

July 23, 2015

Chet E. Weinbaum, Attorney Chet E. Weinbaum Law Offices 133 South Second Street, Ste. 202 Fort Pierce, FL 34950

Re: Clinical Alcohol and Drug Assessment for Ryan Guerrero

Dear Mr. Weinbaum:

I performed a Clinical Alcohol and Drug Assessment for Mr. Guerrero in reference to his dependency case in St. Lucie County and a positive drug test that occurred during the case process. This assessment included the administration of:

- Michigan Alcohol Screening Test (MAST)
- Drug Abuse Screening Test (DAST)
- General anxiety/depression screening
- 50 minute clinical interview by telephone

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 (screening appeared valid)

DAST: score = 5/ scores related to previous methamphetamine use disorder, no indications of other drug use problems, see clinical summary for detail

Recent or Current Signs/Symptoms of Alcohol or Drug Use: No recent or current for alcohol. In 2012, received treatment for stimulant abuse/dependence at Betty Ford Center for 28 day inpatient followed by 3 months of sober living. Reported one relapse that lasted for one month approximately 18 months ago and has remained sober and actively in recovery for the past 18 months.

Anxiety/Depression Screening: history of some panic attacks, manageable at present and no mental health crisis reported

Substance Related Legal History Reported: 8/2011 DUI w/ .08 BAC, tested positive for anti-anxiety medication on 1/2015 (may be able to demonstrate prescription for anti-anxiety medicatiaon related to panic attack symptoms during an urgent care visit while in Florida)

Clinical Interview/Summary:

ALCOHOL - Mr. Guerrero's written screenings provided no indication of an alcohol use

disorder at any level (mild, moderate or severe). He reported that prior to his positive drug test for dependency court he would occasionally drink 1-2 beers once to twice per year. Since the positive test has increased scrutiny by the court and appealing for custody of his son is more important, he has simply stopped using alcohol for the time being.

Mr. Guerrero and I discussed his 2011 DUI arrest at length but I was unable to find the incident or his overall history and presentation indicative of someone experiencing DSM-5 alcohol use disorder symptoms.

ILLICIT DRUG USE – Mr. Guerrero acknowledged abuse use of a stimulant substance (methamphetamine) on a regular basis from about age 31-34. He went to the Betty Ford Center for 28 days of treatment followed by 3 months of sober living. Since that time he has relapsed one time for about 4 weeks when he did not know about his son's whereabouts. He then began his recovery again in earnest and attends 2 AA or NA meetings per week with no recent threat of relapse.

PRESCRIPTION DRUG USE – Mr. Guerrero denied any recreational use of prescription medications which can be prone to abuse including: stimulant/ADD medications, narcotic painkiller medications, anxiolytics and sleeping medications. The interview did not reveal hesitation, discrepancy with his written screenings or other non-verbal signs of minimization or covering a prescription drug use problem.

If the court possesses additional information about Mr. Guerrero's use of any substance, I would be happy to review it and consider any appropriate modifications or amendments to the present report.

DSM 5 DIAGNOSIS in reference to substances: 304.4 (severe amphetamine use disorder sustained full recovery)

Treatment Recommendations:

- 1) Continue AA/NA Meeting schedule of 2 meetings per week;
- 2) Mr. Guerrero is advised to retrieve documentation of his recent urgent care/ quickclinic Xanax prescription, suggest contacting E-FORCSE for more information if the specific prescribing clinic documentation cannot be found;
- 3) <u>Provide ongoing random drug tests</u> to assist the court in their child custody decision making process.

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

Sincerely,



Brian Davis, LISW-S, SAP

cc: Ryan Guerrero

Prohibition Against Re-Disclosure: This information has been disclosed to you from records protected by Federal Confidentiality rules. The Federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom 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.

