

May 22, 2015

Kim Nichols, Probation Officer
97th. District Probation Department
401 East Houghton Avenue
Houghton, MI 49931

Re: Clinical Alcohol Assessment for Martin Peter

Dear Ms. Nichols:

I performed a Clinical Alcohol Assessment for Mr. Peter in reference to his DUI charge in Houghton County in August of 2014. 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 = 3 / *NEGATIVE SCREEN*; scores above 8 indicate hazardous use, above 13 indicates moderate to severe disorder present (respondent appeared to provide forthright responses to questions)

DSM/Other Substance Related Concerns: 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. Peter's written screenings provided no indication of an alcohol use disorder. He acknowledged his normal use of alcohol as 2-3 drinks on 1 occasion per week. He also acknowledged use of the same amount on special occasions (weddings, birthdays, etc.) on about 4-5 occasions per year. Mr. Peter and I discussed his DUI incident and general use of alcohol at length as well as the circumstances present on the evening of his charges. He did admit that he was unaware of the amount of alcohol present in the micro-brewed beer he consumed the

night of the incident. Although he did not appear to use this as an excuse for his actions, I do believe that it was a significant contributor to his BAC as compared with what it would have been if he had consumed the same number of beers with a lower alcohol content. Mr. Peter stated that domestic and *non micro-brewed* beer is what he has been accustomed to drinking on a regular basis. I did find this to be a credible contributing factor as well as finding no inconsistencies or discrepancies throughout his interview either verbally or in written form. Mr. Peter did share with me that he is currently on probation and currently has a suspended license. I am in agreement with the court's decision regarding this; however recommend in addition that he attend a local alcohol education course. My clinical opinion is that Mr. Peter would benefit from some further education around any ongoing use of alcohol to prevent charges of a similar nature going forward.

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

Treatment Recommendations:

- 1) Preventative Education, recommend a local driver safety alcohol prevention course. Mr. Peter will provide proof of successful completion to the court;
- 2) If another negative consequence is incurred as a result of any alcohol use it is recommended Mr. Peter seek further evaluation and follow all treatment recommendations.

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

Sincerely,



Anita McLeod, LCSW, SAP
cc: Martin Peter

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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.