

October 18, 2016

Will Nesbitt, Atty.
The Koffel Law Firm
1801 Watermark Dr. #350
Columbus, OH 43215

Re: Clinical Alcohol Assessment for Zachary D. Leach (DOB – 07/29/1989)

Dear Mr. Nesbitt:

I performed a Clinical Alcohol and Drug Assessment for Mr. Leach in reference to his June criminal trespassing charge in Franklin county. This assessment included a 60-minute clinical interview by telephone, and the administration of:

- A Michigan Alcohol Screening Test (MAST)
- An Alcohol Use Disorder Identification Test (AUDIT)
- A general anxiety/depression screening

The following items provide a summary of the screening results, my diagnostic opinion, and professional recommendations:

MAST: score = 3 / *NEGATIVE SCREEN*; no direct indication of a present alcohol use disorder, scores of 4 or more are indicative of a present alcohol use disorder (screen relative to lifetime use of alcohol)

AUDIT: score = 6 / *NEGATIVE SCREEN*; scores of 8 or more indicate potential *hazardous use*, whereas scores of 15 or more in men indicate a *moderate to severe* disorder may be present (screen predominantly relative to current use of alcohol)

Alcohol Use Risk Factors:

- ☒ negative peer influence/at-risk work environment – acknowledged regular social circle drinks seemingly drinks “more”
- ☐ current stress (relational, work, financial, etc.) – NA
- ☐ physical health concerns – NA
- ☐ anxiety/depression/mental health – NA
- ☐ exposure to trauma – NA
- ☐ family history of substance abuse or alcoholism – none reported
- ☐ contraindicated prescription use – NA
- ☐ other substance use – NA
- ☒ regular use of liquor – monthly
- ☒ hangovers – monthly
- ☐ voluntary treatment history – NA

- ☒ severity of incident – “blackout”
- ☐ legal history – denies previous history

Summary - 4 of 13 concerns, mitigate concern with clinical recommendations

Clinical Interview/Summary: Mr. Leach’s written screenings provided minimal to no indication of an alcohol use disorder at any level (mild, moderate or severe). He reported his normal use of alcohol as 2-3 light or craft beers on 1-3 occasions per week. He also acknowledged that he may have as many 6 alcoholic beverages on up to 2 of those days in a week depending upon social context. On approximately one special occasion per a month, Mr. Leach reported having 8 or 9 beers/mixed drinks.

Mr. Leach and I discussed his criminal trespassing charge and general use of alcohol at length. He acknowledged 2 DSM-5 alcohol use disorder symptoms (see below) and his drinking habits exceed what the NIAAA considers to be “low-risk.” Accordingly, I am including some recommendations in the remainder of this report to help address his problem alcohol use.

DSM-5 Alcohol Use Disorder Symptoms:

- ☒ Use beyond intention
- ☐ Persistent desire or unsuccessful efforts to reduce/quit use
- ☐ Substantial time spent obtaining, using, or recovering from use
- ☐ Strong craving/desire
- ☐ Failure to fulfill a major role (work, home, school)
- ☐ Use despite recurrent social/interpersonal problems
- ☐ Important social, occupational, recreational activities relinquished
- ☒ Physically hazardous use
- ☐ Continued use despite knowledge of contraindicated physical or psychological condition
- ☐ Tolerance
- ☐ Withdrawal symptoms

Summary - 2 of 11 symptoms (Mild 2-3 | Moderate 4-5 | Severe 6+)

DSM-5 DIAGNOSIS in Reference to Substances: F10.10 Mild Alcohol Use Disorder

Treatment Recommendations:

- 1) Outpatient Counseling – 4-6 outpatient sessions with a professional substance abuse counselor; follow-up provider to update recommendations, consult collateral contacts, and discharge as appropriate;

- 2) If another negative consequence is incurred as a result of any alcohol use it is recommended Mr. Leach seek an increased level of treatment or extended outpatient substance abuse counseling as appropriate.

If you or the court possess additional information about Mr. Leach's use of alcohol that might impact the outcome of this assessment, I would be happy to review it and consider appropriate modifications or amendments to the present report.

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

Sincerely,



Trevor C. Davis, CDCA
Certificate # 150427
cc: Zachary Leach

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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.