

May 24th, 2014

Andrew Jones  
2306 Banita St.  
Nacogdoches, TX, 75965

**Re: Clinical Alcohol Assessment for Andrew Jones**

Dear Mr. Jones and recipients of your choosing:

I performed a Clinical Alcohol Assessment for Mr. Jones in reference to his DUI charges (2) and application to the State Bar of Texas. The items administered for this professional assessment included: a MAST (Michigan Alcohol Screening Test), an AUDIT (Alcohol Use Disorder Identification Test), an anxiety/depression screening, a review of the 11/2012 arresting officer report, and a 60 minute clinical interview. The following report summarizes the results of all administered items.

**MAST:** score = 2; no direct or indirect indication of problem alcohol use

**AUDIT:** score = 5; acknowledged moderate alcohol use, accumulated score does not reach threshold of hazardous use or suggest alcohol use disorder

**DSM/Other Substance Related Concerns:** 0 of 11 DSM 5 symptoms identified; denies subtle indicators of problem alcohol use including mild hangovers, mild memory loss after use, repeat use to relieve emotional or work stress, previous (or since) legal consequences, previous assessment or treatment, conflict with significant others during / after use of alcohol, guilt / regret after use

**Anxiety/Depression Screening:** no clinically significant concerns reported

**Substance Related Legal History Reported:** 2 impaired driving arrests, Nov.2012 (age 32, .16 BAC), Oct. 2001 (age 22, .12 BAC)

**Clinical Interview/Summary:** Mr. Jones' written screenings provided no indication of an alcohol use disorder of any kind. He reported his normal use of alcohol as 1-2 standard drinks (wine) on 2-4 occasions per month. Nevertheless he reported two impaired driving arrests which raises concern about possible problem use. We discussed the details of those arrest incidents at length. Mr. Jones was articulate yet non-defensive in our discussion. My clinical impression is that his case has a number of mitigating circumstances and ultimately I was unable to find him meeting criteria for a DSM 5 alcohol use disorder at any level (mild, moderate or severe). Though I did not find evidence of an alcohol use disorder I am recommending some basic alcohol education for preventative purposes going forward.

**DSM 5 DIAGNOSIS in reference to substances:** None Found

**Treatment Recommendations:** **1) Basic Alcohol Education;** recommend verified attendance at a 5-8 hour basic alcohol or substance awareness class; **2) If Mr. Jones incurs another impaired driving charge I strongly recommend that he meet with a**

substance abuse professional for further assessment and at a minimum attend several sessions of outpatient therapy for discussion about his alcohol use.

Thank you for the opportunity to assist in your evaluation of Mr. Jones' case. If you have any additional questions about his condition in regard to this matter please contact me at your earliest convenience.

Sincerely,

A handwritten signature in black ink that reads "Brian T. Davis". The signature is written in a cursive, flowing style.

Brian Davis, LISW-S, SAP

**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:** Clinical substance abuse assessments are based on objective and standardized screenings and interviewing methods. Conclusions made are to the best of the professional's ability with data on hand at the time of the assessment. Expanded assessments which involve extensive background research, collateral information and third party verification can be provided as an additional service upon request.