

February 4, 2016

Brian Nelson, Probation Officer
Chillicothe Municipal Court - Department of Probation
95 East Main Street
Chillicothe, OH 45601

Re: Clinical Alcohol Assessment for Megan T. Grow (DOB – 11/06/1992)

Dear Mr. Nelson:

I performed a Clinical Alcohol Assessment for Ms. Grow in reference to her December 2015 physical control charge in Ross 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; lifetime frame of reference

AUDIT: score =1 / *NEGATIVE SCREEN*; scores of 8 or more indicate *hazardous use*, scores of 13 or more in women indicates *moderate to severe* disorder present; screening had a past twelve months frame of reference

Alcohol Use Risk Factors: denied any family history of problem alcohol or other substance use disorder, denied recurrent use of alcohol to relieve emotional distress, and denied any past instance of excessive alcohol use

Present Use Status: presently not using alcohol; plans to resume alcohol use at a responsible level once terms of probation have been completed

Anxiety/Depression Screening: no clinically significant concerns reported or identified

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

Clinical Interview/Summary: Ms. Grow's written screenings provided no indications of an alcohol use disorder at any level (mild, moderate or severe). She reported her initial use of alcohol was at age 21. Her normal use of alcohol before this charge as 1-2 mixed

drinks on 2-4 occasions per month. She denied experiencing any changes to her alcohol use on special occasions such as birthdays, celebrations, or holidays.

Ms. Grow and I discussed her alcohol-related incident and her general use of alcohol at length. I was unable to find evidence that Ms. Grow currently meets DSM-5 criteria for an alcohol use disorder. I did not find evidence that Ms. Grow is experiencing a tolerance or withdrawal condition to alcohol. I did not find evidence of recurrent use beyond intention, preoccupation with alcohol use, or loss of control of alcohol.

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

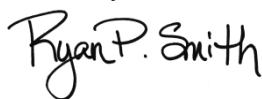
Treatment Recommendations:

- 1) There are no clinical recommendations at this time.
- 2) If another negative consequence is incurred as a result of any alcohol use within the next two years, it is recommended Ms. Grow seek a further evaluation and follows all updated treatment recommendations.

If the court possesses additional information about Ms. Grow's use of alcohol 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, Ms. Grow, and yourself in this important matter.

Sincerely,



Ryan P. Smith MSW, LISW-S, LICDC, SAP
SW Lic. #I.1000155-S, CD Lic. #101182
cc: Megan T. Grow

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.