

April 8, 2016

Mark D. Thompson, Attorney The Thompson Law Office 250 East Court Street Iowa City, IA 52240-4911

Re: Clinical Alcohol Assessment for Michael J. Eglin (DOB – 09/27/1969)

Dear Mr. Thompson:

I performed a Clinical Alcohol Assessment for Mr. Eglin in reference to his OWI charge in Linn County (5/14/15). This assessment included a 50-minute clinical interview by telephone, and the administration of:

- A Michigan Alcohol Screening Test (MAST)
- An Alcohol Use Disorder 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 = 2 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use, mitigate concerns with clinical recommendations

**AUDIT:** score = 5 / *NEGATIVE SCREEN*; scores of 8 or more indicate *hazardous use*, scores of 13 or more in women, scores of 15 or more in men indicate *moderate to severe* disorder present, mitigate concerns with clinical recommendations

## **Alcohol Use Risk Factors:**

Concerns/Risks

- <u>legal history</u> 2010 incident with no DUI conviction
- severity of incident high test BAC (.177)
- anxiety/depression NA
- other substance use NA
- <u>family history</u> one identified blood related family member
- prior treatment history NA
- peer influences- NA
- work environment NA
- contraindicated prescription use NA
- general health problems NA
- current family stress NA

Summary - 3 of 11 concerns, mitigate concern with clinical recommendations

Anxiety/Depression Screening: no clinically significant concerns reported

Clinical Interview/Summary: Mr. Eglin'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 before this charge as 2-4 drinks on 2-3 occasions per week. He reported no difference in the amount consumed if he was attending a special event or celebration. Since the May 2015 incident he reports that he has reduced his alcohol use by avoiding use of alcohol during the weekday and limits himself to 2-3 drinks per occasion.

Mr. Eglin and I discussed his OWI incident and general use of alcohol at length. In my best clinical judgment, I was unable to find the incident or his overall history and presentation indicative of someone experiencing DSM-5 alcohol use disorder symptoms. I did however note some concerns/risks with regard to his alcohol use (see list above) and that I would make preventative recommendations accordingly. The state of lowa requires that he attend a 48-hour alcohol/driver education program and I believe this is an appropriate level of intervention given his risk profile.

**DSM-5 DIAGNOSIS in Reference to Substances**: Z03.89 (suspected substance use condition not found)

## **Treatment Recommendations:**

- 1) Alcohol & Drug Education successful completion of a 48 hour lowa approved OWI Weekend Program, present proof of completion to the court;
- 2) <u>If another negative consequence</u> is incurred as a result of any alcohol use it is recommended Mr. Eglin seek further evaluation and follow all treatment recommendations.

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

Sincerely,

Brian T. Davis, LISW-S, SAP

LIC# I-7948

cc: Michael J. Eglin

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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.

