

September 7, 2016

Will Nesbitt, Attorney at Law
The Koffel Law Firm
1801 Watermark Drive Suite 350
Columbus, Ohio 43219

Re: Clinical Alcohol Assessment for Kelly McWatters (DOB – 01/21/1992)

Dear Mr. Nesbitt:

I performed a Clinical Alcohol Assessment for Ms. McWatters in reference to her May 2016 OVI charge in Franklin County. This assessment included a 60-minute clinical interview, and the administration of:

- A Substance Abuse Subtle Screening Inventory (SASSI-3)
- 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:

SASSI-3: scores indicated an overall *high probability* of a moderate to severe alcohol use disorder; screening was valid and covered a lifetime frame of reference

MAST: score = 6 / *POSITIVE SCREEN*; screening indicated high likelihood of problem drinking, mitigate concerns with clinical recommendations (screen relative to lifetime use of alcohol)

AUDIT: score = 7 / *NEGATIVE SCREEN*; scores of 8 or more indicate *hazardous use*, scores of 13 or more in women indicate *moderate to severe* disorder present, mitigate concerns with clinical recommendations (screen relative to use of alcohol within the past 24 months)

Alcohol Use Risk Factors:

- ☐ legal history – denies previous history
- ☒ severity of incident – blood alcohol content was elevated at .22
- ☐ anxiety/depression/mental health – NA
- ☐ general health issues – NA
- ☐ exposure to trauma – NA
- ☐ use of liquor – NA
- ☐ other substance use – NA
- ☐ contraindicated prescription use – NA
- ☒ family history – reported problem drinking in extended family
- ☐ prior treatment history – NA
- ☐ negative peer influence – NA
- ☐ at-risk work environment – NA
- ☐ current stress (relational, work, etc.) – NA

Summary - 2 of 13 concerns, mitigate concern with clinical recommendations

Clinical Interview/Summary:

ALCOHOL – Ms. McWatters' written screenings provided clear indications of an alcohol use disorder at a moderate level. She was open in the clinical interview and shared information indicating 4 problem alcohol use symptoms (see below). Ms. McWatters reported her typical alcohol use over the past 2 years as 3-5 standard drinks on 2-3 occasions per month and a use of up to 6 drinks on special occasions which occur approximately 4-6 times per year.

Ms. McWatters and I discussed her OVI incident, her historical use of alcohol, her attendance at a 72-hour Driver Intervention Program along with a review of low risk alcohol use as set forth by the World Health Organization and the National Institute of Alcoholism and Alcohol Abuse. Due to concerns highlighted above and symptoms identified below, I am recommending some ongoing outpatient counseling to assist Ms. McWatters in gaining additional help in moderating her alcohol use and mitigating the likelihood of any future negative consequences due to alcohol use.

DSM-5 Alcohol Use Symptoms:

- ☒ Recurrent use beyond intention
- ☐ Persistent desire or unsuccessful efforts to reduce/quit use
- ☒ Substantial time spent obtaining, using, or recovering from use
- ☐ Strong craving/desire
- ☐ Recurrent failure to fulfill a major role (work, home, school)
- ☐ Continued use despite recurrent social/interpersonal problems
- ☐ Important social, occupational, recreational activities relinquished
- ☒ Recurrent physically hazardous use
- ☐ Continued use despite knowledge of contraindicated physical or psychological condition
- ☒ Tolerance
- ☐ Withdrawal symptoms

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

DSM-5 DIAGNOSIS in Reference to Substances: F10.20 alcohol use disorder, moderate

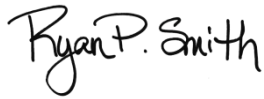
Treatment Recommendations:

- 1) Outpatient Counseling – 8 outpatient sessions with a professional substance abuse counselor; update recommendations or discharge as appropriate;
- 2) If another negative consequence is incurred as a result of any alcohol use, it is recommended Ms. McWatters seek an increased level of treatment or extended outpatient substance abuse counseling as appropriate;

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

Sincerely,



Ryan P. Smith MSW, LISW-S, LICDC, SAP
SW Lic. #I.1000155-S, CD Lic. #101182
cc: Kelly McWatters

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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.