

October, 15 2014

District Court of the Third Judicial Circuit Kona Division
79-1020 Haukapila St, Room 219
Kealakelua, HI 96750

Re: Clinical Alcohol Assessment for Jennifer Dillon

Dear Court Representative:

I performed a Clinical Alcohol Assessment for Ms. Dillon in reference to her April 2013 DUI charge in Hawaii County. This assessment included the administration of a Michigan Alcohol Screening Test (MAST), an Alcohol Use Disorder Identification Test (AUDIT), an anxiety/depression screening, and a 45 minute telephonic clinical interview. 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

AUDIT: score = 2/*NEGATIVE SCREEN*; scores above 8 indicate hazardous use, above 13 indicates moderate to severe disorder present

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

Anxiety/Depression Screening: no clinically significant concerns reported

Substance Related Legal History Reported: 2005 - .16 BAC DUI

Clinical Interview/Summary: Ms. Dillon's written screenings provided no substantial indications of an alcohol use disorder. She reported her normal use of alcohol as 1 glass of wine on one occasion per week since her 2013 DUI. Previous to this she used slightly more; 1-2 drinks on about 1-2 occasions per week.

We discussed Ms. Dillon's DUI arrests at length and the concern over the relatively high BACs in both incidents. In both instances mixed drinks were involved, which she reported she does not normally drink. She was assessed/screened in 2005 and also recently in a 12-hour alcohol/driver safety class and found negative for alcohol use disorders in both settings. We reviewed all 11 of the DSM 5 alcohol use disorder criteria and I was unable to find her presentation indicative of someone experiencing a bona fide alcohol use disorder diagnosis. I do believe the 12 hour education program was an appropriate requirement for her situation. We concluded our assessment by discussing some of the warning signs of alcoholism in adults over 40 years old and I cautioned her about incurring any more negative consequences from alcohol use. If she were to experience any regrettable behavior associated with alcohol use I would advise she meet with a professional to reassess her situation.

DSM 5 DIAGNOSIS in reference to substances: V 71.09 (none found)

Treatment Recommendations: Since I did not find Ms. Dillon meeting criteria for a DSM 5 alcohol use disorder and she can furnish the court proof of her successful completion of a 12 hour alcohol education class, I have no further professional recommendations for her at this time.

Thank you for the opportunity to assist the court and Ms. Dillon in this important matter.

Sincerely,



Brian Davis, LISW-S, SAP
cc: Jennifer Dillon

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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.