

January 11, 2016

William Nesbitt  
The Koffel Law Firm  
1801 Watermark Drive, Suite 350  
Columbus, OH 43215

**Re: Clinical Alcohol Assessment for Arturo Ruvalcaba**

Dear Mr. Nesbitt,

I performed a Clinical Alcohol Assessment for Mr. Ruvalcaba in reference to his August 2015 charge in Morrow County. This assessment included 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
- 50 minute in-person clinical interview

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

**SASSI-3:** no scores indicative of an alcohol use disorder at any level (mild, moderate, or severe); screening was valid and covered a lifetime frame of reference

**MAST:** score = 3 / *NEGATIVE SCREEN*; screening indicated an early to middle stage of problem alcohol use although every point resulted from an alcohol-related legal charge; screening covered a lifetime frame of reference

**AUDIT:** score = 8 / *NEGATIVE SCREEN*; scores of 8 or more indicate hazardous use, scores of 15 or more indicates moderate to severe disorder present; respondent appeared to provide forthright responses to questions and screening covered the past 12 months

**DSM/Other Substance Related Concerns:** denied subtle indicators of problem alcohol use including pattern of mild hangovers, mild memory loss after alcohol use, recurrent use to relieve emotional, relational, or work stress, previous treatment, conflict with significant others during or shortly after use of alcohol, or guilt or regret associated with use

**Present Use Status / DSM-5 symptoms:** presently not using alcohol, has met 1 of 11 DSM-5 alcohol use disorder symptoms in the 12 months prior to the August 2015 charge

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

**Substance Related Legal History Reported:** previous alcohol-related legal charge 10 years ago; subsequent alcohol-related legal charge in November 2015

**Clinical Interview/Summary:** Mr. Ruvalcaba's written screenings provided mixed indications of an alcohol use disorder. He reported his normal use of alcohol before the August 2015 charge as 3-4 drinks on 2 occasions per week. He also acknowledged use of 5-6 drinks on special occasions (weddings, birthdays, reunions, etc.), on or about 1-2 occasions per year.

He denied using alcohol since his charges but anticipates he may choose to drink at some future date while using a zero-tolerance policy with reference to drinking and driving. Mr. Ruvalcaba's clinical interview did not reveal evidence of loss of control of alcohol use, a tolerance or withdrawal syndrome, or ongoing use of alcohol despite impairment in social, occupational, or personal functioning. While the presence of multiple alcohol-related legal charges are a cause for concerns, I did not find sufficient evidence that Mr. Ruvalcaba meets DSM-5 criteria for an alcohol use disorder. I did discuss with him World Health Organization standards for low risk problem alcohol use and recommended that he complete standard alcohol education in order to minimize his future risk of problem alcohol use should he choose to resume using alcohol at any time.

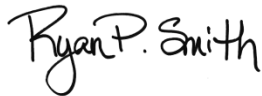
**DSM 5 DIAGNOSIS in reference to substances:** z03.89 suspected alcohol use disorder not found; rule out F10.10 mild alcohol use disorder

**Treatment Recommendations:**

- 1) Alcohol & Drug Education, recommend attendance of a 72-hour Alcohol education/Driver Intervention Program (recommend Wellness Driver, 614-791-8300);
- 2) If another negative consequence is incurred as a result of any alcohol use, it is recommended Mr. Ruvalcaba seek an updated evaluation where the minimum level of care is outpatient counseling.

Thank you for the opportunity to assist the court, Mr. Ruvalcaba, and yourself in this important matter.

Sincerely,



Ryan Smith, LISW-S, LICDC, SAP  
SW Lic. # I.1000155-S, CD Lic. # 101182  
cc: Arturo Ruvalcaba

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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.