

March 24, 2016

David Paul Rieser, Attorney
502 South 3rd Street
Columbus, OH 43215-5702

Re: Clinical Alcohol and Drug Assessment for Tyler J. Ash (DOB – 08/24/1992)

Dear Mr. Rieser:

I performed a Clinical Alcohol and Drug Assessment for Mr. Ash in reference to his marijuana possession charge in Union County. This assessment included a 50-minute in-person clinical interview, and the administration of:

- A Michigan Alcohol Screening Test (MAST)
- A Drug Use Disorder Identification Test (DUDIT)
- A Brief Marijuana Screening Questionnaire
- A general anxiety/depression screening

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

MAST: score = 0 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use

DUDIT: score = 0 / *NEGATIVE SCREEN*; scores of 6 or more indicate problematic use (“mild-moderate”), scores of 6 or more (male), 25 or more indicate high likelihood of a severe disorder present

Brief Marijuana Screening Questionnaire: *NEGATIVE SCREEN / negative for withdrawal symptoms upon ceasing use, negative for 11 of 12 categories of side effects*

Alcohol Use Risk Factors:

Concerns/Risks

- legal history – denies previous history
- severity of incident – reports possession only
- anxiety – NA
- NIAAA/NIH low risk guidelines – does not guidelines for alcohol
- other substance use – NA
- 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
Summary - 0 of 12 concerns = low risk profile

Anxiety/Depression Screening: no clinically significant concerns reported

Clinical Interview/Summary:

ALCOHOL - Mr. Ash'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 as 1-2 drinks on 0-1 occasions per week. He also acknowledged use of 2-4 drinks on 2 specific occasions per year (Halloween and his birthday). Otherwise I found no reasons or suspicion that Mr. Ash has a pattern of misusing alcohol.

NON-PRESCRIPTION DRUG – Mr. Ash acknowledged use of marijuana on an infrequent basis which he reported was “relaxing” but maintains that he is no longer using it as a result of his legal charge. His clinical interview was consistent with his written screening and provided no additional insight into a cannabis use disorder. Mr. Ash denied experimentation or use of all other non-prescription substance use categories including: stimulants, hallucinogens, inhalants, opiates, etc.

COMMONLY MISUSED/ABUSED PRESCRIPTION DRUGS– Mr. Ash reported that he has never had a prescription for drugs that are commonly abused, including narcotic painkillers, stimulants, sleeping medications or benzodiazepines. Further, he denied any recreational non-prescribed use of the same medications. He stated that his mother a nursing and does not let anyone in the family use narcotic pain medications for routine outpatient surgeries such as when he had his wisdom teeth removed. He used *Orajel* (OTC anesthetic) to alleviate the pain.

SUMMARY - After administering four written screenings and a 50-minute clinical interview I was unable to find Mr. Ash meeting criteria for any DSM-5 alcohol or drug use disorder.

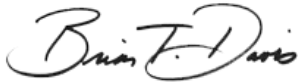
DSM-5 DIAGNOSIS in Reference to Substances: Z03.89 (suspected substance use condition not found)

Treatment Recommendations: Having found no basis for a DSM-5 alcohol or drug use disorder I have no further recommendations for Mr. Ash at this time. If he incurs another legal charge related to possession or use of marijuana it is recommended Mr. Ash seek further evaluation and follow all treatment recommendations.

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

Sincerely,



Brian T. Davis, LISW-S, SAP
LIC# I-7948
cc: Tyler J. Ash

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.