

November 4, 2015

Craig Hayes, Attorney
2722 Colby Avenue
Suite 200
Everett, WA 98201

Re: Clinical Alcohol Assessment for Shena Heavin

Dear Mr. Hayes:

I performed a Clinical Alcohol Assessment for Ms. Heavin in reference to her DUI charge in January of 2015 in Snohomish County. This assessment included the administration of:

- A Michigan Alcohol Screening Test (MAST)
- An Alcohol Use Disorder Identification Test (AUDIT)
- A General anxiety/depression screening
- Full clinical interview by telephone

The following items provide a summary of the screening results, my diagnostic opinion and professional recommendations:

MAST: score = 3 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use (screening appeared valid)

AUDIT: score = 2 / *NEGATIVE SCREEN*; scores of 8 or more indicate hazardous use, of 13 or more (women), 15 or more (men) indicates moderate to severe disorder present (respondent appeared to provide forthright responses to questions)

DSM/Other Substance Related Concerns: clinical interview revealed 0 of 11 DMS 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

Present Use Status: presently not using alcohol.

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:

ALCOHOL – Ms. Heavin's written screenings provided no indication of an alcohol use

disorder at any level (mild, moderate or severe). Ms. Heavin reported her normal use of alcohol before this charge as 1-2 drinks on 1 or less occasions per week. Ms. Heavin also acknowledged use of 2-3 drinks on special occasions (weddings, birthdays, etc.) 5 times per year.

Ms. Heavin and I discussed her DUI incident and general use of alcohol at length. She described the events that transpired on the evening of her charges as well as the pertinent factors involved. I did find Ms. Heavin to be forthcoming about the amount of alcohol she consumed as well as regretful regarding her choice to drive the night she was charged. Additionally, I found no discrepancies or inconsistencies from what Ms. Heavin stated during her clinical interview compared to the police report that was provided. Ms. Heavin stated that as a result of her charges, she has spent time in jail, has attended a Victim Impact Panel and that an interlock device will be in placed in her car for the next 4 months duration. My recommendation is that she also attend a local alcohol education class. This should provide Ms. Heavin with some helpful tools to avoid charges of a similar nature going forward.

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

Treatment Recommendations:

- 1) Alcohol & Drug Education, recommend 12 hrs. of local alcohol/drug education class (hospital, treatment center or community facility)
- 2) If another negative consequence is incurred as a result of any alcohol use it is recommended that Ms. Heaving seek further evaluation and follow all treatment recommendations.

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

Sincerely,



Anita McLeod, LCSW, SAP
cc: Shena Heavin

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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.