

October 25, 2016

David P. Rieser, Attorney 502 South 3rd Street Columbus, Ohio 43215-5702

Re: Clinical Alcohol Assessment for Deshawn E. Hall (DOB – 08/17/1982)

Dear Mr. Rieser:

I performed a Clinical Alcohol Assessment for Mr. Hall in reference to his 9/4/16 OVI charge in Franklin County. This assessment included a clinical interview, and the administration of:

- A Michigan Alcohol Screening Test (MAST)
- An Alcohol Use Disorders Identification Test (AUDIT)
- 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* for problem alcohol use, 2 items of concern related to OVI history; utilize clinical interview for further assessment and mitigate concern items as appropriate with educational and/or clinical recommendations

AUDIT: score = 2 / NEGATIVE SCREEN for problem alcohol use; scores of 8 or more indicate hazardous use, scores of 15 or more in men indicate moderate to severe disorder present

Alcohol Use Risk Factors:

☐ current family stress – NA

Concerns/Risks
☑ previous legal history – diminished risk due to under limit BAC (.079) and context of
incident (sleeping in car to avoid driving impaired)
⊠ severity of incident – 2016 OVI w/ BAC of .169 (twice legal limit)
□ anxiety/depression/mental health – NA
□ other substance use – NA
□ prior treatment history – NA
□ peer influences– NA
□ work environment – NA
□ contraindicated prescription use – NA
☐ general health problems – NA

Summary - 3 of 11 concerns, mitigate concern with educational and/or clinical recommendations

DSM - 5 Alcohol Use Symptoms:

Summary - 0 of 11 symptoms found in clinical interview

Clinical Interview/Summary: Mr. Hall's written screenings provided no indication of an alcohol use disorder at any level. He reported his normal use of alcohol before this charge as 2-3 drinks on 2-4 occasions per month. He also acknowledged use of 4-5 drinks on 4-6 special occasions (weddings, birthdays, etc.) per year. He reports he is currently abstaining from alcohol per his probation terms.

Mr. Hall and I discussed his OVI incident and general use of alcohol at length. He took full responsibility for the recent OVI charge. Mr. Hall was also articulate about what he heard from the presenter at a local MADD Victim Impact Panel. While I did not find him meeting DSM-5 alcohol use disorder criteria I did note some risks associated with his specific situation. I shared that I would be making educational recommendations but learned that Mr. Hall is already enrolled in a 72-hour DIP, locally. I believe this is a sufficient level of intervention for his situation. He intends to fully comply with the nodrinking stipulation of his probationary terms. Otherwise I have no additional treatment recommendations for Mr. Hall.

DSM-5 DIAGNOSIS in Reference to Substances: Z03.89 (suspected substance use condition not found)

Treatment Recommendations:

- 1) Complete the 72 Hour Driver Intervention Program already registered to attend complete program and provide documentation to probation officer;
- 2) <u>Abstinence</u> comply with probationary terms of not using any alcohol for the remainder of the probation term; if abstinence is compromised assess further for possible increased level of treatment will be recommended (e.g. outpatient counseling, IOP, etc.);
- 3) <u>If another negative consequence</u> is incurred as a result of any alcohol use it is recommended Mr. Hall seek an increased level of treatment or extended outpatient substance abuse counseling as appropriate.

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

Sincerely,

Brian T. Davis, LISW-S, SAP

LIC# I-7948

cc: Deshawn E. Hall

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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.

