

July 24, 2014

Shawn Riehl, Attorney
Vickery, Riehl & Alter
500 S. Front St., Ste. 200
Columbus, OH 43215

Re: Clinical Alcohol Assessment for Jason Burns

Dear Mr. Riehl:

I performed a Clinical Alcohol Assessment for Mr. Burns in reference to his pending OVI charge. This assessment included the administration of: a Michigan Alcohol Screening Test (MAST), an Alcohol Use Disorder Identification Test (AUDIT), an anxiety & depression screening, and a 50 minute face-to-face video-conferenced clinical interview. The following are my findings and recommendations:

MAST: score = 8; indicates problem alcohol use, 6 of 8 points attributed to OVI charges
AUDIT: score =1; scores above 8 indicate hazardous use of alcohol, above 13 suggests DSM 5 disorder present

DSM/Other Substance Related Concerns:

Anxiety/Depression Screening: reported mild symptoms of insomnia and low self-esteem, no signs /symptoms of immediate mental health crisis reported or found

Substance Related Legal History Reported: 2/12 OVI (physical control/ .15 or .16 BAC), 6/06 (.138 BAC)

Clinical Interview/Summary: Mr. Burns's screenings provided indication of a mild to moderate alcohol use disorder. He reported his normal use of alcohol as 3-5 drinks on 1-2 occasions per week. He also acknowledged use slightly beyond his normal amount on special, though infrequent, occasions (weddings, birthdays, etc.). We discussed Mr. Burns legal charges at length and I had the clinical impression that he is appropriately reducing his consumption on a per use basis. Nevertheless, we discussed the risks and concerns presented by his OVI history. Mr. Burns understood my concerns and expressed a high level of motivation to continue to reduce alcohol related risks and avoid any impaired driving. Accordingly, he was very open to the treatment suggestions presented below.

DSM 5 DIAGNOSIS in reference to substances: 303.90 (moderate alcohol use disorder)

Treatment Recommendations:

- 1) Education, recommend 9 hrs. of Ohio Health's Drug/Alcohol Awareness Series (contact 614-566-3700);

- 2) Counseling, recommend 5-8 outpatient sessions with a professional substance abuse counselor; update recommendations at session five;
- 3) If another negative consequence is incurred as a result of any alcohol use it is recommended Mr. Burns seek an increased level of treatment or extended outpatient substance abuse counseling as appropriate.

Mr. Burns has signed a release to communicate the results of this assessment to you. Feel free to contact me should you have any questions about his condition.

Sincerely,



Brian Davis, LISW-S, SAP
cc: Jason Burns

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.