history subsequent to the DUI in 2007. It would appear that the program he attended was for the treatment of a mild disorder. Ultimately his completion of the program may have helped him avoid problem use afterward's and I do not find programs of this nature to be any basis to conclude that one has a bona fide alcohol use disorder from a DSM-5 perspective.

Mr. Hanson's decision to quit drinking alcohol this past May was reported simply as a way to simplify the custody proceedings. He denied this choice having anything to do with experiencing negative consequences from his use of alcohol. Further, Mr. Hanson states that he has a number of character witnesses who would be willing to testify in court that he is not inclined to abuse alcohol.

I read over signed letters from 10 individuals who wrote to the court on Mr. Hanson's behalf and found no remarks about him having problem alcohol use. While I would not expect to find such remarks in letters of support sought by Mr. Hanson I believe they are potentially valuable to the court as it tries to draw accurate conclusions about Mr. Hanson's use of alcohol. First, this is a substantial number of character witnesses (and Mr. Hanson says he can produce more), and second; Mr. Hanson states that a number

of these people would be willing to vouch for him under oath, specifically that he is not an abuser of alcohol. If the court has significant doubt about Mr. Hanson's statement that he is not abusing alcohol I would strongly encourage that testimony be heard regarding the nature and extent of Mr. Hanson's alcohol use. Based on the clinical screenings, clinical interview, and the access the court has to a significant number of individuals who know Mr. Hanson's habits.

**DSM-5 DIAGNOSIS in Reference to Substances:** Z03.89 (suspected substance use condition not found)

**Treatment Recommendations:** Having found no basis for a DSM-5 alcohol use disorder I have no further recommendations for Mr. Hanson at this time.

If the court possesses additional information about Mr. Hanson's use of alcohol that might impact the outcome of this assessment, I would be happy to review it and consider appropriate modifications or amendments to the present report.

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

Sincerely,



Brian T. Davis, LISW-S, SAP  
LIC# I-7948  
cc: Aaron Hanson

**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.