

September 26, 2016

Alexandria Simmons 121 N. Grove Street P.O. Box 497 Ashley, Ohio 43003

Re: Clinical Alcohol Assessment for Alexandria Simmons (DOB – 07/25/1974)

Dear Ms. Simmons:

You presented to Directions Counseling Group on March 23, 2016 for an initial diagnostic assessment in preparation for outpatient counseling related to your August 2016 charges of disorderly conduct and assault. This assessment included a 70-minute clinical interview by telephone, and the administration of:

- A Michigan Alcohol Screening Test (MAST)
- An Alcohol Use Disorder Identification Test (AUDIT)

Below is a summary of my clinical findings and judgment:

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

AUDIT: score = 1 / *NEGATIVE SCREEN*; scores of 8 or more indicate *hazardous use*, scores of 13 or more in women indicate *moderate to severe* disorder present (screen relative to use of alcohol within the past 24 months)

Alcohol Use Risk Factors: ☐ legal history — denies previous history ☒ severity of incident — elevated blood alcohol content ☐ anxiety/depression/mental health — NA ☐ general health issues — NA ☐ exposure to trauma — NA ☐ use of liquor — NA ☐ other substance use — NA ☐ contraindicated prescription use — excessive alcohol use contraindicated with bupropion medication ☐ family history — none reported ☐ prior treatment history — NA ☐ negative peer influence — NA

☑ current stress (relational, work, etc.) – moderate relational distress

☐ at-risk work environment – NA

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

Present Use Status: presently abstaining from alcohol use since date of charges

Clinical Interview/Summary:

ALCOHOL – Your written screenings provided no indication of an alcohol use disorder at any level (mild, moderate or severe). You reported your normal use of alcohol over the past two years prior to these charges as 1-2 drinks on 1-2 occasions per month. You also acknowledged use of up to 3 drinks on 2-3 special occasions per year.

You and I discussed your August 2016 incident, marital distress, and your historical and present use of alcohol at length. While I did not find evidence of you meeting DSM-5 alcohol use disorder criteria, I did note the risks and concerns associated with your specific situation (see above risk factors). Accordingly, I am including some preventative recommendations in the remainder of this report.

DSM-5 DIAGNOSIS in Reference to Substances: z03.89 Suspected substance use disorder not found

Treatment Recommendations:

- 1) <u>Medication Consultation</u> recommend consultation with primary care physician to discuss potential for contraindications between alcohol use and medication and appropriateness to consider other medications;
- 2) <u>Counseling</u> recommend 1-2 outpatient sessions with present counselor to discuss appropriateness for temporary abstinence from alcohol use while engaging in couples' counseling; if current counselor does not have substance abuse treatment in scope of practice then another professional counselor should be sought;
- 3) <u>If another negative consequence</u> is incurred as a result of any alcohol use within the next year, it is recommended that you seek an increased an updated evaluation and pursue individual outpatient counseling.

Thank you for the opportunity to assist you in this important matter.

Sincerely,

Ryan P. Snith

Ryan P. Smith MSW, LISW-S, LICDC, SAP

SW Lic. #I.1000155-S, CD Lic. #101182



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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.

