### CASE 6 – BETTY – FOR THE INTERVIEWER – 4/24/23

Betty, a 35-year-old woman was in the emergency last week for lacerations sustained in a bar fight. She is here today to have her wounds checked and stitches removed.

AUDIT: In the past 12 months	0	1	2	3	4			
1. How often do you have a drink containing	Never	Monthly or	2-4 times a	2-3 times a	4 or n	iore		
alcohol?		less	month	week	times a	week		
2. How many drinks containing alcohol do you								
have on a typical day when you are drinking?	1-2	3-4	5-6	7-9	10 or more Daily or almo			
3. How often do you have 3 or more drinks on one occasion?	Never	Less than	Monthly	Weekly				
Skip to Questions 9 and 10 if Total Score for		monthly			dai	ıy		
Ouestions 2 and $3 = 0$								
4. How often during the last year have you	Never	Less than	Monthly	Weekly	Daily or	almost		
found that you were not able to stop drinking	110701	monthly	Wiening	· · comy	dail			
once you had started?						- 7		
5. How often during the last year have you	Never	Less than	Monthly	Weekly	Daily or	almost		
failed to do what was normally expected of		monthly		·	dai			
you?						-		
6. How often during the last year have you	Never	Less than	Monthly	Weekly	Daily or			
needed a first drink in the morning to get		monthly			dai	ly		
yourself going after a heavy drinking session								
7. How often during the last year have you had	Never	Less than	Monthly	Weekly	Daily or			
a feeling of guilt or remorse after drinking?		monthly	26.41	*** 11	dai			
8. How often during the last year have you	Never	Less than	Monthly	Weekly	Daily or			
been unable to remember what happened the		monthly			dai	ly		
night before because of your drinking?  9. Have you or someone else been injured	No		Yes, but not		Voc. de	wina		
because of your drinking?	NO		in the last		Yes, during the last year			
because of your drinking:			year		the last	year		
10. Has a relative, friend, doctor, or other	No		Yes, but not		Yes, di	ıring		
health care worker been concerned about your			in the last		the last year			
drinking or suggested you cut down?			year					
				Total score =				
DAST-10: In the past 12 months					Yes	No		
1. Have you used drugs other than those required	for medical r	easons?				X		
2. Do you use more than one drug at a time?						X		
3. Are you always able to stop using drugs when	you want to?				X			
4. Have you ever had blackouts or flashbacks as a	result of dru	g use?				X		
5. Do you ever feel bad or guilty about your drug use?						X		
6. Do people in your life ever complain about your involvement with drugs?						X		
7. Have you neglected your family because of your use of drugs?						X		
8. Have you engaged in illegal activities in order to obtain drugs (other than possession)?						X		
9. Have you ever experienced withdrawal symptoms (felt sick) when you stopped taking drugs?						X		
10. Have you had medical problems as a result of bleeding)?	your drug us	e (e.g., memory l	loss, hepatitis, con	nvulsions,		X		
				Total score =				

#### CASE 6 – BETTY – FOR THE PATIENT – 4/24/23

You're a 35-year-old woman. You went to the emergency room last week for lacerations sustained in a bar fight. You are here today to have your wounds checked and stitches removed.

You and your husband, Bill, are construction workers. You and Bill like to work hard and party hard, and you've intentionally not had children. Your work is seasonal, and you enjoy taking extended vacations camping, hunting and fishing in the mountains.

You've enjoyed beer and whiskey since you were 16. You tried a variety of drugs but haven't used any for at least 10 years. Typically, you and Bill drink on Friday and Saturday nights with friends at bars. You usually have 4 to 6 beers and 2 to 4 shots of whiskey. And you have 2 to 3 12-ounce beers during the week, but more on "thirsty Thursdays."

Last week and twice in the past several years, you've gotten into a few fights in bars with minor injuries requiring stitches. You were arrested once for assault. You've had 2 DWIs when Bill was too drunk to drive home. You're much more worried about Bill's drinking than yours. He increasingly is unable to work on Mondays and Fridays, whereas you miss work only once a month or so. Occasionally you feel a bit shaky on Sunday mornings after fun Saturday nights. You've tried to set limits for yourself of no more than 6 drinks, but that hasn't worked out. Occasionally you'll have a Bloody Mary on weekend mornings to help yourself over a hangover. Quite a few of your family members have had alcoholism, but you don't drink nearly as much as they did.

While you enjoy your party life, you've been thinking for a few months that things are getting out of hand. The hangovers – sometimes with vomiting – are awful. You don't have the energy you used to have, and you feel you're getting too old to keep your party lifestyle. And you and Bill have been spending more, working less, and burning through a lot of savings.

You'd personally be willing to talk to an alcohol specialist, but you don't think Bill would, and he'd be angry if you went without him. You are concerned that things can't continue as they are, because you'll run out of money, and you're worried about Bill's health.

After discussing things, you would agree to talk to Bill to explore his willingness to get help together.

# CASE 7 – CARLA – FOR THE INTERVIEWER – 4/24/23

Carla is a 35-woman seeking help for depression.

AUDIT: In the past 12 months	0	1	2	3	4			
1. How often do you have a drink containing	Never	Monthly or	2-4 times a	2-3 times a	4 or n	nore		
alcohol?		less	month	week	times a	week		
2. How many drinks containing alcohol do you								
have on a typical day when you are drinking?	1-2	3-4	5-6	7-9	10 or more			
3. How often do you have 3 or more drinks on	Never	Less than	Monthly	Weekly	Daily or alm			
one occasion?		monthly			dai	ly		
Skip to Questions 9 and 10 if Total Score for Ouestions 2 and $3 = 0$								
4. How often during the last year have you	Never	Less than	Monthly	Weekly	Daily or	almost		
found that you were not able to stop drinking	rever	monthly	wionting	Weekly	daily			
once you had started?						- 3		
5. How often during the last year have you	Never	Less than	Monthly	Weekly	Daily or	almost		
failed to do what was normally expected of		monthly		Ž	dai			
you?								
6. How often during the last year have you	Never	Less than	Monthly	Weekly	Daily or	almost		
needed a first drink in the morning to get		monthly			dai	ly		
yourself going after a heavy drinking session								
7. How often during the last year have you had	Never	Less than	Monthly	Weekly	Daily or			
a feeling of guilt or remorse after drinking?	<b>N</b> T	monthly	36 411	337 11	daily			
8. How often during the last year have you been unable to remember what happened the	Never	Less than	Monthly	Weekly	Daily or almost daily			
night before because of your drinking?		monthly			dai	ıy		
9. Have you or someone else been injured	No		Yes, but not		Yes, dur	ing the		
because of your drinking?	110		in the last		last year			
coount of your unitarity.			year		lust y			
O. Has a relative, friend, doctor, or other No Yes, but not						ing the		
health care worker been concerned about your			in the last		last year			
drinking or suggested you cut down?			year					
				Total score =				
DAST-10: In the past 12 months					Yes	No		
1. Have you used drugs other than those required	for medical r	easons?			X			
2. Do you use more than one drug at a time?					X			
3. Are you always able to stop using drugs when	you want to?					X		
4. Have you ever had blackouts or flashbacks as a	a result of dru	g use?				X		
	. 100010 01 010	B 4551				1-1		
5. Do you ever feel bad or guilty about your drug	use?				X			
6. Do people in your life ever complain about your involvement with drugs?					X			
7. Have you neglected your family because of your use of drugs?					X			
8. Have you engaged in illegal activities in order	to obtain drug	gs (other than pos	ssession)?		1	X		
9. Have you ever experienced withdrawal symptoms (felt sick) when you stopped taking drugs?						X		
10. Have you had medical problems as a result of bleeding)?	your drug us	e (e.g., memory l	oss, hepatitis, co	nvulsions,		X		
				Total score =				

#### CASE 7 – CARLA – FOR THE PATIENT – 4/24/23

You're a 35-year-old artist seeking help today for possible depression. You've been in a committed relationship with Georgia for 2 years. Georgia owns an art supply store. You have a studio in the back, help with the store, and sell your art there.

You just got by in high school. You've held many odd jobs (waitressing, cleaning, store clerk) over the years, trying to make ends meet as you worked on doing and selling your paintings.

Last year, your younger sister, Lacy, died in a motorcycle crash. You haven't been the same since.

You started smoking pot at age 14. Since age 18, you've usually smoked a couple of joints 3 to 5 nights a week. Since Lacy died, you've been smoking up to 6 joints every day from morning to night. You hardly paint or help in the store anymore.

For months, Georgia has been expressing concern about your sadness and your pot smoking. Lately she has been saying that something must change. To help with your depression, you've tried snorting some cocaine and taking some Ritalin, but that hasn't helped, so you stopped. A month ago, when Georgia first brought up her concerns, you tried to cut down but found you couldn't.

Reasons for change (importance):

- You would love to be a successful artist
- You love Georgia, and you feel very bad to anger and disappoint her

Reasons against change (importance):

- Pot helps keep your sadness and pain away

Reasons for change (confidence):

- You were able to pull things together when you were 20 and a close friend died of a drug overdose

Reasons again change (confidence):

- You're not sure you can cut down or quit. If you decided to do so, you'd probably need counseling or treatment, and that would be very embarrassing and humiliating.

# CASE 8 – DONNA – FOR THE INTERVIEWER – 4/24/23

# Donna is a 25-woman homeless woman "at the end of her rope."

AUDIT: In the past 12 months	0	1	2	3	4			
1. How often do you have a drink containing alcohol?	Never	Monthly or less	2-4 times a month	2-3 times a week	4 or n times a			
2. How many drinks containing alcohol do you have on a typical day when you are drinking?	1-2	3-4	5-6	7-9	10 or 1	more		
3. How often do you have 3 or more drinks on one occasion?  Skip to Questions 9 and 10 if Total Score for Questions 2 and 3 = 0	Never	Less than monthly	Monthly	Weekly	Daily or dai	almost		
4. How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Less than monthly	Monthly	Weekly	Daily or dai			
5. How often during the last year have you failed to do what was normally expected of you?	Never	Less than monthly	Monthly	Weekly	Daily or dai			
6. How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session	Never	Less than monthly	Monthly	Weekly	Daily or dai			
7. How often during the last year have you had a feeling of guilt or remorse after drinking?	Never	Less than monthly	Monthly	Weekly	Daily or dai			
8. How often during the last year have you been unable to remember what happened the night before because of your drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily			
9. Have you or someone else been injured because of your drinking?	No		Yes, but not in the last year		Yes, during the last year			
10. Has a relative, friend, doctor, or other health care worker been concerned about your drinking or suggested you cut down?	No		Yes, but not in the last year		Yes, during the last year			
				Total score =				
DAST-10: In the past 12 months					Yes	No		
1. Have you used drugs other than those required	l for medical r	reasons?			X			
2. Do you use more than one drug at a time?						X		
3. Are you always able to stop using drugs when	you want to?					X		
4. Have you ever had blackouts or flashbacks as	a result of dru	g use?			X			
5. Do you ever feel bad or guilty about your drug use?								
6. Do people in your life ever complain about your involvement with drugs?						X		
7. Have you neglected your family because of your use of drugs?						X		
8. Have you engaged in illegal activities in order to obtain drugs (other than possession)?								
9. Have you ever experienced withdrawal symptoms (felt sick) when you stopped taking drugs?								
10. Have you had medical problems as a result o bleeding)?	f your drug us	e (e.g., memory l	oss, hepatitis, con	nvulsions,	X			
				Total score =				

#### CASE 8 – DONNA – FOR THE PATIENT – 4/24/23

You're a 25-year-old homeless woman seeking help because you're "at the end of your rope."

You grew up with an alcoholic father who was violent toward everyone in the household. You started escaping with marijuana at age 13. You experimented with a variety of drugs. At age 16, when you injected heroin – it was the best feeling in your life! When your father found out, he beat you severely, and you never returned.

You've lived on the street since then. You've supported your heroin use by shoplifting and exchanging drugs for sex. A few days ago, a john beat you up, and you feel you just can't go on like you have been. You've been to the ER several times over the past several years for infected injection sites, injuries from fights, and sexually transmitted infections.

#### Reasons for change (importance)

- Since you turned 25, you've been thinking you want to do more with your life. The street used to be fine. Now it's a drag.
- In your teens, you enjoyed baking with your mom and worked for a while at a bakery. You might enjoy working at a bakery again.
- There's no way you want to get old on the street, so you're thinking why not change sooner instead of later.
- You'd really like to be a clean and pretty woman, like your best friend before you left home.

### Reasons against change (importance)

- Trying to change and failing would feel very bad.

### Reasons for change (confidence)

- You really want your life to be better.
- You still blame your father for the life you have, but you recognize that it's now up to you to change if you want to. He can't hold you back if you don't let him.

### Reasons against change (confidence)

- It would be really hard not to give into those strong cravings, especially when the rest of life is so hard.

# CASE 9 - JOE - FOR THE INTERVIEWER - 4/24/23

Joe is a 36-year-old married man who wishes help for anxiety and poor sleep.

AUDIT: In the past 12 months	0	1	2	3	4	,		
1. How often do you have a drink containing	Never	Monthly or	2-4 times a	2-3 times a	4 or 1	nore		
alcohol?		less	month	week	times a	week		
2. How many drinks containing alcohol do you								
have on a typical day when you are drinking?	1-2	3-4	5-6	7-9	10 or more			
3. How often do you have 3 or more drinks on	Never	Less than	Monthly	Weekly	Dail			
one occasion?		monthly			almost	daily		
Skip to Questions 9 and 10 if Total Score for								
Questions 2 and $3 = 0$	Never	Less than	M41-1	W1-1	D.:II			
4. How often during the last year have you found that you were not able to stop drinking	Never	monthly	Monthly	Weekly	Daily almost			
once you had started?		inonuny			aiiiosi	uany		
5. How often during the last year have you	Never	Less than	Monthly	Weekly	Dail	vor		
failed to do what was normally expected of	INEVEL	monthly	Monuny	Weekly	almost			
you?		monthly			aiiiost	uany		
6. How often during the last year have you	Never	Less than	Monthly	Weekly	Dail	v or		
needed a first drink in the morning to get	110101	monthly	1.1011111	• • • • • • • • • • • • • • • • • •	almost	•		
yourself going after a heavy drinking session								
7. How often during the last year have you had	Never	Less than	Monthly	Weekly	Dail	y or		
a feeling of guilt or remorse after drinking?		monthly		•	almost	daily		
8. How often during the last year have you	Never	Less than	Monthly	Weekly	Daily or almo			
been unable to remember what happened the		monthly			dai	ly		
night before because of your drinking?								
9. Have you or someone else been injured	No		Yes, but not		Yes, d			
because of your drinking?			in the last		the las	t year		
10.77	3.7		year		***			
10. Has a relative, friend, doctor, or other	No		Yes, but not		Yes, during the last year			
health care worker been concerned about your drinking or suggested you cut down?			in the last		tne las	t year		
drinking of suggested you cut down?			year	7D 4 1				
				Total score =				
DAST-10: In the past 12 months					Yes	No		
1. Have you used drugs other than those required	for medical r	easons?				X		
2. Do you use more than one drug at a time?						X		
3. Are you always able to stop using drugs when	you want to?				X			
4. Have you ever had blackouts or flashbacks as a	result of dru	g use?				X		
5. Do you ever feel bad or guilty about your drug use?						X		
6. Do people in your life ever complain about your involvement with drugs?						X		
7. Have you neglected your family because of your use of drugs?						X		
8. Have you engaged in illegal activities in order to obtain drugs (other than possession)?						X		
9. Have you ever experienced withdrawal symptoms (felt sick) when you stopped taking drugs?						X		
10. Have you had medical problems as a result of bleeding)?	your drug us	e (e.g., memory l	oss, hepatitis, co	nvulsions,		X		
				Total score =		•		

#### CASE 9 – JOE – FOR THE PATIENT – 4/24/23

Joe, a 36-year-old married man with two children, is here today for help with anxiety and trouble sleeping.

Joe quit school and left home at age 15, because he couldn't tolerate the mistreatment and occasional violence by his mother's boyfriends. For several years, he lived with older siblings and friends and had various odd jobs. For the past 8 years, he has worked for a man who owns several fast-food restaurants. For the past 5 years, he has been a store manager.

Joe was convicted several times for misdemeanors between ages 15 and 25. Usual offenses were for stealing and for alcohol-fueled violence. Ten years ago, Joe had court-mandated alcohol treatment. After that, he got very involved with his neighborhood church, and he remained sober for ten years. He married Joanne 8 years ago, and they have 2 children, ages 6 and 4. Last month, Joe caught Joanne in bed with another man. She has apologized profusely and wishes to work things out. Joe is not sure whether he can be with Joanne anymore. He is living separately and remains extremely angry.

The night Joe found Joanne with another man, he immediately went to a bar and got drunk. Since then, Joe has been having 6 to 8 shots of whiskey after work, and up to 12 shots on days off. Three nights ago at a bar, he got into a fight and was arrested for disorderly conduct. He is out on bail. He has been very agitated, unable to sleep and unable to work.

### CASE 10 - Ken - FOR THE INTERVIEWER - 4/24/23

Ken is a 68-year-old homeless Vietnam veteran here at the clinic for the first time asking for a refill of Paxil®, which he takes for PTSD.

AUDIT: In the past 12 months	0	1	2	3	4			
1. How often do you have a drink containing	Never	Monthly or	2-4 times a	2-3 times a	4 or n	iore		
alcohol?		less	month	week	times a	week		
2. How many drinks containing alcohol do you								
have on a typical day when you are drinking?	1-2	3-4	5-6	7-9	10 or more Daily or			
3. How often do you have 3 or more drinks on one occasion?	Never	Less than	Monthly	Weekly				
Skip to Questions 9 and 10 if Total Score for		monthly			almost	dany		
Ouestions 2 and $3 = 0$								
4. How often during the last year have you	Never	Less than	Monthly	Weekly	Daily	/ or		
found that you were not able to stop drinking	110101	monthly	Wiening	· · comy	almost			
once you had started?						J		
5. How often during the last year have you	Never	Less than	Monthly	Weekly	Daily	or or		
failed to do what was normally expected of		monthly		·	almost	daily		
you?								
6. How often during the last year have you	Never	Less than	Monthly	Weekly	Daily	or or		
needed a first drink in the morning to get		monthly			almost	daily		
yourself going after a heavy drinking session								
7. How often during the last year have you had	Never	Less than	Monthly	Weekly	Daily			
a feeling of guilt or remorse after drinking?	3.7	monthly	36 41	***	almost			
8. How often during the last year have you	Never	Less than	Monthly	Weekly	Daily or			
been unable to remember what happened the		monthly			dai	ly		
night before because of your drinking?  9. Have you or someone else been injured	No		Yes, but not		Vos. di	ırina		
because of your drinking?	INO		in the last		Yes, during the last year			
because of your drinking.			year		the last	year		
10. Has a relative, friend, doctor, or other	No		Yes, but not		Yes, di	ıring		
health care worker been concerned about your			in the last		the last year			
drinking or suggested you cut down?			year					
				Total score =				
DAST-10: In the past 12 months					Yes	No		
1. Have you used drugs other than those required	for medical r	easons?				X		
2. Do you use more than one drug at a time?						X		
3. Are you always able to stop using drugs when	you want to?				X			
4. Have you ever had blackouts or flashbacks as a	result of dru	g use?				X		
		C						
5. Do you ever feel bad or guilty about your drug use?						X		
6. Do people in your life ever complain about your involvement with drugs?						X		
7. Have you neglected your family because of your use of drugs?						X		
8. Have you engaged in illegal activities in order to obtain drugs (other than possession)?						X		
9. Have you ever experienced withdrawal sympto	ms (felt sick)	when you stopp	ed taking drugs?			X		
10. Have you had medical problems as a result of bleeding)?	your drug us	e (e.g., memory l	loss, hepatitis, con	nvulsions,		X		
				Total score =				

#### CASE 10 – Ken – FOR THE PATIENT

Ken is a 68-year-old homeless Vietnam veteran. He is at the clinic today for the first time to request a refill of his medication for post-traumatic stress disorder (PTSD), Paxil®, which he was receiving at a VA clinic.

Ken's father and most men in his family were alcoholic. His father often beat him when he was young. He joined the military in part to escape from his family. In Vietnam he served for several years in Vietnam as a mechanic. He returned in 1975 with severe PTSD. He used lots of heroin in Vietnam. Since returning to the US, he never used heroin. However, since then he has drunk heavily almost every day. For 20 years, he worked as a car mechanic in various shops, holding each job for a few months to a year because of his drinking. He had several girlfriends over that time, but they always left him because of his drinking and the agitation and nightmares from his PTSD. In 1995, he could not find another job, and he has lived on the street since then.

Ken's health has been fairly good. He has had multiple alcohol-related injuries from alcohol-fueled fights, but none have been serious. He has multiple other ailments — including backaches, headaches, chest pain, and heartburn. Multiple tests have never revealed any serious disease, but he is frustrated that his doctors have never solved the problems. He used to receive his healthcare at the VA Hospital. He recently decided to try other clinics, because he felt the VA Hospital staff didn't like him and didn't take his concerns seriously.

Ken had alcohol treatment twice at the VA – once as an outpatient and once in a residential program. Both programs required regular Alcoholics Anonymous attendance. He found it difficult to be cooped up inside for so long. He also found that talking in groups only made his PTSD symptoms worse, especially his agitation.

Ken has learned how to get by on the streets. He'd like his life to be different, but he's not sure what that would look like. He is tired of the routine of begging and stealing, waiting on long lines for food and shelter, and feeling hung over. He would never return to a conventional alcohol treatment program. However, if told about medications that might help him drink less or quit, he would be very interested to talk to a doctor about them.

# CASE 11 – Lester – FOR THE INTERVIEWER – 4/24/23

Lester is a 66-year-old man seeking help for recent injuries.

AUDIT: In the past 12 months	0	1	2	3	4			
1. How often do you have a drink containing	Never	Monthly or	2-4 times a	2-3 times a	4 or n	nore		
alcohol?		less	month	week	times a week			
2. How many drinks containing alcohol do you								
have on a typical day when you are drinking?	1-2	3-4	5-6	7-9	10 or more			
3. How often do you have 3 or more drinks on	Never	Less than	Monthly	Weekly	Daily or			
one occasion?		monthly			almost	daily		
Skip to Questions 9 and 10 if Total Score for								
Questions 2 and $3 = 0$	Never	T 41	M 411	***************************************	D 1			
4. How often during the last year have you	Never	Less than	Monthly	Weekly	Daily or almost daily			
found that you were not able to stop drinking once you had started?		monthly			aimosi	dany		
5. How often during the last year have you	Never	Less than	Monthly	Weekly	Daily	ı or		
failed to do what was normally expected of	INCVCI	monthly	Wioning	Weekiy	almost			
you?		monthly			unnost	dully		
6. How often during the last year have you	Never	Less than	Monthly	Weekly	Daily	/ or		
needed a first drink in the morning to get		monthly		,, 55223	almost			
yourself going after a heavy drinking session						3		
7. How often during the last year have you had	Never	Less than	Monthly	Weekly	Daily	or or		
a feeling of guilt or remorse after drinking?		monthly	_		almost			
8. How often during the last year have you	Never	Less than	Monthly	Weekly	Daily or almos			
been unable to remember what happened the		monthly			dai	ly		
night before because of your drinking?								
9. Have you or someone else been injured	No		Yes, but not		Yes, during			
because of your drinking?			in the last		the last	t year		
10 11	No		year		Van de			
10. Has a relative, friend, doctor, or other health care worker been concerned about your	No		Yes, but not in the last		Yes, during the last year			
drinking or suggested you cut down?			year		the last	ı yeai		
drinking of suggested you cut down:			year	Total score =				
				Total score –		1		
DAST-10: In the past 12 months					Yes	No		
1. Have you used drugs other than those required	for medical r	easons?				X		
2. Do you use more than one drug at a time?						X		
3. Are you always able to stop using drugs when y	you want to?				X			
4. Have you ever had blackouts or flashbacks as a	result of dru	g use?				X		
5. Do you ever feel bad or guilty about your drug use?						X		
6. Do people in your life ever complain about your involvement with drugs?						v		
7. Have you neglected your family because of your use of drugs?						X		
8. Have you engaged in illegal activities in order to obtain drugs (other than possession)?						X		
9. Have you ever experienced withdrawal symptoms (felt sick) when you stopped taking drugs?						X		
10. Have you had medical problems as a result of your drug use (e.g., memory loss, hepatitis, convulsions,						X		
bleeding)?	your arug us	e (e.g., memory l	ioss, nepatitis, coi	iivuisioiis,		A		
				Total score =				

#### CASE 11 – Lester – FOR THE PATIENT – 4/24/23

Lester is a 66-year-old man seeking help for recent injuries.

Three nights ago, Lester was with his "lady friend" for his usual weekly visit. He could not pay, and he was severely beaten. He made it home, just around the corner, and drank himself to sleep. The next morning his daughter, Maggie, could not reach him, came to his apartment and found him in bed bloody and difficult to wake. She called 911. Lester was at the emergency room most of the day. He had multiple bruises but no lacerations or fractures. A CT scan of his brain was normal, and his mental status returned to normal as his alcohol level came down. After several hours, he began to withdraw from alcohol. He was transferred to detox. It's now 3 days later. Lester was discharged from detox and came to the clinic seeking treatment and pain relief for his injuries.

Lester grew up in a small town in the UP. He left school after 8<sup>th</sup> grade to help on the family farm. Home was very unpleasant, as his father drank and lot and was verbally and physically abusive to Lester's mother, to Lester and to most of his siblings. At age 16 he ran away to Grand Rapids. He worked in various groceries and delis, gradually working his way up to supervisory positions in his 30s.

He enjoyed "social drinking" through his 20s, mainly on weekends. In his late 20s, he began drinking daily, from 4 to 6 beers. In his 30s, his drinking escalated further. He had a series of jobs at different stores and eventually could not find another one. After a few attempts, he was able to get Social Security Disability for chronic back pain, which really wasn't very serious.

Lester was married for 5 years in his 20s. His wife divorced him when their daughter, Maggie, was 3 because of drinking and infidelity. He and Maggie have continued to be close. Maggie has two children, ages 8 and 6. Especially since Maggie was divorced, Lester would like to be closer to his grandchildren. Maggie made clear that he can only see his grandchildren when he is sober and well-groomed, which happens a few times a year. Lester's dream is that he would walk his grandchildren home from school every day, babysit them until Maggie comes home from work, and become a regular part of their lives. If the interviewer uncovers this motivating factor, Lester would be willing to consider a loohol treatment and come back to talk about it more with the interviewer.