

February 16, 2016

Dion J. Custis, Attorney
The Law Offices of Dion J. Custis, P.C.
400 E. 20th Street
Chevenne, WY 8200

Re: Clinical Alcohol Assessment for Ronald Whitaker (DOB - 01/01/1954)

Dear Mr. Custis.

I performed a Clinical Alcohol Assessment for Mr. Whitaker in reference to his October 2015 DUI charge in Laramie 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 = 1 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use

AUDIT: score = 1 / *NEGATIVE SCREEN*; scores of 8 or more indicate *hazardous use*, scores of 15 or more in men indicates *moderate to severe* disorder present

Alcohol Use Risk Factors:

Concerns/Risks

- October 2015 arrest reported as high BAC (.19)

No Concern

- family history (none reported)
- prior treatment history (NA)
- peer influences (NA)
- work environment (NA)
- contraindicated prescription use (NA)
- general health problems (NA)
- current family stress (NA)

Present Use Status: not using alcohol since the October 2015 arrest

Anxiety/Depression Screening: no clinically significant concerns reported

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

Clinical Interview/Summary: Mr. Whitaker'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 before this charge as 1-2 drinks on 0-1 occasions per week. He also acknowledged use of 2-3 drinks on infrequent special occasions (weddings, birthdays, etc.)

Mr. Whitaker and I discussed his DUI incident and general use of alcohol at length. Since he reported a high test DUI (.19 BAC) I searched for signs of a pattern high quantity or binge use of alcohol. I was unable to find such evidence and in my best clinical judgement believe it is plausible that the incident was an aberration from his normal behavior regarding surrounding alcohol. While I did not find indications of a historical, recent or current DSM-5 alcohol use disorder I believe that the high test provides a basis to recommend that he complete some basic alcohol education.

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

Treatment Recommendations:

- 1) Alcohol & Drug Education 6 hrs. minimum of alcohol/drug education including a combination of any of the following local class (hospital, treatment center, or community facility), AA/NA, MADD VIP, online alcohol or drug education course (logancourtclass.com or onlinealcoholclass.com):
- 2) <u>If another negative consequence</u> is incurred as a result of any alcohol use it is recommended Mr. Whitaker seek further evaluation and follow all treatment recommendations.

If the court possesses additional information about Mr. Whitaker'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, Mr. Whitaker, and yourself in this important matter.

Sincerely,

Brian T. Davis, LISW-S, SAP

LIC# I-7948

cc: Ronald Whitaker

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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.

