

November 23, 2016

Officer Butler, PO 145 South Boulevard Savannah, GA 31405

Re: Clinical Alcohol Assessment for Konrad Bunde (DOB – 07/25/1987)

Dear Officer Butler:

I performed a Clinical Alcohol Assessment for Mr. Bunde in reference to his *Obstruction* of *Justice* charge in Chatham County. This assessment included a clinical interview, and the administration of:

- A Michigan Alcohol Screening Test (MAST)
- An Alcohol Use Disorders Identification Test (AUDIT)
- A general anxiety/depression screening

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

**AUDIT:** score = 2 / *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:**

recommendations

Concerns/Risks
□ previous legal history – denies prior history
□ severity of incident – obstruction charge, no aggravating factors reported with regard to high alcohol use
□ anxiety/depression/mental health – not found
□ other substance use – denies other substance use
☐ family history – none found
□ prior treatment history − required substance use education as normal part of military service
□ peer influences– not found
□ work environment – low risk work environment
□ contraindicated prescription use – no prescription use at present
☐ general health problems – good overall health
□ current family stress – none found
Summary - 0 of 11 concerns, mitigate concern with educational and/or clinical

## **DSM - 5 Alcohol Use Symptoms:**

Summary - 0 of 11 symptoms found in clinical interview and written screenings

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

**Clinical Interview/Summary**: Mr. Bunde'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 2-3 drinks on 1-2 occasions per week (weekend use). He also acknowledged use of 3-5 drinks on 2-3 special occasions (weddings, birthdays, etc.) per year.

Mr. Bunde and I discussed his incident with the taxi cab driver and the surrounding circumstances as well as his overall use of alcohol. His explanation for the conflict with the taxi driver seemed plausible to me and without suspicion. His overall presentation was non-defensive and consistent in both written and written form. Furthermore he was articulate about low risk alcohol use principles he learned as part of his military education. In my best clinical judgment, I did not find him meeting DSM-5 alcohol use disorder criteria nor did I find significant risks or any legal history suggesting the development of an alcohol use problem.

**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. Bunde at this time.

If you or the court possess additional information about Mr. Bunde'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. Bunde, and yourself in this important matter.

Sincerely,

Brian T. Davis, LISW-S, SAP

LIC# I-7948

cc: Konrad Bunde

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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.

