

August 18, 2016

Bradley P. Koffel, Attorney
The Koffel Law Firm
1801 Watermark Drive, Suite 350
Columbus, Ohio 43215-7093

Re: Clinical Alcohol Assessment for Mark J. Buchy (DOB – 05/10/1965)

Dear Mr. Koffel:

I performed a Clinical Alcohol Assessment for Mr. Buchy in reference to his August 2, 2016 OVI charge in Delaware 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 *low probability* of a moderate to severe alcohol use disorder diagnosis; respondent's DEF score (defensiveness) was elevated beyond the norm which increases the likelihood of a missed moderate to severe alcohol use disorder diagnosis but may also reflect situational factors

MAST: score = 4 / *POSITIVE SCREEN*; screening indicates early to middle stage problem drinking; mitigate concerns with clinical recommendations (screen relative to lifetime use of alcohol)

AUDIT: score =10 / *POSITIVE SCREEN*; scores of 8 or more indicate *hazardous use*, scores of 15 or more in men 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 – NA
- ☒ anxiety/depression/mental health – mild depression
- ☒ general health issues – general neuropathy
- ☐ exposure to trauma – NA
- ☒ use of liquor – mixed drinks are preferred

- ☐ other substance use – NA
- ☒ contraindicated prescription use – alcohol use is cautioned while taking Wellbutrin
- ☐ family history – none reported
- ☐ prior treatment history – NA
- ☐ negative peer influence – NA
- ☐ at-risk work environment – NA
- ☐ current stress (relational, work, etc.) – NA

Summary - 4 of 13 concerns, mitigate concern with clinical recommendations

Clinical Interview/Summary:

ALCOHOL – Mr. Buchy's written screenings provided clear indications of an alcohol use disorder at a mild level. He was open in the clinical interview and shared information indicating 2 problem alcohol use symptoms (see below). Mr. Buchy stated that his typical alcohol use is as follows: 1-2 mixed drinks on 1-2 occasions per week if with his spouse and then 3-5 drinks on average of 1-2 occasions per week when at business functions. Mr. Buchy also reported consuming up to 7-9 drinks during special events which he estimated to occur on approximately 6 occasions per year. Mr. Buchy expressed regret over his actions and was receptive to my recommendations to assist him in reducing his potential of future harm related 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 - 2 of 11 symptoms (Mild 2-3 | Moderate 4-5. Severe 6+)

DSM-5 DIAGNOSIS in Reference to Substances: F10.10 alcohol use disorder, mild

Treatment Recommendations:

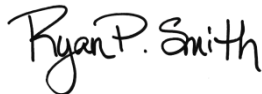
- 1) 72 Hour Driver Intervention Program – complete program and provide documentation to the court; recommend Wellness Driver (614-791-8300) or Second Chance Counseling (614-635-9011);

- 2) Prevention Planning – 3-5 sessions with a substance abuse professional after completion of #1;
- 3) If another negative consequence is incurred as a result of any alcohol use it is recommended Mr. Buchy seek an increased level of treatment or extended outpatient substance abuse counseling as directed by a professional evaluation.

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

Sincerely,



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

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.