

June 25, 2016

David Johnson, Attorney at Law Johnson Legal, LLC 1900 Polaris Parkway Suite 450 Columbus, Ohio 43240

Re: Clinical Alcohol and Drug Assessment for Dante D'Andrea (DOB – 06/14/1997)

Dear Mr. Johnson:

I performed a Clinical Alcohol and Drug Assessment for Mr. D'Andrea in reference to his May 2016 possession of cannabis charge in Delaware County. This assessment included a 60-minute in-person clinical interview, and the administration of:

- A Substance Abuse Subtle Screening Inventory (SASSI-3)
- A Michigan Alcohol Screening Test (MAST)
- An Alcohol Use Disorder Identification Test (AUDIT)
- A Drug Abuse Screening Test (DAST)
- A general anxiety/depression screening

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

SASSI-3: overall scores indicated a *low probability* of a moderate to severe substance use disorder; screening was valid and covered a lifetime frame of reference;

MAST: score = 0 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use; responses were congruent with clinical interview

DAST: score = 1 / NEGATIVE SCREEN; scores of 1-2 = low level concern, 3-5 moderate, 6-8 substantial, 9-10 severe

Substance Use Risk Factors:

- family history = N/A
- prior substance-related legal charges = None
- early onset of substance use = N/A
- prior substance use treatment = None
- peer influences = few peers engage in substance use
- work environment = N/A
- contraindicated prescription use = N/A
- anxiety or depression symptoms = N/A
- general health problems = N/A
- current family stress = N/A

Substance Use Risk profile = 1 of 10; low risk profile

Present Use Status: presently not using alcohol or other substances

Anxiety/Depression Screening: no clinically significant concerns reported

Substance Related Legal History Reported: denies any previous history of alcohol or substance related arrests/legal charges

Clinical Interview/Summary:

ALCOHOL - Mr. D'Andrea's written screenings provided no indications of an alcohol use disorder at any level (mild, moderate or severe). He reported his normal use of alcohol before this charge as 1-3 drinks on 1 occasions per month. Mr. D'Andrea denied engaging in any alcohol use since May 2016 in which he had one beer with his parents.

Mr. D'Andrea and I discussed his past use of alcohol, present abstinence, and future plans for alcohol consumption at length. Mr. D'Andrea's clinical interview did not reveal any indications of an alcohol use disorder. We reviewed World Health Organization standards for low risk problem alcohol use and strategies Mr. D'Andrea can utilize to maintain a responsible use of alcohol.

ILLICIT DRUG – Mr. D'Andrea acknowledged minimal experimentation with cannabis beginning his junior year of high school. Throughout his senior year of high school, Mr. D'Andrea reported smoking cannabis on average of 2 occasions per month. He stated that he used cannabis on only 2 occasions throughout his freshman year at Bluffton University. Mr. D'Andrea shared that his overall cannabis use decreased because of lack of access, increased drug testing of athletes, and decrease of use by other peers. He denied experimentation with any and all other illicit substance categories including: stimulants, hallucinogens, inhalants, opiates, etc. I found no part of Mr. D'Andrea's report suspect of minimization or deception.

PRESCRIPTION DRUG – Mr. D'Andrea denied any recreational use of prescription medications which are prone to abuse including stimulant/ADD medications, narcotic painkiller medications, and anxiolytics and sleeping medications. The interview did not reveal hesitation, discrepancy with his written screenings or other non-verbal signs of minimization or covering a prescription drug use problem.

SUMMARY – At present I do not find evidence that Mr. D'Andrea meets or has met a DSM-5 substance use disorder.

DSM-5 DIAGNOSIS in Reference to Substances: Z03.89 (suspected substance use condition not found)



Treatment Recommendations:

- 1) There are no clinical recommendations at this time;
- 2) <u>If another negative consequence</u> is incurred as a result of any alcohol or other substance use it is recommended Mr. D'Andrea seek further evaluation and follow all updated treatment recommendations.

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

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

Sincerely,

Ryan P. Smith MSW, LISW-S, LICDC, SAP

SW Lic. #I.1000155-S, CD Lic. #101182

cc: Dante D'Andrea

Kyan P. Snith

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Diagnostic Conclusions / Limitations: Directions Counseling Group provides Clinical Alcohol and Drug 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.

