

November 15, 2016

Jason Cerbone, Atty.
Cerbone DUI Defense
302 E. Oglethorpe Ave.
Savannah, Georgia 31401

Re: Clinical Alcohol Assessment for Blair W. Martinez (DOB – 07/11/1967)

Dear Mr. Cerbone:

I performed a Clinical Alcohol Assessment for Mr. Martinez in reference to his June DUI charge in Chatham County. This assessment included a 45-minute clinical interview by telephone, and the administration of:

- 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:

MAST: score = 1 / *NEGATIVE SCREEN*; no direct or indirect indication of a present alcohol use disorder (screen relative to lifetime use of alcohol)

AUDIT: score = 1 / *NEGATIVE SCREEN*; scores of 8 or more indicate potential *hazardous use*, whereas scores of 15 or more in men indicate a *moderate to severe* disorder may be present (screen predominantly relative to current use of alcohol)

Alcohol Use Risk Factors:

- ☐ negative peer influence/at-risk work environment – NA
- ☐ current stress (relational, work, financial, etc.) – minimal to moderate stress reported (well managed through appropriate and healthy coping mechanisms)
- ☐ physical health concerns – NA
- ☐ anxiety/depression/mental health – NA
- ☐ exposure to trauma – NA
- ☐ family history of substance abuse or alcoholism – none reported
- ☐ contraindicated prescription use – NA
- ☐ other substance use – NA
- ☐ regular use of liquor – NA
- ☐ voluntary treatment history – NA

- ☐ severity of incident – Mr. Martinez reported that no alcohol had been consumed leading up to the time of his arrest and reports there is no conflicting evidence (specific to alcohol) in his police report that would suggest otherwise
- ☐ legal history – denies previous history

Summary - 0 of 12 concerns

Clinical Interview/Summary: Mr. Martinez'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 beers or glasses of wine on 2-3 social occasions in the average year. He also acknowledged use of 3-4 alcoholic drinks on a "handful" of special occasions in his lifetime.

Mr. Martinez and I discussed his legal charge and 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. I found no part of Mr. Martinez's report about his use of alcohol suspect of minimization or deception.

DSM-5 Alcohol 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 - 0 of 11 symptoms (Mild 2-3 | Moderate 4-5 | Severe 6+)

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 use disorder I have no further recommendations for Mr. Martinez at this time.

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

Sincerely,



Trevor C. Davis, CDCA

Certificate # 150427

Reviewed by Brian T. Davis, LISW-S, SAP LIC# I-7948

cc: Blair Martinez

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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.