

William Nesbitt, Attorney  
The Koffel Law Firm  
1801 Watermark Dr., Ste. 350  
Columbus, OH 43215

**Re: Clinical Alcohol and Drug Assessment for Matthew Boezio (DOB – 07/24/1994)**

Dear Mr. Nesbitt:

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

- A Michigan Alcohol Screening Test (MAST)
- A Drug Abuse Screening Test (DAST)
- A general anxiety/depression screening
- A 10 panel urine drug screen

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, mitigate concerns with clinical recommendations

**DAST:** score = 0/ *NEGATIVE SCREEN*; scores of 1-2 = low level concern, 3-5 moderate, 6-8 substantial, 9-10 severe

**Alcohol and Other Substance Use Risk Factors:**

*Concerns/Risks*

- ☒ previous legal history – paraphernalia (cannabis) charge at 17 years' old
- ☐ severity of incident – NA
- ☐ anxiety/depression/mental health – NA
- ☐ other substance use – NA
- ☒ family history – one family member with history
- ☐ prior treatment history – NA
- ☐ peer influences– NA
- ☐ work environment – NA
- ☐ work/school performance – 3.2 gpa
- ☐ contraindicated prescription use – NA
- ☒ general health problems – acknowledged some self-medicating for stomach condition
- ☐ current family stress – NA

*Summary - 3 of 11 concerns, mitigate concern with clinical recommendations*

**10 Panel Urine Drug Screening:** negative for all substances tested – cocaine, amphetamine, methamphetamine, cannabis, methadone, MDMA, Opiates, PCP, Barbiturates, Benzodiazepines (normal temperature, no outstanding concerns during urine collection)

**Clinical Interview/Summary:**

**ALCOHOL** – Mr. Boezio'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 before this charge as 2-3 drinks on 0-1 occasions per week. He also acknowledged use of up to 4 drinks on about 5 special occasions (weddings, birthdays, etc.) per year.

Mr. Boezio and I discussed his general use of alcohol at length. I did not find him meeting DSM-5 alcohol use disorder criteria.

**NON-PRESCRIPTION DRUG** – Mr. Boezio acknowledged regular use of marijuana for about 4 years prior to this arrest. He also stated a variety of reasons for discontinuing his use since the arrest (negative impact on his motivation during use, weight gain, cost to purchase, cost of legal fees, potential to negatively impact his career track). Mr. Boezio seems to be developmentally shifting from late adolescence into adulthood and with it, accepting greater responsibility. He made the impression that he can manage this ongoing shift and abstinence without formal treatment but should seek assistance if unable to accomplish his goals as a sober individual.

He denied use of all other non-prescription substance use categories including: stimulants, hallucinogens, opioids and inhalants.

**PRESCRIPTION DRUGS COMMONLY MISUSED/ABUSED** – Mr. reported a history of stimulant use under the direction of a physician for attention deficit disorder. He reported that it was helpful for his academic performance but he didn't like that it would make him feel "jittery". He stated that as he is finishing up college he is also discontinuing use of these prescriptions.

Mr. Boezio denied any recreational use of prescription medications which are prone to abuse including stimulant/ADD medications, narcotic painkiller medications, and anxiolytics and sleeping medications. The interview did not reveal hesitation, discrepancy with his written screenings, or other non-verbal signs of minimization or covering a prescription drug use problem.

**SUMMARY** - Ultimately I was unable to find convincing signs or symptoms of a bona fide alcohol or drug use disorder. I did note with Mr. Boezio that he had incurred 2 marijuana related legal charges in his lifetime. His age, family profile, and past side effects (cannabis) suggest he has some mild risk for future problems with marijuana in spite of the growing social and legal acceptability occurring at the present time on a national level. I will make an educational recommendation aimed at mitigating his future risk for such a problem.

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

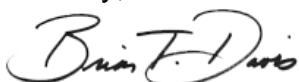
**Treatment Recommendations:**

- 1) Preventative Education – attend **week 3** of Ohio Health’s Drug/Alcohol Awareness Series which is specific to marijuana use (Riverside Methodist Hospital contact 614-566-3700), next presentation of **week 3** is on August 13 from 9am to noon;
- 2) If another negative consequence is incurred as a result of any substance use it is recommended Mr. Boezio seek additional assessment and follow all professional recommendations.

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

Sincerely,



Brian T. Davis, LISW-S, SAP  
LIC# I-7948  
cc: Matthew Boezio

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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.