

September 26, 2014

Daniel D. Rosendale, Attorney 103 North Liberty Street, Suite 100 Centreville. MD 21617

Re: Clinical Alcohol Assessment for Dennis Hulton

Dear Mr. Rosendale,

I performed a Clinical Alcohol Assessment for Mr. Hulton in reference to his pending DUI charge in Queen Anne's 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 50 minute clinical phone interview. The following are my findings and recommendations:

**MAST:** score = 2 / negative screen; (no direct or indirect indication of problem alcohol use; scores above 5 indicate early problem alcohol use

**AUDIT:** score = 5 / *risk level* = Zone 1; Zone 1 scores refer to low risk drinking or abstinence

**DSM/Other Substance Related Concerns:** clinical interview revealed *0 of 11* DSM 5 symptoms present / denies subtle indicators of problem alcohol use including mild hangovers, mild memory loss after use, repeat use to relieve emotional or work stress, previous legal consequences, previous treatment, conflict with significant others during or shortly after use of alcohol, guilt or regret associated with use

**Anxiety/Depression Screening:** receives treatment for some anxiety and depressive symptoms and has no current symptom complaints including no indications of self-medication behavior via alcohol use.

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

Clinical Interview/Summary: Mr. Hulton's written screenings provided no indication of an alcohol use disorder. He reported his normal use of alcohol as 2-3 drinks on 3-4 occasions per week. He also acknowledged use of a maximum of 6 drinks on special occasions (weddings, birthdays, etc.) We discussed Mr. Hulton's DUI incident at length as well as his general habits surrounding alcohol, whether at home or at special events. He was non-defensive in questioning, and the interview did not reveal inconsistencies or discrepancies in written or verbal form. My clinical impression is that he does not meet criteria for a DSM 5 alcohol use disorder. However, due to this charge, regular use of alcohol, and his use of a variety of prescription medications, I am recommending some preventative alcohol education. This should help Mr. Hulton avoid any future problems associated with use of alcohol.

**DSM 5 DIAGNOSIS in reference to substances**: V71.09 (none found)

## **Treatment Recommendations:**

- 1) <u>Preventative Education</u>, recommend a local Wellness Driver Intervention Program or online alcohol education course
- 2) If another negative consequence is incurred as a result of any alcohol use it is recommended Mr. Hulton seek further evaluation and follow all treatment recommendations.

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

Sincerely,

Anita McLeod, LCSW, SAP

cc: Dennis Hulton

**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.

