

January 6, 2015

Blue Earth County Court
401 Carver Rd.
Mankato, Minnesota
56002-0347

Re: Clinical Alcohol Assessment for Peter Loyd

Dear Court Representative:

I performed a Clinical Alcohol Assessment for Mr. Loyd. in reference to his *Disorderly Conduct* charge in Blue Earth County. This assessment included the administration of: a Michigan Alcohol Screening Test (MAST), an Alcohol Use Disorder Identification Test (AUDIT), an anxiety/depression screening, and a clinical interview by telephone. The following items provide a summary of the screening results, my diagnostic opinion and professional recommendations:

MAST: screening revealed some misuse of alcohol over the past 12 months

AUDIT: score = 3 / *risk level = Zone 1; Zone 1 scores indicate alcohol education as an appropriate intervention for this risk level as a preventative measure for future problem use.*

DSM/Other Substance Related Concerns: clinical interview revealed 3 of 11 DSM 5 substance related symptoms present

Anxiety/Depression Screening: some depressive symptoms indicated that are most likely associated with the decline in his father's health and Mr. Lloyd's subsequent concern regarding this.

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

Clinical Interview/Summary: Mr. Loyd written screenings provided some indication of misuse of alcohol over the past year. He reported his normal use of alcohol *prior* to his charges as 4-6 drinks on 3-4 occasions per week. He also acknowledged use of 8-10 drinks on special occasions (weddings, birthdays, etc.) on about 1 occasion per month. We discussed Mr. Loyd's legal incident charge at length as well as general habits surrounding alcohol. He was non-defensive in his demeanor and the interview did not reveal any inconsistencies or discrepancies in written or verbal form. My clinical impression is that the social situation that Mr. Loyd engaged in on night of his charges proved to influence his normal drinking behaviors. Additionally he did indicate that he was drinking tequila (which he does not usually drink) and feels that this may have negatively affected his overall decision making abilities. My opinion is that this choice may have played a role in his level of intoxication as well as the subsequent actions that led to his disorderly conduct charge. I did discuss with Mr. Loyd that the amount of alcohol he had been drinking on a regular basis *previous* to his charges did have the potential to lead to an alcohol problem in the future. He seemed to understand this and

agreed that decreasing his use of alcohol would be beneficial to him going forward from both a personal and legal perspective. Furthermore, he states that he has significantly decreased his amount of alcohol consumption since his charges were incurred. However, due to his charge, regular use of alcohol and the common occurrence of individuals resuming use after legal consequences recede, I am recommending some preventative alcohol education.

DSM 5 DIAGNOSIS in reference to substances: 305.00 Mild Alcohol Use Disorder

Treatment Recommendations:

- 1) Preventative Education, recommend successful completion of a local 2 day alcohol education class.

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

Sincerely,



Anita McLeod, LCSW, SAP
cc: Peter Loyd

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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.