

June 15, 2016

Jeremy J. Buckmaster, Attorney
Buckmaster & Ellzey
200 Magnolia Avenue
Daytona Beach, FL 32114

Re: Clinical Alcohol and Drug Assessment for Linnette Dones (DOB – 02/22/1996)

Dear Mr. Buckmaster:

I performed a Clinical Alcohol and Drug Assessment for Ms. Dones in reference to her unnatural and lascivious act charge in Volusia County, Florida. This assessment included a 50-minute clinical interview by telephone, and the administration of:

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

The following items provide a summary of the screening results, my diagnostic opinion, and professional recommendations:

MAST: score = 2 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use, mitigate concerns with clinical recommendations (screen relative to lifetime use of alcohol)

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

Alcohol & Substance Use Risk Factors:

- ☐ legal history – denies previous history
- ☒ severity of incident – “highly” intoxicated
- ☐ anxiety/depression/mental health – NA
- ☐ general health issues – NA
- ☐ exposure to trauma – NA
- ☒ use of liquor – mixed drinks on special occasions
- ☐ contraindicated prescription use – NA
- ☐ family history – none reported

- ☐ prior treatment history – NA
- ☐ negative peer influence – NA
- ☒ at-risk environment – college student
- ☐ current stress (relational, work, etc.) – NA
- ☐ poor academics – 3.1 accumulative GPA

Summary - 3 of 13 concerns, mitigate concern with clinical recommendations

Clinical Interview/Summary:

ALCOHOL –Ms. Dones' written screenings provided no indication of an alcohol use disorder at any level (mild, moderate or severe). She reported her normal use of alcohol before this charge as 1-2 light beers or glasses of wine on 2 occasions per month. She also acknowledged use of 1-4 drinks on special occasions (weddings, birthdays, parties) per year.

Ms. Dones and I discussed her incident and general use of alcohol at length. While I did not find her meeting DSM-5 alcohol use disorder criteria, I did note a few concerns associated with her specific situation. Furthermore, because she is underage, it is recommended that she abstain from all use of alcohol until she is of legal age. Ms. Dones has agreed to these terms and I have provided recommendations that align with this stance.

NON-PRESCRIPTION DRUG – Ms. Dones acknowledged minimal and infrequent use of marijuana 4-6 times a year. She denied experimentation or use of all other non-prescription substance use categories including: stimulants, hallucinogens, inhalants, opiates, etc. I found no part of Ms. Dones' testimony about non-prescription drug use suspect of minimization or deception. Ms. Dones has personally decided to discontinue the use of all cannabis products in light of their illicit status more so than for any awareness of personal addictive behavior.

PRESCRIPTION DRUGS COMMONLY MISUSED/ABUSED – Ms. Dones 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, or verbal signs of minimization covering a prescription drug use problem.

DSM-5 Alcohol & Substance Use 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 contra 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 or drug use disorder I have no further recommendations for Ms. Dones at this time.

- 1) Outpatient Counseling – 3 outpatient sessions (over 6-month time frame) with a professional substance abuse counselor; update recommendations and discharge as appropriate;
- 2) Abstinence – abstaining from all alcohol use until of legal age, consideration of resuming alcohol should not warrant the consultation of a professional unless it is revealed that Ms. Done's use of alcohol or drugs has been minimized;
- 3) If abstinence is compromised – it is likely that an extended length of treatment will be recommended;
- 4) Drug Testing – at least 1 random drug screen at the discretion of follow-up provider.

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

Sincerely,



Trevor C. Davis, CDCA

Cert.# 150427

Reviewed by Ryan Smith, MSW, LISW-S, LICDC, SAP

SW Lic. #1.1000155-S; #101182

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

cc: Linnette Dones

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.