

August 17, 2016

Florida Dept. of Corrections, Probation, And Parole
499 US-231
Panama City, FL 32405

Re: Clinical Alcohol and Drug Assessment for Matthew Alan Conwell (DOB – 08/05/1975)

Dear Officer Alcorn:

I performed a Clinical Alcohol and Drug Assessment for Matthew Conwell per his probationary requirement which, part of his sentencing in stemmed from June 2014 petit theft and felony battery charges in Okloosa County. This assessment included a 60-minute clinical interview by telephone, the collection of collateral contacts, review of his police report, and the administration of:

- A Michigan Alcohol Screening Test (MAST)
- A Drug Abuse Screening Questionnaire (DAST-10)
- A general anxiety/depression screening

The following items provide a summary of the screening results, my diagnostic opinion and professional recommendations:

MAST: score = POSITIVE; direct and indirect indication of problem alcohol use, mitigate concerns with clinical recommendations (screen relative to lifetime use of alcohol)

DAST-10: score = 2 / LOW RISK SCREENING;(scores of 3-5 are to be considered of “moderate” risk level)

Alcohol & Substance Use Risk Factors:

- ☒ legal history – 1998 possession of controlled substance and cultivation charges; DUI in March 2012 (.09)
- ☐ severity of incident – alcohol not involved
- ☐ anxiety/depression/mental health – none reported
- ☐ physical health issues – nothing outstanding reported (active treatment by team of physicians for head injury)
- ☒ exposure to trauma – assaulted in February 2012
- ☐ regular use of liquor – NA
- ☐ prominent family history of abuse – acknowledged one blood relative
- ☐ negative peer influence – NA
- ☒ at-risk work environment – unemployed (social security)
- ☐ current stress (relational, work, financial, etc.) – NA

Summary - 3 of 10 concerns, low risk profile

Clinical Interview/Summary: Mr. Conwell's written screenings provided indication of an alcohol use disorder at some level. He was open in the clinical interview and shared information indicating 2 problem alcohol use disorder symptoms (see below). Mr. Conwell does not have a history of daily alcohol use and the past drinking habits he acknowledged, were within the NIAAA low-risk recommendations for men and he asserted that he has remained abstinent since his March 2012 DUI conviction. He also reported that he is required to do monthly urine screens until he is off probation in August 2017. His negative urine screens appear to indicate that his abstinence is intact and of low concern at the present time.

NON-PRESCRIPTION DRUG – Mr. Conwell acknowledged minimal use of marijuana and cocaine over 15 years ago but remained abstinent in order to regain custody of his daughter. He denied experimentation or use of all other non-prescription substance use categories including: stimulants, hallucinogens, inhalants, opiates, etc. I found no part of Mr. Conwell's report about non-prescription drug use suspect of minimization or deception and his drug screens over the past months seems to bear this out.

PRESCRIPTION DRUGS COMMONLY MISUSED/ABUSED – Mr. Conwell denied any recreational use of prescription medications which are prone to abuse including stimulant/ADD medications, narcotic painkiller medications, benzodiazepines, and sleeping medications. The interview did not reveal discrepancy with his written screenings, nor did he show verbal signs of minimization suggesting problem use of prescription medications. As with the other substance categories Mr. Conwell's urine drug screens have demonstrated his abstinence from misuse of prescription medications and it is assumed the probation department can verify this claim. (see comments at the end of this report if Mr. Conwell has a history of positive drug tests while on probation)

DSM-5 Alcohol & Substance 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 contraindicated physical or psychological condition
- ☐ Tolerance
- ☐ Withdrawal symptoms

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

DSM-5 DIAGNOSIS in Reference to Substances: F10.10 Mild Alcohol Use Disorder (Sustained Remission)

Treatment Recommendations: Having found no basis for an active DSM-5 alcohol or drug use disorder, I have no further treatment recommendations for Mr. Conwell at this time. I do recommend that the probation department continue to randomly administer drug tests. If further evidence (e.g. legal violation or drug test) surfaces during Mr. Conwell's probationary period that indicates his sobriety has been compromised, he is to seek further evaluation and follow all treatment recommendations.

If you or the department of probation possess additional information about Mr. Conwell's use of alcohol or drugs 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. Conwell, and yourself in this important matter.

Sincerely,



Trevor C. Davis, CDCA
Cert.# 150427
cc: Matt Alan Conwell

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.