

March 20, 2015

Todd Collins, Attorney
1650 Lake Shore Drive
Suite 225
Columbus, OH 43204

Re: Clinical Alcohol and Drug Assessment for Cynthia Jess

Dear Mr. Collins:

I performed a Clinical Alcohol and Drug Assessment for Ms. Jess in reference to the investigation of her Registered Nursing license in the State of Ohio. This assessment included the administration of: a Michigan Alcohol Screening Test (MAST), a Drug Abuse Screening Test (DAST), an Alcohol Use Disorder Identification Test (AUDIT), an anxiety/depression screening, and a clinical interview by telephone. The following items provide a summary of the screening results, my diagnostic opinion and professional recommendations:

Substance(s) of Concern: screened for all illicit substances; narcotics primary
MAST: *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use
DAST: score = 0 / *NEGATIVE SCREEN*; no direct or indirect indication of problem drug use
AUDIT: score = 1 / *NEGATIVE SCREEN*; scores above 8 indicate hazardous use, above 13 indicates moderate to severe disorder present
DSM/Other Substance Related Concerns: clinical interview revealed 0 of 11 DSM 5 substance related concerns present
Anxiety/Depression Screening: no clinically significant concerns reported
Substance Related Legal History Reported: denies any previous history of alcohol or substance related arrests/legal charges

Clinical Interview/Summary:

ALCOHOL: Ms. Jess' written screenings provided no indication of an alcohol use disorder at any level (mild, moderate or severe). She reported her normal use of alcohol as 1-2 drinks on 1 or less occasions per month. She also acknowledged use of 1-2 drinks on special occasions (weddings, birthdays, etc.) or about 3 times per year. Ms. Jess and I discussed her general use of alcohol at length but I was unable to find her overall history and presentation indicative of someone experiencing DSM 5 alcohol use disorder symptoms.

DRUG USE: We discussed the concerns presented with Ms. Jess' prior employer as well as any history of previous drug related incidents in the workplace. Ms. Jess denies that she has ever been cited for any similar circumstances or reprimanded in any way regarding the handling or dispensing of narcotic medications. In addition, Ms. Jess' written screenings and clinical interview did not reveal any past or current history of

drug use. The interview did not reveal any discrepancies or inconsistencies in written or verbal form and I found Ms. Jess to be forthcoming during the assessment. I was unable to find her meeting even 1 of 11 DSM 5 drug use disorder diagnostic criteria. Therefore, with regard to any alcohol or substance related concerns, my clinical opinion is that Ms. Jess is not a risk for any further workplace or personal substance related concerns going forward.

DSM 5 DIAGNOSIS in reference to substances: V71.09 (none found)

Treatment Recommendations: After examination of Ms. Jess' written screenings and a thorough clinical interview I am of the opinion to a reasonable degree of clinical certainty that she is not someone manifesting signs and symptoms of a DSM 5 alcohol or drug use disorder. Accordingly, I have no additional professional recommendations.

Thank you for the opportunity to assist the Ms. Jess and yourself in this important matter.

Sincerely,



Anita McLeod, LCSW, SAP
Cc: Cynthia Jess

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.