

July 3, 2015

Elmer Melgar, Probation Officer  
49 San Jacinto Street  
Houston, TX 77002

**Re: Clinical Alcohol and Drug Assessment for Victor Nelson**

Dear Mr. Melgar:

I performed a Clinical Drug and Alcohol Assessment for Mr. Nelson in reference to his *shoplifting* charge in Montgomery County. This assessment included the administration of:

- Michigan Alcohol Screening Test (MAST)
- Drug Abuse Screening Test (DAST)
- Drug Use Disorder Identification Test (DUDIT)
- 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 = 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)

**DAST:** score = 1 / *NEGATIVE SCREEN*;

**DUDIT:** score = 0 / *NEGATIVE SCREEN*; scores above 6 indicate problematic use ("mild-moderate"), above 25 indicates moderate to severe disorder present

**DSM/Other Substance Related Concerns:** *screened for all illicit substances.* clinical interview revealed 0 of 11 DSM 5 alcohol and/or drug 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. denies any drug related symptoms, prior abuse or current 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:**

**ALCOHOL:** Mr. Nelson's written screenings provided no indication of an alcohol use disorder at any level (mild, moderate or severe). He reported that *prior* to his shoplifting charge; he drank on approximately 1-2 drinks on 0-1 occasions per week whether at home, socially or on special occasions (weddings, birthdays, etc.). However, Mr. Nelson states that he has been abstinent from all alcohol use since his shoplifting charge occurred. Mr. Nelson and I discussed the 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.

**DRUG USE:** Mr. Nelson's written screenings and clinical interview also provided no indication of a DSM 5 drug use disorder at any level. He reported that he did smoke marijuana on 1 occasion approximately 1 year ago. However, he denies any history of past abuse, regular use, or plans to smoke marijuana again in the future. Mr. Nelson was non-defensive in demeanor throughout the interview and I found no discrepancies or inconsistencies in either written or verbal form. My conclusion is that there is no indication that drugs or alcohol played a part in his charges, and my findings indicate that he presents a low risk of alcohol or drug related incidents going forward. Accordingly, I have no further treatment recommendations.

**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. Nelson seek further evaluation and follow all treatment recommendations.

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

Sincerely,



Anita McLeod, LCSW, SAP  
cc: Victor Nelson

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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.