

June 22, 2016

Mark E. Rappl, Attorney Naylor & Rappl Law Office 1111 Lincoln Mall, Suite 300 Lincoln, NE 68508-3908

Sue Kelly Moore, Associate Director for Student Conduct University of Nebraska–Lincoln Division of Student Affairs 106 Canfield Administration Building P.O. Box 880423 Lincoln, NE 68588-0423

Re: Clinical Alcohol Assessment for Trey P. Stephens (DOB – 01-17-1995)

Dear Mr. Rappl and Ms. Moore:

I performed a Clinical Alcohol Assessment for Mr. Stephens in reference to his procurement charge in Lancaster County. This assessment included a 50-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 = 0 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use (screen relative to lifetime use of alcohol)

AUDIT: score = 5 / 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 relative to current use of alcohol)

Alcohol Use Risk Factors:

☐ legal history – denies previous l	history
severity of incident – NA	

□ anxiety/depression/mental health – NA
☐ general health issues – NA
□ exposure to trauma – NA
☑ use of liquor – use of 80 proof liquor on approximately 10 occasions in a year
□ other substance use – NA
□ contraindicated prescription use – NA
☐ family history – none reported
□ prior treatment history – NA
☐ negative peer influence – elevated alcohol consumption in college environment
☐ at-risk work environment – NA
□ current stress (relational, work, etc.) – NA
□ poor academics – 3.49 GPA

Summary - 2 of 13 concerns, mitigate concern with clinical recommendations

Clinical Interview/Summary: Mr. Stephens' 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 2-4 light beers on 1-2 occasions per week. He also acknowledged use in times of special occasion where he could have as many as 10 drinks, these "occasions" came about approximately 10 times in the past year.

Mr. Stephens and I discussed his procurement charge and general use of alcohol at length. While I did not find him meeting DSM-5 alcohol use disorder criteria, I am providing him with a treatment recommendation in an effort to curb his excess use of alcohol which has been occurring on an almost monthly basis during the school year. While I commend him for the responsible decision he made at time of his incident, his drinking habits are outside of what is recommended by the NIAAA for "low-risk" alcohol use. His follow-up care will be focused on helping him develop the understanding and habits necessary to drink in moderation in situations where he chooses to use alcohol.

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

Treatment Recommendations: <u>Outpatient Counseling</u> – 3-6 outpatient sessions with a professional substance abuse counselor; follow-up provider may update recommendations or discharge as appropriate.



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

Sincerely,

Trevor C. Davis, CDCA

Cert.# 150427

Reviewed by Ryan Smith, MSW, LISW-S, LICDC, SAP

SW Lic. #I.1000155-S; #101182

cc: Trey P. Stephens

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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.

