

November 9, 2016

Cathinea Daniels, Probation Officer  
Judicial Correction Services, Inc.  
775 Ferdon Boulevard North, Suite C  
Crestview, FL 32536-2167

**Re: Clinical Alcohol and Drug Assessment for Derek Johnson (DOB – 06/17/1976)**

Dear Ms. Daniels:

I performed a Clinical Alcohol and Drug Assessment for Mr. Johnson in reference to his September 2013 paraphernalia charge in Okaloosa 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 Drug Abuse Screening Test (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 = 3 / *NEGATIVE SCREEN*; no direct indication of a present alcohol use disorder (screen relative to lifetime use of alcohol)

**DAST-10:** score = 1 / *LOW LEVEL SCREEN*; point incurred for drug use outside of a medical context and/or supervision, no direct or indirect evidence of a present substance use disorder, mitigate concern with clinical recommendations

**Alcohol & Substance Use Risk Factors:**

- ☐ negative peer influence/at-risk work environment – NA
- ☐ current stress (relational, work, financial, etc.) – NA
- ☐ physical health concerns – NA
- ☐ anxiety/depression/mental health – appropriately managed bipolar disorder (sees psychiatrist on a monthly basis)
- ☐ exposure to trauma – none of current concern
- ☐ family history of substance abuse or alcoholism – none reported
- ☐ regular use of liquor – NA
- ☐ voluntary treatment history – NA
- ☐ severity of incident – NA
- ☒ legal history – suspicion of DUI in 2015 (case dismissed based upon inconclusive evidence)

Summary - 1 of 12 concerns

**Clinical Interview/Summary:** ALCOHOL – Mr. Johnson'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 2-3 beers on 1-2 occasions per week. However, since the birth of son, he reports that he has not had the time nor desire to consume alcohol outside of special occasions and/or circumstances. He reported his alcohol use on these special occasions is 5-6 drinks.

Mr. Johnson and I discussed his general use of alcohol at length. I did not find him meeting DSM-5 alcohol use disorder criteria for diagnosis and his drinking habits seem to be within NIAAA recommendations for men's low-risk drinking.

NON-PRESCRIPTION DRUG – Mr. Johnson acknowledged historical use ("a couple of times a week") of cannabis but reports that he abstained since September 2015 when he found out he was going to be a father. He denied experimentation and use of all other non-prescription substance use categories including: stimulants, hallucinogens, inhalants, opiates, etc. I found no part of Mr. Johnson's report about non-prescription drug use suspect of minimization or deception.

PRESCRIPTION DRUGS COMMONLY MISUSED/ABUSED – Mr. Johnson denied recreational use of all 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 signs of hesitation or verbal signs of minimization suggesting problem use of prescription medications.

**DSM-5 Alcohol & Substance 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 - 2 of 11 symptoms (Mild 2-3 | Moderate 4-5 | Severe 6+)

**DSM-5 DIAGNOSIS in Reference to Substances:** F12.10 Mild Cannabis Use Disorder  
(Sustained Remission)

**Treatment Recommendations:** Drug Testing – Having found no basis for an active DSM-5 alcohol or drug use disorder, I have asked that Mr. Johnson obtain a 10-panel drug screen following today's assessment. He will be doing this through a third-party provider and will provide the results of this screening with this evaluation. Should Mr. Johnson have a positive drug screen or be unable to complete a verified screen within 3 days of this assessment, I recommend he be further assessed to ascertain whether he has an undisclosed alcohol or drug use disorder.

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

Sincerely,



Trevor C. Davis, CDCA

Certificate # 150427

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

SW Lic. #1.1000155-S; #101182

cc: Derek Johnson

**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 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.