

January 16, 2015

David C. Washlock, PO
Lake County Municipal Court
7 Richmond St.
Painesville, OH 44077

Re: Clinical Alcohol Assessment for John Fruscella

Dear Mr. Washlock:

I performed a Clinical Alcohol Assessment for Mr. Fruscella in reference to his December 2013 OVI charge in Lake County. This assessment included the administration of: a Michigan Alcohol Screening Test (MAST), an Alcohol Use Disorder Identification Test (AUDIT), an anxiety/depression screening, and a 50 minute face-to-face videoconference clinical interview. The following items provide a summary of the screening results, my diagnostic opinion and professional recommendations:

MAST: *NEGATIVE SCREEN*; no direct indication of problem alcohol use, suggest further screening due to DUI charge history

AUDIT: score = 0 / *NEGATIVE SCREEN*; scores above 8 indicate hazardous use, above 13 indicates moderate to severe disorder present

DSM/Other Substance Related Concerns: denies subtle indicators of problem alcohol use including mild hangovers, mild memory loss after use, repeat use to relieve emotional or work stress, previous treatment, conflict with significant others during or shortly after use of alcohol, guilt or regret associated with use

Anxiety/Depression Screening: no clinically significant concerns reported

Substance Related Legal History Reported: previous OVI charges in 2000 and 2010 with

Clinical Interview/Summary: Mr. Fruscella written screenings provided no indication of an alcohol use disorder at any level (mild, moderate or severe). He reported that his lifetime drinking habits have been very conservative in spite of his OVI history. He defined it as an occasional single drink with a meal during the week and a maximum of 3 drinks during a weekend event or gathering. He acknowledged he had a high test OVI in 2013 and though it didn't fit his normal pattern of alcohol use he made a clear and definite decision to stop using alcohol regardless of the presence or absence of any clinical diagnosis. Mr. Fruscella was very articulate about why it simply was not worth continuing to use alcohol, citing the threat it might pose to his career, financial and social life if he were to have another alcohol related legal consequence. Mr. Fruscella reports that he has not had any alcohol since his charge and that he not only has not had trouble abstaining, but he said it makes him feel good about himself.

DSM 5 DIAGNOSIS in reference to substances: V71.09 (none found)

Treatment Recommendations:

Under normal circumstances after 3 lifetime DUI charges I would recommend some alcohol education and or counseling at a minimum. In Mr. Fruscella's case, since he has not drank alcohol for 13 months, has had no reoccurring legal charges, and is quite articulate about his motivation and means to continue abstaining I am simply recommending that he continue abstaining indefinitely. Given the length of time that has passed since he quit drinking I think education and/or counseling would be of very limited value at this point. If he has any inclination to resume use of alcohol in the future I would highly recommend that he discuss it with a professional substance abuse counselor at length. If you possess contradictory information such as positive screening results or substance related legal charges in the last 13 months please have Mr. Fruscella sign a release so we can speak and I would be happy to update my conclusions and recommendations.

Thank you for the opportunity to assist the court, Mr. Fruscella, and yourself in this important matter.

Sincerely,



Brian Davis, LISW-S, SAP
cc: John Fruscella

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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.