

September 20, 2016

Burcu Hensley, Atty.
P.O. Box 1689
Mars Hill, NC 28754

Re: Clinical Alcohol and Drug Assessment for Scott M. Goodwin (DOB – 11/14/1970)

Dear Mr. Hensley:

I performed a Clinical Alcohol and Drug Assessment for Mr. Goodwin in reference to his charge in Madison County. This assessment included a 50-minute clinical interview by telephone, and the administration of:

- 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:

MAST: score = 0 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use (screen relative to lifetime use of alcohol)

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

Substance & 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
- ☐ family history – NA
- ☒ regular use of liquor – once-a-week basis (average)
- ☐ severity of incident – NA
- ☐ prior treatment history – NA
- ☐ legal history – denies previous history

Summary - 1 of 10 concerns

Clinical Interview/Summary: ALCOHOL – Mr. Goodwin's written screenings provided no indication of an alcohol use disorder at any level (mild, moderate or severe). He

reported his normal use of alcohol as 1-2 drinks on 1 occasion per week. He also acknowledged use of up to 2-3 drinks on special occasions (weddings, birthdays, etc.). These instances occur on a less than monthly basis.

I did not find Mr. Goodwin meeting DSM-5 alcohol use disorder criteria for an alcohol use disorder and his drinking habits appear to be within the NIAAA recommendations for men's low-risk drinking.

NON-PRESCRIPTION DRUG – Mr. Goodwin acknowledged minimal experimentation with marijuana on just 2 occasions (ages 16 and 22), but cited these incidents as being very anxiety and paranoia-inducing. 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. Goodwin's report about non-prescription drug use suspect of minimization or deception.

PRESCRIPTION DRUGS COMMONLY MISUSED/ABUSED – Mr. Goodwin denied any recreational use of 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 & Substance 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 - 0 of 11 symptoms (Mild 2-3 | Moderate 4-5 | Severe 6+)

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 only asked that Mr. Goodwin obtain a 10-panel drug screen following today's assessment. He will be doing this through a 3rd party provider and will provide the results of the screening with this evaluation. Should Mr. Goodwin have a positive

drug screen or be unable to complete a verified screen within 3 days of this assessment, I recommend a second, more in depth evaluation to ascertain if he has an undisclosed alcohol or drug use disorder or early problem use of a substance.

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

Sincerely,



Trevor C. Davis, CDCA

Cert.# 150427

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

cc: Scott M. Goodwin

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Diagnostic Conclusions / Limitations: Directions Counseling Group provides Clinical Alcohol & 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.