



Psychologist), who conducted a clinical interview of the Individual in July 2025 and issued a report (the Report) of his findings. Ex. 5. During the evaluation, the Individual admitted that from June 2021 to July 2024, he consumed “anywhere from 6 beers to 12 beers depending on whether it was a weeknight or a weekend night.” *Id.* at 29. He also admitted that from July 16, 2024, to July 27, 2024, he consumed 18 to 20, 12-ounce beers, per day. *Id.* at 28. Based on his evaluation of the Individual, the DOE Psychologist opined that the Individual met sufficient diagnostic criteria in the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision (DSM-5-TR)* for a diagnosis of Alcohol Use Disorder (AUD), Severe, without adequate evidence of rehabilitation or reformation. *Id.* at 34.

In September 2025, the LSO informed the Individual, in a Notification Letter, that it possessed reliable information that created substantial doubt regarding his eligibility to hold a security clearance. Ex. 1 at 6–8. 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. *Id.* at 5.

The Individual requested an administrative hearing, and the LSO forwarded the Individual’s request to the Office of Hearings and Appeals (OHA). Ex. 2. The Director of OHA appointed me as the Administrative Judge in this matter. At the hearing I convened pursuant to 10 C.F.R. § 710.25(d), (e), and (g), I took testimony from six witnesses: the Individual, the Individual’s wife, the Individual’s mother, the Individual’s Alcoholics Anonymous (AA) sponsor, the Individual’s friend, and the DOE Psychologist. *See* Transcript of Hearing, OHA Case No. PSH-26-0003 (Tr.). Counsel for the DOE submitted nine exhibits, marked as Exhibits 1 through 9. The Individual submitted eighteen exhibits, marked as Exhibits A through R.

## II. The Summary of Security Concerns

Under Guideline G, “excessive 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. Conditions that could raise a security concern under Guideline G include: “alcohol-related incidents away from work, such as driving while under the influence . . . or other incidents of concern . . .,” “habitual or binge consumption of alcohol to the point of impaired judgment,” and a “diagnosis by a duly qualified medical or mental health professional (e.g., physician, clinical psychologist, psychiatrist, or licensed clinical social worker) of alcohol use disorder.” *Id.* at ¶ 22(a), (c)–(d).

In invoking Guideline G, the LSO cited the following information:

- A. In October 2001, the Individual was arrested and charged with DUI. During his January 2025 ESI, the Individual admitted that before this arrest, he consumed “several shots of vodka” before he attempted to drive and got into an auto accident;
- B. In July 2024, the Individual was arrested and charged with a second DUI. The Individual crashed into a utility pole and woke up in the hospital two days later, with a blood alcohol content (BAC) of .40%;

- C. During his January 2025 ESI, the Individual admitted that the day of his July 2024 DUI, he checked himself into a hospital, and after waiting two hours, he left the hospital and continued drinking heavily for the next several hours;
- D. During his July 2025 psychological evaluation, the Individual admitted to the DOE Psychologist that from June 2021 to July 2024, he consumed six to 12 beers daily, depending on whether it was a weeknight or a weekend night, and from July 16, 2024, to July 27, 2024, he consumed 18 to 20, 12-ounce beers per day;
- E. In his August 2025 Report, the DOE Psychologist opined that the Individual met sufficient *DSM-5-TR* diagnostic criteria for a diagnosis of AUD, Severe, In Early Remission, without adequate evidence of rehabilitation or reformation.

Ex. 1 at 5. The information cited above justifies the LSO's invocation of Guideline G.

### **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 their 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**

Before his October 2001 arrest for DUI, the Individual, who was in college at the time, was at a party, during which he consumed "several shots of vodka," before getting into his car and attempting to drive home. Ex. 9 at 151. While driving home, the Individual got into a car accident, after which he was arrested and charged with DUI. *Id.*

At the hearing, the Individual testified that in 2024, he realized he had a problem with alcohol, but he did not realize how bad it was, and his wife urged him to obtain alcohol treatment. Tr. at 82; Ex. 5 at 30. From March 2024 to May 2024, the Individual received alcohol counseling at a local

addiction treatment facility, three days per week. Ex. 9 at 137; Tr. at 81. The Individual recalled attending group meetings, during which he learned about the triggers to drink alcohol, and the use of alcohol as a coping measure. Tr. at 81. The Individual's primary physician prescribed him Naltrexone to help treat his cravings for alcohol. Ex. 9. at 153; Tr. at 90–91. Although the Individual was attending this program three days per week, he did not believe the treatment was working for him, and he was not fully committed to stop drinking alcohol, so he stopped attending the program. Tr. at 82; Ex. 9 at 152.

On July 27, 2024, the Individual wanted to obtain medical treatment for his alcohol use, so he went to a hospital emergency room and told the hospital staff that he needed help, because he had “been drinking too much.” Tr. at 79; Ex. 9 at 150, 194. After waiting in the emergency room for approximately two hours, the Individual got tired of waiting, left the hospital, and continued to drink alcohol. Tr. at 79, Ex. 9 at 150, 223. Around 5:00 p.m. on July 27, 2024, the Individual was having dinner with his parents, and then woke up in a hospital, with no memory of how he got there. Tr. at 79; Ex. 9 at 150. During his ESI, the Individual reported that hospital staff told him that after he finished having dinner with his parents at a restaurant, he attempted to drive his car home and crashed his car into a utility pole. Ex. 9 at 150–51. He was also told that while he was treated at a hospital, his BAC was measured at .40% and he was arrested for DUI. *Id.* at 151. After this arrest, the Individual was required by the court to install an ignition interlock device in his car, which would prevent him from starting his car if the device measured his BAC at .02 g/210L or higher, for six months. Tr. at 71; Ex. 7 at 137; Ex. 9 at 151. The Individual was also required to complete an Alcohol and Drug Safety Action Program (ADSAP), a safety awareness program. Ex. 9 at 151; Ex. O; Ex. D.<sup>3</sup>

In late July 2024 the Individual started attending AA meetings, five days a week. Ex. 9 at 151–52. But in September 2024, a hurricane hit his area, and the AA meetings were suspended. Ex. 9 at 152; Ex. 5 at 30. Because the Individual was no longer attending AA meetings, he resumed consuming alcohol. Ex. 5 at 32.

On December 3, 2024, the Individual's ignition interlock device detected alcohol on his breath because he had consumed “several drinks” of alcohol the night before, and he could not drive his car to work because his car would not start. Ex. 5 at 32; Tr. at 71–72. He reported that he felt humiliated, so he decided to stop drinking alcohol and he resumed attending AA that evening. Ex. 5 at 32. He attended AA meetings, two times per day. *Id.*; Tr. at 84. During his January 2025 ESI, the Individual acknowledged that his alcohol use has had a negative impact on his life, that since resuming AA in December 2024, he was about to start the 4<sup>th</sup> step of the AA program, and that he intended to stay sober. Ex. 9 at 151–52.

The Individual further testified that he had attended AA continuously since December 2024, and since October 2025 he has attended AA meetings four or five times a week, both virtually and in person. Tr. at 75. The Individual explained that, when compared to his participation in AA in 2024, he now felt a connection to the other AA participants, and he could relate to their struggle with alcoholism. *Id.* at 82–83. The Individual submitted AA attendance sheets showing that he attended AA in person, approximately two to three times a week, from October 15, 2025, to March 8, 2026. Ex. H; Ex. Q. He did not obtain records for his attendance at virtual meetings. Tr. at 83. At the

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<sup>3</sup> The Individual submitted evidence that the criminal charge related to his July 2024 DUI was resolved in December 2025. Tr. at 73; Ex. I; Ex. J; Ex. K.

hearing, the Individual explained that he was currently on step nine of the AA program. *Id.* at 74–75. He stated that he enjoyed attending his AA meetings and he intended to continue attending the program and using his AA sponsor. *Id.* at 89–90.

In January 2025, the Individual started taking classes as part of the ADSAP, which provided alcohol education. Tr. at 84–85.<sup>4</sup> During the ADSAP, the Individual received four weeks of alcohol education classes, from January 7, 2025, to February 6, 2025. Ex. D; Ex. P; Tr. at 85. After completing the ADSAP, the Individual received eight sessions of additional alcohol education at a local addiction treatment facility. Tr. at 74, 85; Ex. D. From March 13, 2025, to April 17, 2025, the Individual completed four weeks of “recovery treatment services,” which involved group discussions about triggers to drink alcohol, “low risk versus high-risk choices” related to alcohol, and coping measures, and required him to review a workbook and complete reading assignments. Tr. at 86; Ex. P. The Individual also underwent EtG<sup>5</sup> testing, in February 2025 and April 2025, the result of which was negative for alcohol, as part of the classes he received at his local addiction facility. Tr. at 91; Ex. B.

From March 4, 2025, until June 10, 2025, the Individual attended five alcohol counseling sessions with a licensed counselor, provided through his employer’s Employee Assistance Program (EAP). Tr. at 87–88; Ex. E. The Individual explained that he talked to the counselor about how he could maintain his sobriety, how he was doing “emotionally,” and his AA meetings. Tr. at 88. The Individual submitted a letter from his counselor, which indicated that the Individual was “motivated and cooperative” during his sessions, that he reported feeling healthier, and that he was “managing stress without alcohol.” Ex. E.

During his July 2025 psychological evaluation, the Individual explained that after losing a job in July 2024, he felt sad and he self-medicated by consuming alcohol. Ex. 5 at 31. He reported that from 2021, until his July 2024 DUI arrest, he drank daily and “anywhere from 6 beers to 12 beers depending on whether it was a weeknight or a weekend night.” *Id.* at 29. He reported that he stopped drinking alcohol as of December 3, 2024, and resumed attending AA that evening. *Id.* at 32. The Individual showed the DOE Psychologist his 24-hour, 30-day, 60-day, 90-day, and 6-month AA chips. *Id.* at 31. The DOE Psychologist noted in his Report that although the Individual completed the ADSAP, that program was a safety awareness program, and was not alcohol treatment. *Id.* at 30. The Report also indicated that the Individual was still using Naltrexone to treat his urges to drink alcohol. *Id.* at 31.

As part of the psychological evaluation, on July 31, 2025, the Individual underwent Phosphatidylethanol (PEth)<sup>6</sup> testing, the result of which was negative for alcohol consumption and

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<sup>4</sup> The Individual explained that he enrolled in the ADSAP on November 8, 2024, but the classes did not begin until January 2025. Tr. at 85; Ex. P.

<sup>5</sup> EtG “is a metabolite of ethyl alcohol that is present in the urine for up to 80 hours after any alcohol beverage is consumed.” *Personnel Security Hearing*, OHA Case No. PSH-24-0154 at 6 (2024) (citing definition of EtG contained in the report of a DOE-consultant psychologist). A negative test “provides strong medical evidence that the subject was abstinent from alcohol during the three days prior to the sample collection.” *Id.*

<sup>6</sup> The Report indicates that a PEth test provides an indication of alcohol consumption over the last month, and “detects any significant alcohol use of the past three to four weeks.” Ex. 5 at 32. “PEth results below 20ng/mL are reported as a ‘Negative’ finding and indicate light drinking or abstinence.” *Id.*

was consistent with the Individual's claim that he had stopped drinking. Ex. 5 at 32, 38–39. The DOE Psychologist found that, because the Individual reported consuming “6–12 beers per day and up to 20 beers per day” immediately before his July 2024 DUI, but had abstained from alcohol for the prior eight months, he met the *DSM-5-TR* criteria for a diagnosis of AUD, Severe, In Early Remission, without adequate evidence of rehabilitation or reformation. *Id.* at 32, 34. To show adequate evidence of rehabilitation from his AUD, Severe, the DOE Psychologist recommended that the Individual continue participating in the AA program, attend at least four AA meetings per week, for an additional four months, continue working the 12 steps of the program with an AA sponsor, and abstain from alcohol through December 2025, supported by monthly PEth testing. *Id.* at 34.

At the hearing, the Individual's AA sponsor testified that he had sponsored the Individual since January 2025. Tr. at 46–47. He attends AA meetings with the Individual once per month and they talk a couple of times per week. *Id.* at 60, 62. He also sees the Individual in person, outside of their AA meetings, once a week. *Id.* at 62. The AA sponsor explained that he and the Individual review the steps of AA program and that the Individual was on step 12 of AA, as of the date of the hearing. *Id.* at 50, 57–58. The Individual submitted evidenced he received eight chips from the AA program. Ex. C; Ex. F. The Individual's AA sponsor explained that each of the Individual's AA chips represent a “continuous time of sobriety,” based on a person's self-reporting of how long they have been sober. Tr. at 59–60. During the AA meetings he attends with the Individual, he observes the Individual share his experiences with alcohol and interact with other AA participants after meetings. *Id.* at 61.

The Individual's mother and wife testified to their awareness of the Individual's participation in AA and indicated that they both attended an AA meeting with the Individual to celebrate one year of his sobriety. Tr. at 17, 33. They both stated that the Individual attended AA meetings several times a week and was following the 12 steps of the program. *Id.* The Individual's wife and the Individual's mother each submitted a letter summarizing the Individual's personal improvement since he stopped drinking alcohol. Ex. L; Ex. M. The Individual's wife also explained that since the Individual stopped drinking alcohol, he had become a better father to his children, and she believed the Individual would stick to this course of treatment because “he likes who he is” now. Tr. at 20–22. The Individual's friend testified that he had known the Individual for 14 years and that he was also aware of the Individual's participation in AA. *Id.* at 38. The friend explained that since the Individual resumed attending AA, the Individual had admitted that he had an alcohol problem. *Id.* at 42. The friend also attended an AA meeting with the Individual to mark one year of the Individual's participation in the program. *Id.* The friend also explained that the Individual expressed to him that he intends to stay sober. *Id.* at 41.

The Individual further testified that on December 3, 2024, after his ignition interlock device prevented him from starting his car, he knew that he was ruining his life and that if he did not make a change, he was “going to lose everything.” Tr. at 72. He explained that in addition to the alcohol treatment he had received, he knows that he can use the services available through his employer's EAP for help, and his local addiction treatment facility told him that he is welcome to return to their program if he needs their help. *Id.* at 90. He also intends to continue using his Naltrexone. *Id.* Finally, the Individual submitted documentary evidence, to support his testimony concerning his abstinence from alcohol. *Id.* at 91. The Individual underwent PEth testing in October 2025, November 2025, December 2025, January 2026, February 2026, and March 2026, the results of which were negative for alcohol consumption. Ex. A; Ex. N; Ex. R.

The DOE Psychologist testified that after listening to the testimony provided during the hearing and reviewing the Individual's exhibits, he believed the Individual was rehabilitated from his AUD, Severe. Tr. at 98. The Individual received alcohol education services through the ADSAP, and he also received alcohol counseling, through the additional classes he took after the ADSAP and through his sessions with his counselor. *Id.* at 99. He noted that the Individual chose AA as his primary manner of rehabilitation from his AUD, and he seemed to be taking the program seriously. *Id.* at 95. He also stated that it was a very good sign that the Individual was attending AA meetings, in person, several days a week. *Id.* at 99–100. Finally, the DOE Psychologist explained that he credited the Individual with abstinence from alcohol since December 2024, and that he had exceeded his treatment recommendations. *Id.* at 94, 97–98. He stated the Individual's prognosis was good. *Id.* at 96.

## 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.

I have thoroughly considered the record of this proceeding, including the submissions tendered in this case and the testimony of the witnesses presented at the hearing. After due deliberation, I have determined that the Individual has sufficiently mitigated the security concerns raised by his history of alcohol-related incidents and problematic alcohol consumption under ¶ 23(b) of the Adjudicative Guidelines.

The Individual testified that although he knew that his level of alcohol consumption was a problem before his July 2024 arrest for DUI, he did not recognize the severity of his problem until December 3, 2024, when his ignition interlock device prevented him from driving his car to work. The Individual also acknowledged that his history of maladaptive alcohol consumption included prior failed attempts to abstain from alcohol because he was not fully committed doing so. He also

admitted during his January 2025 ESI that his alcohol consumption had a negative impact on his life during. The testimony of the Individual's wife, mother, and friend also supports that the Individual admitted that he had a problem with alcohol and is now committed to his sobriety.

The Individual has demonstrated that he took actions to address his maladaptive alcohol consumption. Since December 2024, the Individual resumed attending AA and he submitted AA attendance records to support his testimony that he attended at least two to three AA meetings per week, in person and virtually, from October 2025 to March 2026. The Individual's wife and mother also testified to the Individual's commitment to the AA program and that he was following the steps of the program. The Individual has worked with an AA sponsor since January 2025. The AA sponsor testified that the Individual was an active participant during AA meetings, that he works through AA's steps with the Individual, and that the Individual has interacted with other participants after AA meetings. Since January 2025, the Individual has received alcohol education through the ADSAP and he received additional alcohol-related counseling, which included discussions about triggers to drink alcohol, and coping measures that do not involve consuming alcohol. He also received three months of counseling sessions, with a licensed counselor, through his employer's EAP. The counseling sessions included a discussion of how the Individual could maintain his sobriety.

Furthermore, the Individual submitted two negative Etg tests, dated February 2025 and April 2025, and six negative PEth tests, dated from October 2025 to March 2026, to support his testimony that he abstained from alcohol. The DOE Psychologist explained that at the time of his July 2025 psychological evaluation, he credited the Individual with having abstained from alcohol for eight months. I find the Individual credible as to his testimony that he stopped drinking on December 3, 2024, after he felt humiliated because his ignition interlock device prevented him from driving himself to work. The Individual underwent intermittent alcohol testing between January 2025 and July 2025, the results of which were negative, and the testimony of his mother and wife supports that he has not consumed alcohol. Therefore, I agree with the DOE Psychologist's opinion, that since December 2024, the Individual has demonstrated a clear and established pattern of abstinence from alcohol for approximately 15 months, which exceeds the DOE Psychologist's treatment recommendations. Finally, the DOE Psychologist opined that the Individual was rehabilitated from his AUD, Severe, and that his prognosis was good.

I conclude that the Individual has acknowledged his pattern of maladaptive alcohol use, has provided sufficient evidence that he has taken actions to overcome the problem, and has demonstrated a clear and established pattern of abstinence from alcohol sufficient to mitigate the stated Guideline G concerns. Adjudicative Guidelines at ¶ 23(b).

## **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 concerns set forth in the SSC. Accordingly, the Individual has demonstrated that granting him a 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 granted. This Decision may be appealed in accordance with the procedures set forth at 10 C.F.R. § 710.28.

Diane L. Miles  
Administrative Judge  
Office of Hearings and Appeals