

July 14, 2016

Bradley P. Koffel, Attorney  
The Koffel Law Firm  
1801 Watermark Drive, Suite 350  
Columbus, Ohio 43215-7093

**Re: Clinical Alcohol Assessment for Wayne E. Waite (DOB – 04/08/1957)**

Dear Mr. Koffel:

I performed a Clinical Alcohol Assessment for Mr. Waite in reference to his OVI charge in Franklin County in June of 2016. This assessment included a 50-minute clinical interview by videoconference, 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*; mitigate any specific items of concern with clinical recommendations

**AUDIT:** score = 5 / *NEGATIVE SCREEN*; scores of 8 or more indicate *hazardous use*, scores of 15 or more in men indicate *moderate to severe* disorder present

**Alcohol Use Risk Factors:**

*Concerns/Risks*

- ☐ previous legal history – denies prior history
- ☐ severity of incident – NA
- ☐ anxiety/depression/mental health – NA
- ☐ other substance use – NA
- ☐ family history – none reported
- ☐ prior treatment history – NA
- ☐ peer influences– NA
- ☒ work environment –reports some elevated stress related to 50-60 per week workload
- ☐ contraindicated prescription use – NA
- ☒ general health problems – reports chronic vascular condition present
- ☐ current family stress – NA

*Summary - 2 of 11 concerns, mitigate concern with clinical recommendations*

**Clinical Interview/Summary:**

Mr. Waite's written screenings provided no indication of an alcohol use disorder at any level (mild, moderate or severe). He reported his normal use of alcohol before this charge as 2-3 drinks on 4-5 occasions per week. He also acknowledged use of 2-4 drinks on 6 special occasions (weddings, birthdays, etc.) per year. Mr. Waite stated that he has abstained from all alcohol use since the evening of his charges with no difficulty (denies withdrawal symptoms) and with no plans to resume use in the future.

Mr. Waite and I discussed the details of the evening he was charged with the OVI as well as his historical use of alcohol. Although I did not find him meeting DSM-5 alcohol use disorder criteria, I did note some mild risks (above) which I believe would be prudent to address in a proactive manner to avoid any future problems with alcohol. Accordingly, I am providing some detailed recommendations below.

Mr. Waite did share with me that he has been meeting with an outpatient mental health therapist on a regular basis within this past year and has found this to be a helpful means of support to effectively process ongoing stressors. I am recommending that he continue to engage in sessions with his counselor to address ongoing stressors inherent to his professional life which include long work hours, as well as for the overall support the therapy provides him. Additionally, since Mr. Waite does have some chronic vascular health issues, I am recommending that his doctor or specialist be made aware of his choice to discontinue using alcohol. Finally, I am recommending that Mr. Waite attend a local victim impact panel to further his insight into the risks associated with alcohol use and driving.

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

**Treatment Recommendations:**

- 1) Outpatient Counseling – continue weekly sessions with current provider; recommend discussion of this assessment report with therapist and periodic discussion of the impact of discontinuing alcohol as well as future decisions or concerns regarding alcohol use;
- 2) Physician consult – discuss decision to discontinue use of alcohol with primary care physician in order to track the impact to overall health, if any;
- 3) Attend a local MADD Victim Impact Panel, 5900 Roche Dr. #250 Columbus, OH 43229, Phone - 614.885.6233, email - oh.state@madd.org
- 4) If another negative consequence is incurred as a result of any alcohol use it is recommended Mr. Waite seek further evaluation and follow all treatment recommendations.

If you or the court possess additional information about Mr. Waite'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. Waite, and yourself in this important matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'Anita McLeod', with a stylized, cursive script.

Anita McLeod, LCSW, SAP  
LIC # 079668-1  
cc: Wayne E. Waite

**Prohibition Against Re-Disclosure:** This information has been disclosed to you from records protected by Federal Confidentiality rules. The Federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 C.F.R Part 2. A general authorization for the release of medical or other information is not sufficient for this purpose. The Federal rules restrict any use of information to criminally investigate or prosecute any alcohol or drug abuse client. Drug abuse patient records are also protected under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), 45 C.R.R parts 160 & 165. (These conditions apply to every page disclosed and a copy of this authorization will accompany every disclosure.)

**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.