

October 8, 2016

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

Re: Clinical Alcohol Assessment for David Johnson (DOB – 08/31/1977)

Dear Mr. Rieser:

I performed a Clinical Alcohol Assessment for Mr. Johnson in reference to his October OVI charge in Delaware County. This assessment included a 50-minute clinical interview, and the administration of:

- A Michigan Alcohol Screening Test (MAST)
- An Alcohol Use Disorder 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 = 4 / LOW-LEVEL POSITIVE; some indirect indication of an alcohol use disorder, mitigate concerns with clinical recommendations (screen relative to lifetime use of alcohol)

AUDIT: score = 2 / NEGATIVE SCREEN; no direct or indirect indication of problem alcohol use (screen predominantly relative to current use of alcohol)

Alcohol Use Risk Factors:

☐ negative peer influence/at-risk work environment – NA
☐ current stress (relational, work, financial, etc.) – NA
☐ physical health concerns – NA
☐ anxiety/depression/mental health – NA
□ exposure to trauma – NA
oximes family history of substance abuse or alcoholism – 1 close blood-relative
□ contraindicated prescription use – NA
☐ other substance use – NA
☐ regular use of liquor – previous
□ voluntary treatment history – NA
□ severity of incident – NA
⊠ legal history – 2004 OVI

Summary – 2 of 12 concerns, mitigate concern with clinical recommendations

Clinical Interview/Summary: Mr. Johnson's written screenings provided no indication of a current alcohol use disorder at any level (mild, moderate or severe). He reported his normal use of alcohol before this charge as 1-2 craft beers on 1-3 occasions per month. He also acknowledged use of as many as 3 beers on special occasions approximately once a month. Mr. Johnson and I discussed his legal charge and general use of alcohol at length and while his drinking habits seem to be within NIAAA recommendations for men's low-risk drinking, he did acknowledge 4 problem alcohol use symptoms (see below) around the time of his OVI in 2004. It was after this incident that Mr. Johnson made some life transitions (e.g. keeping different friends, marriage) which appear to have helped him adopt a healthier and more sustainable lifestyle. Mr. Johnson reported that he has never had a history of daily alcohol use and with regard to his current drinking habits, it would seem he is not experiencing any difficulty consuming within what the NIAAA would consider to be "low-risk" for men. While Mr. Johnson gave me no reason to be concerned about a current disorder or his current habits. I have made some proactive treatment recommendations in an effort to rule-out the possibility of an unidentified disorder and discourage any possibility for future problem alcohol use.

Past DSM-5 Alcohol Use Disorder Symptoms:

□ Use beyond intention □ Use beyond
☐ 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 contraindicated physical or psychological condition
☐ Withdrawal symptoms

Summary - 4 of 11 symptoms (Mild 2-3 | Moderate 4-5 | Severe 6+)

DSM-5 DIAGNOSIS in Reference to Substances: F10.20 Moderate/Severe Alcohol Use Disorder (Sustained Remission)

Treatment Recommendations:

1) Outpatient Counseling – 2-3 outpatient sessions with a professional substance abuse counselor; follow-up provider to review DISCOVERY packet for signs of heavy intoxication at the time of arrest; consult of character references, updates to treatment recommendations, and discharge is at counselor discretion;



2) Attend a local MADD – Victim Impact Panel, 5900 Roche Dr. #250 Columbus, OH 43229, Phone - 614.885.6233, email - oh.state@madd.org

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

Sincerely,

Trevor C. Davis, CDCA Certificate # 150427

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

SW Lic. #I.1000155-S; #101182

cc: David Johnson

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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.

