

December 16, 2014

Howard City Courthouse 137 North Elm Street Cresco, Iowa 52136

Re: Clinical Alcohol Assessment for Larry Norby

Dear Court Representative:

I performed a Clinical Alcohol Assessment for Mr. Norby in reference to his previous OWI charge on July 15, 2010 in Howard 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 clinical interview by telephone. The following items provide a summary of the screening results, my diagnostic opinion and professional recommendations:

MAST: *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use **AUDIT:** score = 2 / *NEGATIVE SCREEN*; scores above 8 indicate hazardous use, above 13 indicates moderate to severe disorder present

DSM/Other Substance Related Concerns: clinical interview revealed *0 of 11* DSM 5 substance related 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 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: acknowledges previous OWI charge in 2001(13 years ago) with BAC = .10

Clinical Interview/Summary: Mr. Norby's written screenings provided no indication of an alcohol use disorder. He reported his normal use of alcohol as 2-3 drinks on 1-2 occasions per week. He also acknowledged use of 4-6 drinks on special occasions (weddings, birthdays, etc.), about 2 times per year. We discussed Mr. Norby's OWI incident's at length as well as his general habits surrounding alcohol, whether at home, at special events or while entertaining patrons at his restaurant. He was non-defensive in questioning and the interview did not reveal any 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. Furthermore, it is my opinion that through these experiences, Mr. Norby has gained significant insight into the risks associated with alcohol as well as the personal consequences of his previous choices.

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

Treatment Recommendations: Consequent to Mr. Norby's charges, he attended a two day alcohol education course, and has had his license suspended (still in effect). I believe the course and suspension were appropriate to his charges and I have no further professional or treatment recommendations for him at this time. If another negative consequence is incurred as a result of any alcohol use it is recommended Mr. Norby seek further evaluation and follow all treatment recommendations.

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

Sincerely,

Anita McLeod, LCSW, SAP

cc: Larry Norby

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.

