

October 25, 2016

Codi Hawks, P.O. Franklin County Municipal Court Department of Probation Services 375 South High St., 8th Fl. Columbus, Ohio 43215

Re: Clinical Alcohol Assessment for Ryan S. Gross (DOB – 03/07/1980)

Dear Ms. Hawks:

I performed a Clinical Alcohol Assessment for Mr. Gross in reference to his OVI charge in Franklin county. This assessment included a 55-minute clinical interview and the administration of:

- Substance Abuse Subtle Screening Inventory (SASSI-3)
- 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:

SASSI-3: no indicators of a present alcohol or substance use disorder (mild, moderate, or severe)

MAST: score = 3 / *NEGATIVE SCREEN*; no obvious indications of a present alcohol use disorder (screen relative to lifetime use of alcohol)

AUDIT: score = 3 / 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 – NA
☐ current stress (relational, work, financial, etc.) – NA
☐ physical health concerns – NA
☐ anxiety/depression/mental health – NA
□ exposure to trauma – NA
$\hfill\Box$ family history of substance abuse or alcoholism – none reported
□ contraindicated prescription use – NA
□ other substance use – NA
☐ regular use of liquor – NA

 □ voluntary treatment history – NA □ severity of incident – uncertain of BAC (knows it was higher than .10) □ legal history – 2002 OVI (.10 BAC)
Summary - 1 of 12 concerns
Clinical Interview/Summary: Mr. Gross' written screenings provided no indication of an alcohol use disorder at any level (mild, moderate or severe). He reported his normal use of alcohol as 3-5 beers on a less than weekly basis. He reported no difference in the amount consumed if he was attending a special event or celebration.
Mr. Gross and I discussed his legal charge and general use of alcohol at length. I did not find him meeting DSM-5 alcohol use disorder criteria for diagnosis and his drinking habits seem to be relatively low-risk. After attending AA meetings (twice a week) for three months and a victim impact panel, Mr. Gross has fulfilled what I would have recommended for him in terms of appropriate interventions.
articulate and convincing about his new zero-tolerance policy for drinking and driving.
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 - 1 of 11 symptoms (Mild 2-3 Moderate 4-5 Severe 6+)
DOM 5 DIACNOSIS in Defense to Substances 702.00 (supported substance use

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

Treatment Recommendations: Having found no basis for a DSM-5 alcohol use disorder I have no further recommendations for Mr. Gross at this time. He is to provide you with signatures verifying his 12-step meeting attendance and proof of completion for his victim impact panel.

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

Sincerely,

Trevor C. Davis, CDCA Certificate # 150427

Reviewed by Brian T. Davis, LISW-S, SAP LIC# I-7948

cc: Ryan S. Gross

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.

