

September 27, 2016

Nina Forcier, Atty.  
Forcier Law Office, PLLC  
405 Jefferson Street Ste. B  
Waterloo, IA 50701

**Re: Clinical Alcohol and Drug Assessment for Zachary Todd Wright (DOB – 01/05/1993)**

Dear Ms. Forcier:

I performed a Clinical Alcohol and Drug Assessment for Mr. Wright in reference to his July felony alluding charge in Black Hawk County. This assessment included an 80-minute clinical interview and the administration of:

- Substance Abuse Subtle Screening Inventory (SASSI-3)
- A Michigan Alcohol Screening Test (MAST)
- A Drug Abuse Screening Test (DAST-10)
- A general anxiety/depression screening

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

**SASSI-3:** no scores indicative of an alcohol or substance use disorder (mild, moderate, or severe)

**MAST:** score = 4 / *POSITIVE SCREEN*; direct problem alcohol-use indicated, mitigate concerns with clinical recommendations (screen relative to lifetime use of alcohol)

**DAST-10:** score = 1 / *LOW-LEVEL POSITIVE*; point incurred for drug use outside of a medical context and/or supervision

**Alcohol & Substance Use Risk Factors:**

- ☐ poor academics – 3.496 GPA
- ☒ negative peer influence/at-risk work environment – college student, population at-risk
- ☐ current stress (relational, work, financial, etc.) – NA
- ☐ physical health concerns – NA
- ☐ anxiety/depression/mental health – NA
- ☐ exposure to trauma – NA
- ☒ family history – 1 direct blood relative
- ☐ regular use of liquor – NA
- ☐ voluntary treatment history – NA

- ☒ severity of incident – .146 BAC, eluding involving a motor vehicle accident
- ☐ legal history – denies previous history

Summary - 3 of 11 concerns, mitigate concern with clinical recommendations

**Clinical Interview/Summary:** ALCOHOL – Mr. Wright's written screenings provided indication of an alcohol use disorder at some level. He was open in the clinical interview and shared information indicating 2 problem alcohol use symptoms (see below). While Mr. Wright does not have a history of daily alcohol use, he does appear to drink outside what the NIAAA considers to be low-risk alcohol use for men. The counseling recommendation I have given Mr. Wright should address managing peer pressure/social norms and either support abstinence or assist him in obtaining and maintaining low risk drinking habits.

**NON-PRESCRIPTION DRUG** – Mr. Wright acknowledged use of marijuana on one occasion approximately 5 years ago and social tobacco use (once every 2-3 months). He denied experimentation or use of all other non-prescription substance use categories including: stimulants, hallucinogens, inhalants, opiates, etc. I found no part of Mr. Wright's report about non-prescription drug use suspect of minimization or deception.

**PRESCRIPTION DRUGS COMMONLY MISUSED/ABUSED** – Mr. Wright denied recreational use of all prescription medications which are prone to abuse including stimulant/ADD medications, narcotic painkiller medications, benzodiazepines and sleeping medications. The interview did not reveal discrepancy with his written screenings, nor did he show signs of hesitation or verbal signs of minimization suggesting problem use of prescription medications.

**DSM-5 Alcohol Use Disorder Symptoms:**

- ☐ Use beyond intention
- ☐ 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
- ☒ Tolerance
- ☐ Withdrawal symptoms

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

**DSM-5 DIAGNOSIS in Reference to Substances: F10.10 Mild Alcohol Use Disorder**

**Treatment Recommendations:**

- 1) Outpatient Counseling – 5-8 outpatient sessions with a professional substance abuse counselor; follow-up provider to update recommendations or discharge as appropriate;
- 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. Wright's use of alcohol or drugs 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. Wright, and yourself in this important matter.

Sincerely,



Trevor C. Davis, CDCA  
Cert.# 150427

Reviewed by Ryan Smith, MSW, LISW-S, LICDC, SAP  
SW Lic. #I.1000155-S; #101182  
cc: Zachary T. Wright

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**Diagnostic Conclusions / Limitations:** Directions Counseling Group provides Clinical Alcohol and Drug 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.