

September 22, 2016

Nicole A Carper
400 N Main Ste. 205
Sioux Falls, SD 57104

Re: Clinical Alcohol Assessment for David P. Clark (DOB – 01/18/1979)

Dear Ms. Carper:

I performed a Clinical Alcohol Assessment for Mr. Clark in reference to his DWI charge in Vermillion County. This assessment included a 55-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 = 4 / *SUGGESTIVE SCREEN*; direct indication of problem alcohol use as points incurred were related to 2 lifetime driving impaired charges, mitigate concerns with clinical recommendations (screen relative to lifetime use of alcohol)

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

Alcohol-Use Risk Factors:

- ☐ negative peer influence/at-risk work environment – NA
- ☐ current stress (relational, work, financial, etc.) – NA
- ☒ physical health concerns mild to moderate pain disorder
- ☐ anxiety/depression/mental health – NA
- ☐ exposure to trauma – NA
- ☐ family history – none reported
- ☐ contraindicated prescription use – NA
- ☒ other substance use – tobacco products
- ☐ regular use of liquor – NA
- ☐ voluntary treatment history – NA
- ☒ severity of incident – elevated BAC (.171)
- ☒ legal history – OWI “eight years ago” (.09 BAC)

Summary – 4 of 12 concerns, mitigate concern with clinical recommendations

Clinical Interview/Summary: Mr. Clark's written screenings provided some indication of an alcohol use disorder. He reported his normal use of alcohol before this charge as 2-4 mixed drinks on 2-5 occasions per year. He reported no difference in the amount consumed if he was attending a special event or celebration.

Mr. Clark and I discussed his legal charge and general use of alcohol at length. I did not find him meeting enough DSM-5 alcohol use disorder criteria for an alcohol use disorder and his drinking habits seem to be in the NIAAA recommendations for men's low-risk drinking. I did, however, note the risks surrounding his specific situation and because of this, I do have some concern given the above identified risk factors. In effort to be clinically prudent, I have provided a recommendation to rule out the chance for an unidentified disorder and assist in reducing any future problem alcohol use.

DSM-5 Alcohol Use Disorder 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 - 1 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: Outpatient Counseling – 3-5 outpatient sessions with a professional substance abuse counselor; follow-up provider to update recommendations or discharge as appropriate.

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

Sincerely,



Trevor C. Davis, CDCA

Cert.# 150427

Reviewed by Ryan Smith, MSW, LISW-S, LICDC, SAP

SW Lic. #1.1000155-S; #101182

cc: David P. Clark

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Diagnostic Conclusions / Limitations: Directions Counseling Group provides Clinical Alcohol and Drug 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.