



CLINICAL PROFILE

The McGinn Risk-Informed SUD Criteria[©]

Acute and Chronic Substance Misuse Assessment, Prevention and Treatment Guide

1. CLIENT INFORMATION	Birth Order: 2 of 5	Religion: Protestant	Date Assessed: 10/09/18
Client ID#: 1NLC1554	Sexual Preference: Gay	Household: 3	Combined Income: \$100K+
Client Initials: AAA	Status: partnered	Race: White/Latinx	
Age/Gender: 42M	Education: some High School	Insurance: state	

2. ACUTE SUD & MISUSE HISTORY

7-Day Use/Misuse: alcohol, tobacco/nicotine, heroin
30-Day Use/Misuse: tobacco/nicotine daily, alcohol daily, heroin
3-Month SUD: tobacco/nicotine, alcohol, marijuana, heroin
12-Month SUD: tobacco/nicotine, alcohol, marijuana, heroin, Rx opiates
Misuse History: tobacco/nicotine dependence for 22 years, alcohol dependence for 22 years, marijuana use for 3-5 years, heroin use for 5+ years, Rx opiate use for 5+ years

ALCOHOL		REC DRUGS		RX MEDS		12m TOBACCO (# of cigs/day & how soon after waking) : MODERATE 2A. DSM-V & ICD-10 F17.20, F10.20, F10.230, F10.231, F12.20, F11.20
12m	3m	12m	3m	12m	3m	
✓	✓	✓	✓	✓	✓	Used more or longer than intended at times
✓	✓	✓	✓	✓	✓	Tried and failed more than once to cut down or stop using
✓	✓	✓	✓	✓	✓	Spent a lot of time using or dealing with after-effects
✓	✓	✓	✓	✓	✓	Experienced a strong desire or craving to use
✓	✓	✓	✓	✓	✓	Using interfered with taking care of home, family, job or school
✓	✓	✓	✓	✓	✓	Kept using despite concerns of family or friends
✓	✓	✓	✓	✓	✓	Using took the place of other valued interests or pleasures
✓	✓	✓	✓	✓	✓	Got into risky situations while using (accidents, sex, crime, disease)
✓	✓	✓	✓	✓	✓	Continued using despite feeling depressed/anxious, memory blackouts or health risks
✓	✓	✓	✓	✓	✓	Needed to use more to get the same or less results
✓	✓	✓	✓	✓	✓	Stopping led to sleep loss, shaky, irritable, anxious, depressed, sick, sweats, or hallucinations
7	=F!OC2	5	6-11	6	0-1	ACUTE ILLNESS SEVERITY: 0-1 = None 2-3 = Mild 4-5 = Moderate 6-11 = Severe
Age 20 / 22 Yrs		Age 20 / 22 Yrs		AGE FIRST USED / NUMBER OF DEPENDENT YEARS		

3. CO-OCCURRING: anxiety or panic, depression, ADHD, schizo-affective, social media, suicidal (prior 7 days)

4. SUD TREATMENT, REMISSION & RELAPSE HISTORY

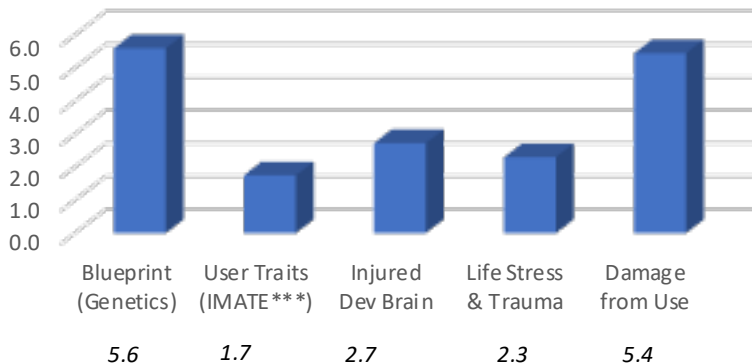
Tx Duration: 5+ years **Quits:** 4-5 **Cut Backs:** 1-2 years **Remissions:** 1-2 yrs **Relapses on MAT:** 3
Tx Received: 5+ yrs of supportive family, 3-5 yrs in a support group, 6-12 mo of outpt tx, a few months of residential tx

MAT Received a few months of bup-nalox, a few weeks of acamprosate, a few weeks of disulfiram, a few months of gabapentin

Last 30 Days: early Rx drug misuse remission, in a support group, in therapy, prescribed Subox 8mg daily

5. CHRONIC SUD RISK FACTORS

0.80 + → SIGNIFICANT FACTOR**

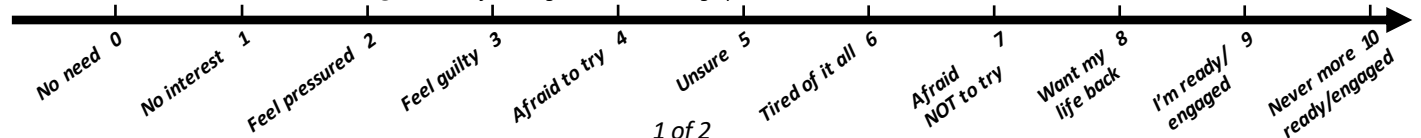


**Detailed, ranked significant RISK HISTORY on page 2

***IMATE = Impulsivity, Motivation, Attraction, Tolerance, Entrapment

6. CURRENT READY METER ==> 9

Prefers long-term, nonhealing opioid



7. McRISC[©] SUMMARY SUD PROFILE

Acute Illness (3m/12m):	SEVERE / SEVERE
Chronic Illness (>12m):	SEVERE
Addiction Risk Index*:	17.8 (99%)
Lifetime Addiction Risk:	VERY HIGH
Sustained Remission:	VERY UNLIKELY
Subjective Severity:	SEVERE
Denial/Diversion Risk:	NO / UNCLEAR
Ready/Engaged:	YES
<small>* Low: 0-4.9 Mod: 5.0-9.9 High: 10.0-12.9 Very High: 13.0 +</small>	

8. TREATMENT RECOMMENDATIONS

Detox Level: 4.0 Med Managed Inpt Detox
Level of Care: 3.5 High Intensity Res Tx
Medication: Sb/Meth OR Dtox->O Ntrx->ER Ntrx
Counseling/SG Co-occurring Counseling & Sup Grp
Minimum MAT/Sup Grp Duration: 3 yrs / Life



9. RANKED PERCENTAGE OF CHRONIC SUD RISK HISTORY

Client ID#: 1NLC1554

- 1st: Blueprint->** 31.4% *anxiety or panic, depression, ADHD, schizo-affective, social media, suicidal (prior 7 days), relatives with a substance use disorder: father, 2 siblings, a grandparent, 2 aunts or uncles, 2 cousins or nieces or nephews, (3 died)*
- 2nd: Damage->** 30.6% *4-5 damaged relationships, 2 injuries or accidents, 10+ memory blackouts, an overdose, 4-5 ER visits, 4-5 detoxes, 6-9 arrests, 2 DUIs, 10+ job losses, 6-9 incarcerations, a suicide attempt, DTs, diabetes, high blood pressure, 3-5 years of Rx opiates for chronic pain, tobacco or nicotine (prior 7 days)*
- 3rd: Injured Brain->** 15.3% *first used at age 20, multiple substances, with a total of 66 overlapping substance-dependent years*
- 4th: Life Stress->** 12.9% *identifying as gay, more than 5 years of unemployment, currently unemployed, substance misuse that both led to, and got worse after, being unemployed, 3-5 years homeless, 3-5 years of jail or detention, currently on probation, crime victim, extended poverty, emotional abuse*
- 5th: User Traits->** 9.8% *impulsivity, becoming dependent after a few months, greater current tolerance compared to others, using to escape, sacrificing everything to use, 4-5 attempts to quit, 1-2 years of cutting back, ability to sustain remission for 1-2 years, 3 relapses since taking prescribed medication*

10. McRISC CARE CODE KEY[©]

CLIENT CARE CODE: 2T3A3D@eRx(99)St5/78R9?up4.0/3.5

ICD-10: F17.20, F10.20, F10.230, F10.231, F12.20, F11.20

CODE REFERENCE (L->R code insertion)

ICD-10 DSM-V SUD DIAGNOSES

- | | |
|---|--|
| <ul style="list-style-type: none"> 1 Mild acute illness (prior 3 months) 2 Moderate acute illness (prior 3 months) 3 Severe acute illness (prior 3 months) T Tobacco or Nicotine Use Disorder A Alcohol Use Disorder D Recreational Drug Use Disorder Rx Prescription Medication Use Disorder @ Hx of 6+ months of Rx opiates for chronic pain e early remission (3-12 months) s sustained remission (>12 months) (1-29%) Low lifetime addiction risk (30-59%) Moderate lifetime addiction risk (60-79%) High lifetime addiction risk (80-99%) Very high lifetime addiction risk S Suicidal ideation/attempt in last 7 days t Tobacco or nicotine use in last 7 days #/ Number of brain illnesses <ul style="list-style-type: none"> - No alcohol in last 7 days 7 Alcohol withdrawal agitation/shakes 8 Alcohol withdrawal DTs 9 Alcohol withdrawal seizures d,dd Illness denial: d (50%), dd (100%) R# Ready Meter engagement level (0-10) ? or ! Drug diversion risk: ? (unclear), ! (yes) v Veteran w Permanently disabled u Unemployed h Homeless p On probation j Incarcerated c Court diversion g Group home #/# Level of care: detox / treatment | <ul style="list-style-type: none"> F10.10 Alcohol Use Disorder - Mild F10.20 Alcohol Use Disorder - Moderate/Severe F10.230 Alcohol Withdrawal Uncomplicated F10.231 Alcohol Withdrawal Delirium (DTs) F10.239 Alcohol Withdrawal Unspecified (Includes with Seizures) F11.10 Opioid Use Disorder - Mild F11.20 Opioid Use Disorder - Moderate/Severe F11.23 Opioid Withdrawal F12.10 Cannabis Use Disorder - Mild F12.20 Cannabis Use Disorder - Moderate/Severe F12.288 Cannabis Withdrawal F13.10 Sedative-Hypnotic-Anxiolytic Use Disorder - Mild F13.20 Sedative-Hypnotic-Anxiolytic Use Disorder - Moderate/Severe F13.23 Sedative-Hypnotic-Anxiolytic Withdrawal F14.10 Cocaine Use Disorder - Mild F14.20 Cocaine Use Disorder - Moderate/Severe F14.23 Cocaine Withdrawal F15.10 Stimulant Use Disorder - Mild F15.20 Stimulant Use Disorder - Moderate/Severe F15.23 Stimulant Withdrawal F16.10 Hallucinogen Use Disorder - Mild F16.20 Hallucinogen Use Disorder - Moderate/Severe Z72.0 Tobacco Use Disorder - Mild F17.20 Tobacco Use Disorder - Moderate/Severe F18.10 Inhalant Use Disorder - Mild F18.20 Inhalant Use Disorder - Moderate/Severe F19.10 Other Psychoactive Substance Use Disorder - Mild F19.20 Other Psychoactive Substance Use Disorder - Moderate/Severe F19.23 Other Psychoactive Substance Use Disorder - Withdrawal |
|---|--|