

September 29, 2016

Wesley Freeman, Attorney at Law
The Koffel Law Firm
1801 Watermark Drive
Suite 350
Columbus, Ohio 43215

Re: Clinical Alcohol Assessment for Brian Mack (DOB – 04/16/1982)

Dear Mr. Freeman:

I performed a Clinical Alcohol Assessment for Mr. Mack in reference to his September 2016 OVI charge in Franklin 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 *high probability* of a moderate to severe substance use disorder; scores were positive for rules #7 & 9; screening was valid and had a lifetime frame of reference;

MAST: score = 9 / *POSITIVE SCREEN*; screening provided clear indications of problem drinking, concerns are addressed with clinical recommendations (screen relative to lifetime use of alcohol)

AUDIT: score = 9 / *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 12 months)

Alcohol Use Risk Factors:

- ☒ legal history – prior alcohol-related legal charges in 2002, 2003, and 2006
- ☐ severity of incident – unknown
- ☒ anxiety/depression/mental health – history of depression & complicated grief
- ☐ general health issues – diagnosed in 2002 with Hodgkin's Lymphoma
- ☐ exposure to trauma – NA
- ☐ use of liquor – NA

- ☒ other substance use – use of cannabis
- ☐ contraindicated prescription use – NA
- ☒ family history – problem alcohol use by members of extended family
- ☒ prior treatment history – prior counseling after DUI charges in early 2000s
- ☐ negative peer influence – NA
- ☒ at-risk work environment – workplace makes alcohol easily accessible
- ☐ current stress (relational, work, etc.) – NA

Summary – 6 of 13 concerns

Clinical Interview/Summary:

ALCOHOL – Mr. Mack's written screenings provided clear indications of an alcohol use disorder at a moderate to severe level. He reported his normal use of alcohol over the past two years as 5-6 drinks on 2-3 occasions per week. He also acknowledged use of 8-10 drinks on approximately 5 special occasions (weddings, birthdays, etc.) per year.

Mr. Mack and I discussed his September 2016 OVI incident, his prior alcohol-related legal charges, and his use of alcohol over the past 10 years at length. Mr. Mack's father died 14 years ago, and he acknowledged turning to alcohol to deal with his grief and related distress. He did engage in outpatient counseling at that time though this appeared to be more focused on his grief than on his alcohol use. Following his last DUI charge in 2006, Mr. Mack's alcohol use decreased in both frequency and amount though he continued to consume alcohol.

Throughout his clinical interview, Mr. Mack was open and shared information indicating 6 problem alcohol use symptoms (see below). While Mr. Mack does not have a history of daily alcohol use nor does he appear to be physically dependent on alcohol, he does engage in alcohol use that exceeds the maximum for low risk alcohol use, engages in monthly binge alcohol use, and has multiple risk factors that increase the likelihood of him developing a more severe alcohol use disorder.

Since his charge Mr. Mack has been attending AA meetings and plans to continue in attendance. He was open and receptive to my recommendations listed below.

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

DSM-5 DIAGNOSIS in Reference to Substances: F10.20 alcohol use disorder, severe

Treatment Recommendations:

- 1) Attend a local MADD – Victim Impact Panel, 5900 Roche Dr. #250 Columbus, OH 43229, Phone - 614.885.6233, email - oh.state@madd.org
- 2) AA, 12 Step or Smart Recovery Meeting Attendance – 3 sessions per week for minimum of 12 months; provide proof of attendance to probation department and/or counselor;
- 3) Outpatient Counseling – 12-18 outpatient sessions with a professional substance abuse counselor; update recommendations or discharge as appropriate after 12 sessions;
- 4) Monitoring – 6 months of monitoring with same counselor after initial counseling completed, meeting frequency at discretion of counselor;
- 5) Abstinence – abstaining from all alcohol use permanently; any consideration of resuming alcohol use should be done only in consultation with a physician and substance abuse professional;
- 6) If abstinence is compromised – it is recommended that Mr. Mack enroll in an intensive outpatient treatment program and/or enroll in inpatient or residential treatment;
- 7) If another negative consequence is incurred as a result of any alcohol use or alcohol use is resumed, an increased level of treatment will be warranted (e.g. IOP, Inpatient, residential treatment, etc.).

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

Sincerely,

Ryan P. Smith

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

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.