

May 12, 2015

Whitefish Montana Municipal Court  
275 Flathead Avenue  
Whitefish, Montana 59937

**Re: Clinical Alcohol Assessment for Michael Poole**

Dear Court Representative:

I performed a Clinical Alcohol Assessment for Mr. Poole in reference to his 2012 *negligent endangerment* charge in Flathead County. This assessment included the administration of:

- Michigan Alcohol Screening Test (MAST)
- 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 = 2 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use (screening appeared valid)

**AUDIT:** score = 4 / *NEGATIVE SCREEN*; scores above 8 indicate hazardous use, above 13 indicates moderate to severe disorder present (screening appeared valid)

**DSM/Other Substance Related Concerns:** Clinical interview revealed 0 of 11 DSM 5 alcohol 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

**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. Poole's written screenings provided no indication of an alcohol use disorder. He reported that he drinks approximately 2-4 drinks on 1-2 occasions per month. He also acknowledged drinking 4-6 drinks on special occasions (example: birthday, wedding or reunion) approximately 4-6 times per year. Mr. Poole did admit to drinking 2 beers on the night of his *negligent driving* incident. He maintains that he did not feel intoxicated, but that he was fearful of what his BAC would be regardless of the 2 beers. My clinical opinion is that he is not displaying any concerning

alcohol related behaviors, but that on the night of his charges he was unsure about what to do to protect himself when faced with a situation he had never previously encountered. Mr. Poole was forthcoming throughout his interview and I could not find any inconsistencies both in his clinical results as well as written screenings. In my best clinical judgement, Mr. Poole does not appear to meet criteria for a DSM 5 alcohol use disorder and does drink at moderate levels. Accordingly, I have no treatment recommendations and in addition believe that he presents a low risk for alcohol related incidents going forward.

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

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

Sincerely,



Anita McLeod, LCSW, SAP  
cc: Michael Poole

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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.