

November 8, 2016

David P. Rieser, Attorney
502 South 3rd Street
Columbus, Ohio 43215-5702

Re: Clinical Alcohol Assessment for Ryan Sell (DOB – 04/07/1990)

Dear Mr. Rieser:

I performed a Clinical Alcohol Assessment for Mr. Sell in reference to his July 2016 OVI charge in Franklin County. This assessment included a clinical interview, and the administration of:

- A Michigan Alcohol Screening Test (MAST)
- An Alcohol Use Disorders 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 = 9 / *POSITIVE SCREEN*; clear indications of problem alcohol use relating to different incidents and time periods

AUDIT: score =12 / *POSITIVE SCREEN*; scores of 8 or more indicate *hazardous use*, scores of 15 or more in men indicate *moderate to severe* disorder present, mitigate concern items with educational and/or clinical recommendations

Substance Related Legal History Reported:

2008 (age 18) – refused
2011 (age 21) – approx.. .3 BAC/ 5 year suspension
2013 (age 23) – refused / 10 year suspension
2016 (age 26) – current case .366 BAC

DSM - 5 Alcohol Use 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 contra physical or psychological condition

- ☒ Tolerance
☐ Withdrawal symptoms

Summary - 6 of 11 symptoms (2-3=mild, 4-5=moderate, 6+ = severe)

Clinical Interview/Summary: Mr. Sell's written screenings provided clear indications of an alcohol use disorder beyond the mild level. He was open in the clinical interview and shared information indicating 5 problem alcohol use symptoms (see above) which bring his diagnosis to the level of at least moderate (severe may be ruled out). He has stopped drinking since the July charge but acknowledged that his use of alcohol started early in his life (10 years old) and has involved substantial tolerance to alcohol.

Mr. Sells clearly needs intensive treatment soon, before a relapse occurs which would likely be destructive to himself and others if not life threatening. His high alcohol tolerance and extensive OVI history suggest that his judgement under the influence is severely affected. His past treatment has included: 45 days of residential treatment at Bassett House at age 15; one year of Drug Court in Fairfield County at age 16-17; and Licking County Alcohol Prevention Program (LAPP) at age 23-24. Given the frequency and familiarity Mr. Sell has with alcohol treatment programs as well as his relatively low level of motivation, I recommend that Mr. Sell identify an individual substance abuse professional to simultaneously assist him while he is completing any Intensive Outpatient Program and preferably one who regularly collaborates with the IOP. This recommendation should provide greater accountability to help Mr. Sell work through expected treatment resistance, shallow compliance and decrease the likelihood of relapse.

DSM-5 DIAGNOSIS in Reference to Substances: F10.20 severe alcohol use disorder (early remission)

Treatment Recommendations:

- 1) Complete an Intensive Outpatient Program – recommend Cornerstone of Recovery 614-889-0000, this local program has a reputation for being helpful in terms of overcoming treatment resistance and problems with sustaining motivation to recover; if finances present an obstacle contact Maryhaven Addiction Treatment at 614-445-8131;
- 2) Smart Recovery Support Meetings – since client has found AA/12 Step approach to be familiar and unhelpful an alternative support group approach is *Smart Recovery* which uses a Motivational and Cognitive Behavioral Approach to sobriety. There are currently 5 locations in Columbus and 4 meetings per week which can be identified at <https://www.smartrecovery.org/local/#s=1>;
- 3) Outpatient Therapy Simultaneous with IOP – with a substance abuse professional that is trained in Motivational Interviewing (MI) and recommended by the Intensive Outpatient Program; recommend minimum of 1 year of outpatient monitoring therapy with same substance abuse professional;

- 4) Abstinence – abstain from all alcohol use permanently; continue Interlock Device in vehicle for 6-month minimum, add SCRAM or similar device if relapse occurs, also consider Inpatient/Residential treatment in the event of relapse;
- 5) Release Treatment Providers and Probation Department to share treatment information.

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

Sincerely,



Brian T. Davis, LISW-S, SAP
LIC# I-7948
Cc: Ryan Sell

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.