

July 7, 2016

Steven T. Fox, Attorney
The Steven T. Fox Law Firm
1335 Dublin Road, Suite 205-A
Columbus, Ohio 43215-7044

Re: Clinical Alcohol Assessment for Tracy A. Yunkin (DOB – 05/04/1985)

Dear Mr. Fox:

I performed a Clinical Alcohol Assessment for Mr. Yunkin in reference to his May 2016 OVI charge in Franklin County. This assessment included a 60-minute in-person clinical interview, and the administration of:

- A 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: scores indicated an overall *low probability* of a moderate to severe substance use disorder; screening was valid and covered a lifetime frame of reference

MAST: score = 2 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use; all points were related to his 2 alcohol-related legal charges (screen relative to lifetime use of alcohol)

AUDIT: score = 2 / *NEGATIVE SCREEN*; scores of 8 or more indicate *hazardous use*, whereas scores of 15 or more in men indicate a *moderate to severe* disorder may be present (screen relative to use of alcohol within the past 24 months)

Alcohol Use Risk Factors:

- ☒ legal history – prior alcohol-related charge in 1985
- ☐ severity of incident – NA
- ☐ anxiety/depression/mental health – NA
- ☐ general health issues – NA
- ☐ exposure to trauma – NA
- ☐ use of liquor – NA
- ☐ other substance use – NA
- ☐ contraindicated prescription use – NA
- ☐ family history – none reported

- ☒ prior treatment history – alcohol education following 1985 charge
- ☐ negative peer influence – NA
- ☐ at-risk work environment – NA
- ☐ current stress (relational, work, etc.) – NA

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

Clinical Interview/Summary:

ALCOHOL – Mr. Younkin's written screenings provided no indication of an alcohol use disorder at any level (mild, moderate or severe). He reported his normal use of alcohol over the past 2 years prior to this charge as 1-3 drinks on 0-1 occasions per month. He reported no difference in the amount consumed if he was attending a special event or celebration.

Mr. Younkin and I discussed his May 2016 OVI incident and his general use of alcohol at length as well as reviewing standards for responsible alcohol use set forth by the National Institute of Alcoholism and Alcohol Abuse and the World Health Organization. Mr. Younkin's clinical interview revealed several instances of binge alcohol use over the past 2 years and one instance of use beyond intention in the past 12 months. However, I did not find sufficient positive criteria of an alcohol use disorder per DSM-5 criteria.

DSM-5 Alcohol Use Symptoms:

- ☐ Recurrent use beyond intention
- ☐ Persistent desire or unsuccessful efforts to reduce/quit use
- ☐ Substantial time spent obtaining, using, or recovering from use
- ☐ Strong craving/desire
- ☐ Recurrent failure to fulfill a major role (work, home, school)
- ☐ Continued use despite recurrent social/interpersonal problems
- ☐ Important social, occupational, recreational activities relinquished
- ☐ Recurrent physically hazardous use
- ☐ Continued use despite knowledge of contraindicated physical or psychological condition
- ☐ Tolerance
- ☐ Withdrawal symptoms

Summary - 0 of 11 symptoms (Mild 2-3 | Moderate 4-5. Severe 6+)

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

Treatment Recommendations:

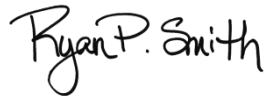
Having found no basis for a DSM-5 alcohol use disorder, I have no further recommendations for Mr. Younkin at this time. However, if another negative

consequence is incurred as a result of any alcohol use within the next 2 years, it is recommended Mr. Younkin seek an updated evaluation where outpatient counseling is the minimum level of care.

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

Sincerely,



Ryan P. Smith MSW, LISW-S, LICDC, SAP
SW Lic. #I.1000155-S, CD Lic. #101182
cc: Tracy A. Younkin

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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.