

October 13, 2016

David P. Rieser, Attorney
502 South 3rd Street
Columbus, Ohio 43215-5702

Re: Clinical Alcohol Assessment for Michael L. Raney (DOB – 12/16/1974)

Dear Mr. Rieser:

I performed a Clinical Alcohol Assessment for Mr. Raney in reference to his OVI charge in Delaware County (10/8/16). This assessment included a clinical interview, and the administration of:

- A Michigan Alcohol Screening Test (MAST)
- An Alcohol Use Disorders 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 = 2 / *NEGATIVE SCREEN*; both points of concern related to OVI offense history, mitigate concern items with educational and/or clinical recommendations

AUDIT: score = 3 / *NEGATIVE SCREEN*; scores of 8 or more indicate *hazardous use*, scores of 15 or more in men indicate *moderate to severe* disorder present, mitigate concern items with educational and/or clinical recommendations

Alcohol Use Risk Factors:

Concerns/Risks

- ☒ previous legal history – 2ND lifetime impaired driving charge (1st was Aug.2013 = .12BAC)
- ☐ severity of incident – not found
- ☐ anxiety/depression/mental health – not found
- ☐ other substance use – NA
- ☐ family history – none reported
- ☐ prior treatment history – (education only – 72-hour DIP in 2013)
- ☒ peer, social or work influences– a factor in past incidents
- ☐ work environment – NA
- ☐ contraindicated prescription use – NA
- ☐ general health problems – NA
- ☐ current family stress – NA

Summary - 2 of 11 concerns, mitigate concern with educational and/or clinical recommendations

DSM - 5 Alcohol Use Symptoms:

- ☐ Use beyond intention (rare occasions during lifetime but no pattern found)
- ☐ Persistent desire or unsuccessful efforts to reduce/quit use (NA)
- ☐ Substantial time spent obtaining, using, or recovering from use (NA)
- ☐ Strong craving/desire (NA- infrequent use plausible)
- ☐ Failure to fulfill a major role at work, home, school (not found)
- ☐ Use despite recurrent social/interpersonal problems (not found)
- ☐ Important social, occupational, recreational activities relinquished (none)
- ☐ Physically hazardous use (no identifiable pattern found)
- ☐ Continued use despite knowledge of contra physical or psychological condition (no conditions)
- ☐ Tolerance (not found via direct & indirect questioning)
- ☐ Withdrawal symptoms (not found)

Summary - 0 of 11 symptoms found

Clinical Interview/Summary: Mr. Raney's written screenings provided no clear indication of an alcohol use disorder at any level (mild, moderate or severe). He reported his normal use of alcohol before this charge as 3-5 drinks on 1-2 occasions per month. Since this is his second lifetime charge, he has found it personally unacceptable to continue using alcohol regardless of whether he has an alcohol use diagnosis.

Mr. Raney and I discussed his OVI incidents and general use of alcohol at length. He presented in a very straightforward and non-suspect manner. He acknowledged a social component to his past use of alcohol which may present a slight challenge in future social settings, since he intends to abstain. I did not find him meeting DSM-5 alcohol use disorder criteria but support his decision to refrain from future alcohol use. I am including some preventative follow-up recommendations in the remainder of this report.

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

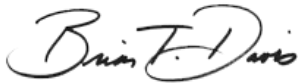
Treatment Recommendations:

- 1) Attend a local MADD Victim Impact Panel, 5900 Roche Dr. #250
Columbus, OH 43229, Phone - 614.885.6233, email - oh.state@madd.org;
- 2) Preventative Outpatient Counseling – 2-3 outpatient sessions with a professional substance abuse counselor after completion of recommendation #1, focus on discussion of thinking and behavior when in social or work settings where alcohol is being consumed, update recommendations or discharge as appropriate.

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

Sincerely,



Brian T. Davis, LISW-S, SAP
LIC# I-7948
cc: Michael L. Raney

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.