

May 2, 2016

Lorena Conyers, Probation Officer
Collin County Courthouse
2100 Bloomdale Road, Suite 12262
McKinney, TX 75071

**Re: Clinical Alcohol and Drug Assessment for Patrick L. Brown
(DOB – 03/26/1980)**

Dear Ms. Conyers:

I performed a Clinical Alcohol and Drug Assessment for Mr. Brown in reference to his public intoxication and possession of a controlled substance charge in Collin County. This assessment included a 50-minute clinical interview by telephone, and the administration of:

- A Michigan Alcohol Screening Test (MAST)
- A Drug Use Disorder Identification Test (DUDIT)
- A general anxiety/depression screening

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

MAST: score = 0 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use

DUDIT: score = 0 / *NEGATIVE SCREEN*; scores of 6 or more indicate problematic use (“mild-moderate”), 25 or more indicate high likelihood of a severe disorder present

Alcohol Substance Use Risk Factors:

Concerns/Risks

- ☒ legal history – possession marijuana (18 years prior/ denies use for 13 years)
- ☐ severity of incident or legal charge – non-severe
- ☐ anxiety/depression/mental health – no clinically significant concerns reported
- ☐ other substance use – NA
- ☐ family history – none reported
- ☐ prior treatment history – NA
- ☐ peer influences– NA
- ☐ work environment – NA
- ☐ contraindicated prescription use – NA
- ☐ general health problems – NA
- ☐ current family stress – NA

Summary - 1 of 11 concerns, minimal risk in light of time lapse

Clinical Interview/Summary:

ALCOHOL - Mr. Brown's written screenings provided no indication of an alcohol use disorder at any level (mild, moderate or severe). He reported that he has never been a regular user of alcohol as it has usually made him feel warm and kind of sick. This was accentuated by getting sick on the occasion of his 21st birthday. He denied any history of DUI, public intoxication, problems in personal relationships or within his family related to his use of alcohol. I found his presentation to be credible and non-defensive and was ultimately unable to find Mr. Brown suspect of a DSM-5 alcohol use disorder.

NON-PRESCRIPTION DRUG – Mr. Brown acknowledged use of marijuana between the age of 17 and 23. He was articulate about his reasons for quitting it 13 years ago; primarily because he found it effected his coordination which is critical to his ability to participate in martial arts.

Mr. Brown denied experimentation or use of all other non-prescription substance use categories including: stimulants, hallucinogens, inhalants, opiates, etc. I found no part of Mr. Brown's report about non-prescription drug use suspect of minimization or deception.

PRESCRIPTION DRUGS COMMONLY MISUSED/ABUSED – Mr. Brown reported use of narcotic painkillers on about 4-5 occasions in his life related to dental work (has a 6-part bridge). He stated that he has used these medications as prescribed for 2-3 days after a root canal or other procedure of dental problem that caused pain. He denied refilling or misusing these prescriptions.

Mr. Brown shared with me that the possession of a controlled substance was related to a hydrocodone he had on his person, but not with proof of a prescription. He stated that he did however, share the valid prescription with the court as part of his defense.

Otherwise, Mr. Brown denies any history of using other prescription medications which are prone to abuse including: stimulant/ADD 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.

SUMMARY – In my best clinical judgement I did not find Mr. Brown meeting criteria for any DSM-5 alcohol or drug use disorder. Furthermore, Mr. Brown presented proof of successful completion (5/1/2016) of a 4-hour online Drug and Alcohol Awareness Class. I believe this education effort was appropriate and sufficient for his circumstances and have no further professional recommendations for him.

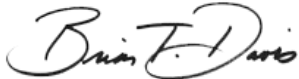
DSM-5 DIAGNOSIS in Reference to Substances: Z03.89 (suspected substance use condition not found)

Treatment Recommendations: Having found no basis for a DSM-5 alcohol or drug use disorder I have no further recommendations for Mr. Brown at this time.

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

Sincerely,



Brian T. Davis, LISW-S, SAP
LIC# I-7948
cc: Patrick L. Brown

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.