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**United States Department of Energy  
Office of Hearings and Appeals**

In the Matter of: Personnel Security Hearing )  
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Filing Date: August 11, 2025 ) Case No.: PSH-25-0182  
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Issued: February 18, 2026

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**Administrative Judge Decision**

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Noorassa A. Rahimzadeh, Administrative Judge:

This Decision concerns the eligibility of XXXXXXXXXXXXXXXX (the Individual) to hold an access authorization under the United States Department of Energy's (DOE) regulations, set forth at 10 C.F.R. Part 710, "Procedures for Determining Eligibility for Access to Classified Matter and Special Nuclear Material or Eligibility to Hold a Sensitive Position."<sup>1</sup> As discussed below, after carefully considering the record before me in light of the relevant regulations and the *National Security Adjudicative Guidelines for Determining Eligibility for Access to Classified Information or Eligibility to Hold a Sensitive Position* (June 8, 2017) (Adjudicative Guidelines), I conclude that the Individual's access authorization should be restored.

**I. Background**

In December 2024, a report was made to DOE stating that the Individual, an access authorization holder and employee of a DOE contractor, had tested positive for alcohol via a random breath alcohol test (BAT) that was administered at his place of employment, and he was accordingly placed on administrative leave for forty hours. Exhibit (Ex.) 7 at 30, 40, 42; Ex. 6 at 28.<sup>2</sup> The results of the BAT were positive at .028 and .023. Ex. 6 at 33. Approximately one week later, a "return to work BAT" was administered, which was negative for alcohol. *Id.* at 25, 27.

The Local Security Office (LSO) asked the Individual to complete a Letter of Interrogatory (LOI), which the Individual submitted on March 18, 2025. Ex. 8. The Individual confirmed the positive BAT results and stated that the day prior to testing positive, he had consumed approximately four sixteen-ounce glasses of "craft beer" that consisted of 8.7% alcohol. *Id.* at 44. He indicated that he consumed alcohol over the span of approximately two or three hours, and that he was not

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<sup>1</sup> The regulations define access authorization as "an administrative determination that an individual is eligible for access to classified matter or is eligible for access to, or control over, special nuclear material." 10 C.F.R. § 710.5(a). This Decision will refer to such authorization as access authorization or security clearance.

<sup>2</sup> The exhibits submitted by DOE were Bates numbered in the upper right corner of each page. This Decision will refer to the Bates numbering when citing to exhibits submitted by DOE.

intoxicated. *Id.* at 44–45, 51. He “reported to work” because he was “feeling fine” and he was “able to perform [his] duties.” *Id.* at 45. He revealed that he was receiving outpatient treatment for his alcohol consumption, and that the last time he consumed alcohol was in March 2025. *Id.* at 47–51.

As questions still remained, the Individual underwent a psychological evaluation at the behest of the LSO in May 2025. Ex. 9. The Individual submitted to a Phosphatidylethanol (PEth) test in connection with the examination, which was negative.<sup>3</sup> *Id.* at 63. The DOE-consultant psychologist (DOE Psychologist) who conducted the evaluation determined that pursuant to the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision* the Individual met criteria for Alcohol Use Disorder (AUD), Mild, without adequate evidence of rehabilitation or reformation. *Id.* at 64–65.

The LSO began the present administrative review proceeding by issuing a letter (Notification Letter) to the Individual in which it notified him that it possessed reliable information that created a substantial doubt regarding his eligibility for access authorization. In a Summary of Security Concerns (SSC) attached to the Notification Letter, the LSO explained that the derogatory information raised security concerns under Guideline G (Alcohol Consumption) of the Adjudicative Guidelines. Ex. 1. The Notification Letter informed the Individual that he was entitled to a hearing before an Administrative Judge to resolve the substantial doubt regarding his eligibility to hold a security clearance. *See* 10 C.F.R. § 710.21.

The Individual requested a hearing, and the LSO forwarded the Individual’s request to the Office of Hearings and Appeals (OHA). The Director of OHA appointed me as Administrative Judge in this matter. At the hearing I convened pursuant to 10 C.F.R. § 710.25(d), (e), and (g), the Individual testified on his own behalf and presented the testimony of his wife, his coworker, and a therapist from an intensive outpatient program (IOP) for alcohol treatment in which the Individual participated. *See* Transcript of Hearing, OHA Case No. PSH-25-0182 (hereinafter cited as “Tr.”). The Individual also submitted three exhibits, marked Exhibits A through C. The DOE Counsel submitted twelve exhibits marked as Exhibits 1 through 12 and presented the testimony of the DOE Psychologist.

## II. Notification Letter

Under Guideline G, “[e]xcessive alcohol consumption often leads to the exercise of questionable judgment or the failure to control impulses, and can raise questions about an individual’s reliability and trustworthiness.” Adjudicative Guidelines at ¶ 21. Among those conditions set forth in the Adjudicative Guidelines that could raise a disqualifying security concern are “alcohol-related incidents at work . . . regardless of whether the individual is diagnosed with alcohol use disorder[.]” and “diagnosis by a duly qualified medical or mental health professional . . . of alcohol use disorder.” *Id.* at ¶ 22(b), (d). Under Guideline G, the LSO alleged that in May 2025, the DOE Psychologist diagnosed the Individual with AUD, Mild, without adequate evidence of rehabilitation or reformation. Ex. 1 at 5. Further, in December 2024, the Individual “tested positive

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<sup>3</sup> “PEth can only be made” in the body “when consumed ethyl alcohol reacts with a compound in the Red Blood Cell (RBC) membrane.” Ex. 9 at 63. “PEth can still be detected in the blood for about [twenty-eight] days after alcohol consumption has ceased.” *Id.*

on a random alcohol test[,]” which was administered in his workplace and “yielded results of .028 and .023.” *Id.* The LSO’s invocation of Guideline G is justified.

### III. Regulatory Standards

A DOE administrative review proceeding under Part 710 requires me, as the Administrative Judge, to issue a decision that reflects my comprehensive, common-sense judgment, made after consideration of all the relevant evidence, favorable and unfavorable, as to whether the granting or continuation of a person’s access authorization will not endanger the common defense and security and is clearly consistent with the national interest. 10 C.F.R. § 710.7(a). The regulatory standard implies that there is a presumption against granting or restoring a security clearance. *See Department of Navy v. Egan*, 484 U.S. 518, 531 (1988) (“clearly consistent with the national interest” standard for granting security clearances indicates “that security determinations should err, if they must, on the side of denials”); *Dorfmont v. Brown*, 913 F.2d 1399, 1403 (9th Cir. 1990) (strong presumption against the issuance of a security clearance).

The individual must come forward at the hearing with evidence to convince the DOE that granting or restoring access authorization “will not endanger the common defense and security and will be clearly consistent with the national interest.” 10 C.F.R. § 710.27(d). The individual is afforded a full opportunity to present evidence supporting his eligibility for an access authorization. The Part 710 regulations are drafted so as to permit the introduction of a very broad range of evidence at personnel security hearings. Even appropriate hearsay evidence may be admitted. *Id.* § 710.26(h). Hence, an individual is afforded the utmost latitude in the presentation of evidence to mitigate the security concerns at issue.

### IV. Findings of Fact and Hearing Testimony

Regarding his history of alcohol consumption, the Individual explained that in 2013, his pattern of alcohol consumption changed after he moved to be closer to an elderly loved one. Ex. 9 at 61. At this time, he felt “more stress and more responsibility.” *Id.* He would consume about four to six “beers twice weekly to ‘relax.’” *Id.* Although his alcohol consumption increased in 2024, he soon returned to his previous pattern of consumption of four to six “beers twice weekly.” *Id.* at 62.

After testing positive for alcohol while at work in early December 2024, he consumed alcohol again in mid-December 2024, drinking two beers. *Id.* at 50. He also consumed alcohol on a special family occasion in March 2025, consuming two beers and six glasses of a mixed drink that consisted of 1.5 ounces of liquor mixed into a twelve-ounce drink mix.<sup>4</sup> *Id.* at 61; Tr. at 74.

The Individual enrolled in the IOP in mid-March 2025 and completed the program in May 2025. Ex. 9 at 62; Tr. at 54; Ex. C. IOP group meetings occurred four days per week, lasting two and a half hours each session. Tr. at 83. While attending the IOP, the Individual participated in

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<sup>4</sup> The Individual testified that although he knew that alcohol consumption had caused problems at work, he consumed alcohol on this occasion because “he just [did not] feel like trying to answer everybody’s questions of why [he was not] drinking.” Tr. at 70. He acknowledged that this was “not smart.” *Id.* at 71. When asked why he did not limit his consumption to, for instance, one drink, he admitted that the drinks on that occasion were “probably going down quick[ly.]” *Id.* at 82. Since then, he has learned how to refuse alcohol on social occasions. *Id.* at 71.

approximately twelve or thirteen one-on-one counseling sessions, which occurred immediately prior to group meetings. *Id.* at 61, 83. He learned how to engage in mindful breathing techniques, that spending time in nature helps him calm down, and that it is helpful to him to engage in hobbies. *Id.* at 57–58, 69, 85. He also learned how to set appropriate boundaries to reduce stress. *Id.* at 60–61. After completing the IOP, the Individual began aftercare in May 2025, attending hour-long group meetings two times a week.<sup>5</sup> *Id.* at 63, 86; Ex. B. Through the IOP and aftercare program, the Individual was also exposed to concepts commonly found in Twelve Step programs. Tr. at 63–64. Between May 2025 and December 2025, the Individual submitted to eight monthly PEth tests, all of which were negative. Ex. A.

The Individual and his wife testified that the Individual has a number of reasons to remain sober, including taking a leadership role with his local volunteer emergency services approximately one week prior to the hearing. Tr. at 22, 66–67. In this position, the Individual has to make “hard decisions fast.” *Id.* Further, as one of his children has needs that are different from other children, he must remain sober to be an effective parent. *Id.* The Individual testified that he does not intend to consume alcohol ever again. *Id.* at 24, 33, 66.

The Individual’s wife of twenty-five years testified that the Individual was “very disheartened” on the day that he tested positive for alcohol at work, describing him as being “in shock.”<sup>6</sup> *Id.* at 13, 16. She indicated that when the Individual first began attending the IOP, he was uncertain about what to expect, and it was difficult for him to be vulnerable with other attendees. *Id.* at 18. After he began sharing more of himself with other attendees, he began sharing more with his wife, as well. *Id.* at 19. The Individual’s wife noticed that since undergoing therapy, the Individual has learned how to more effectively communicate, he has become more reflective, and he is able to cope better with life circumstances. *Id.* at 20–22, 32, 34–36. Although the Individual’s wife continues to drink alcohol, she has not noticed any of her alcohol missing and does not have any reason to believe that the Individual consumes her alcohol.<sup>7</sup> *Id.* at 22–23. She indicated that instead of drinking, her husband builds things around their home, engaging in a carpentry hobby, and further, his volunteer work with emergency services has taken up a lot of his time. *Id.* at 31–32.

The Individual’s colleague, who also attended the same IOP sessions the Individual attended, was relieved to see the Individual at his first IOP meeting. *Id.* at 40–41. He indicated that the Individual was a calming force for all IOP attendees, and that although the Individual was initially guarded, he learned to share his feelings more openly with the group. *Id.* at 42–43. He believes that the Individual is “done with [alcohol] now.” *Id.* at 44. When asked if he is a part of the Individual’s support network, he responded, “I think so.” *Id.* at 45.

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<sup>5</sup> As the aftercare program is available to an attendee for an indefinite period of time, the Individual was attending aftercare at the time of the hearing and indicated that he would like to continue to attend twice per week until he reaches one year of sobriety and then to attend once per week thereafter. Tr. at 88.

<sup>6</sup> The Individual indicated that the positive breath test made him feel like “a failure” and that he immediately began thinking about what he could do to regain trust at work. Tr. at 53.

<sup>7</sup> The Individual testified that he is not tempted to consume alcohol, even though his wife keeps alcohol in the home. Tr. at 74.

As indicated above, the Individual underwent a psychological evaluation in May 2025. Ex. 9. The DOE Psychologist diagnosed the Individual with AUD, Mild, without adequate evidence of rehabilitation or reformation. *Id.* at 65. The DOE Psychologist indicated that, as the Individual had completed the IOP as of the date of the psychological evaluation, he could show “adequate evidence of rehabilitation by completing the recommended aftercare program” and providing evidence of his ongoing abstinence by submitting to twelve PEth tests, all of which should be negative. *Id.* In the alternative, the DOE Psychologist recommended that the Individual could remain abstinent for eighteen months and evidence his ongoing abstinence via eighteen negative PEth tests. *Id.*

The DOE Psychologist testified that although the Individual has AUD, Mild, he has “addressed it.” Tr. at 113. He acknowledged that at the time he evaluated the Individual, the Individual had not consumed alcohol since March 2025, so consuming alcohol was “not a routine thing[,]” and it “[did not] trouble [him] as much as it would have, had it been someone else” whose alcohol misuse was ongoing. *Id.* The DOE Psychologist opined that, as of the hearing, the Individual had been rehabilitated, and that his prognosis was “pretty good.” *Id.* at 114. In coming to this conclusion, the DOE Psychologist noted that the Individual had completed the IOP and continued in aftercare for a length of time that was “even more than he was required to do.” *Id.* at 113. He felt that the Individual was forthcoming and understood the tremendous responsibility of his daughter and his new role in his community’s emergency services. *Id.* at 113–14. He believed that the Individual therefore understood that these things are “not something to mess around with[,]” and accordingly, he will remain sober to be at “[his] best.” *Id.* at 114. While the DOE Psychologist acknowledged that twelve months of abstinence would be “even better[,]” as it would increase the probability of remaining abstinent from alcohol, he believed that the Individual had met the minimum requirements for rehabilitation he set forth in the report of his evaluation. *Id.*

## V. Analysis

The Adjudicative Guidelines provide that conditions that could mitigate security concerns under Guideline G include:

- (a) So much time has passed, or the behavior was so infrequent, or it happened under such unusual circumstances that it is unlikely to recur or does not cast doubt on the individual’s current reliability, trustworthiness, or judgment;
- (b) The individual acknowledges his or her pattern of maladaptive alcohol use, provides evidence of actions taken to overcome this problem, and has demonstrated a clear and established pattern of modified consumption or abstinence in accordance with treatment recommendations;
- (c) The individual is participating in counseling or a treatment program, has no previous history of treatment and relapse, and is making satisfactory progress in a treatment program; and

- (d) The individual has successfully completed a treatment program along with any required aftercare, and has demonstrated a clear and established pattern of modified consumption or abstinence in accordance with treatment recommendations.

Adjudicative Guidelines at ¶ 23.

While it is somewhat concerning that the Individual drank alcohol on two occasions after testing positive for alcohol at work, which could suggest poor judgement, I find that the Individual has nonetheless mitigated the stated Guideline G concerns. He stopped consuming alcohol prior to psychological evaluation with the DOE Psychologist, providing proof of his ongoing abstinence via monthly PEth tests, all of which were negative. The Individual enrolled in and completed an IOP, after which he began attending an aftercare program. At the time of the hearing, the Individual had attended approximately seven months of aftercare, and he stated his intention to continue attending aftercare after the hearing.

I find the individual's overall testimony credible, in large part based on his unequivocal testimony of planning to remain abstinent from alcohol and in providing logical and meaningful reasons for remaining sober, like taking care of his daughter and remaining clear-headed in case he needs to respond to a local emergency. Finally, the DOE Psychologist felt that despite having less than the recommended twelve months of abstinence, the Individual had shown adequate evidence of rehabilitation and that his prognosis was good. As he indicated in his testimony, the Individual had shown adequate evidence of rehabilitation because he had exceeded the treatment recommendations made in the report of his evaluation. Accordingly, the Individual has mitigated the stated concerns pursuant to mitigating factors (b) and (d).

## **VI. Conclusion**

For the reasons set forth above, I conclude that the LSO properly invoked Guideline G of the Adjudicative Guidelines. After considering all the evidence, both favorable and unfavorable, in a comprehensive, common-sense manner, including weighing all the testimony and other evidence presented at the hearing, I find that the Individual has brought forth sufficient evidence to resolve the Guideline G concerns set forth in the SSC. Accordingly, the Individual has demonstrated that reinstating his security clearance would not endanger the common defense and security and would be clearly consistent with the national interest. Therefore, I find that the Individual's access authorization should be restored. This Decision may be appealed in accordance with the procedures set forth at 10 C.F.R. § 710.28.

Noorassa A. Rahimzadeh  
Administrative Judge  
Office of Hearings and Appeals