

June 28, 2016

Bart A. Van Der Klooster, Attorney at Law
221 W. Fifth Avenue
Columbus, Ohio 43215

Re: Clinical Alcohol for Jason Watterly (DOB – 05/10/1980)

Dear Mr. Van Der Klooster:

I performed a Clinical Alcohol Assessment for Mr. Watterly in reference to his March 7, 2016 OVI/DUI other charge in Franklin County. This assessment included a 50-minute clinical interview, and the administration of:

- A Substance Abuse Subtle Screening Inventory (SASSI-3)
- 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:

SASSI-3: no scores indicative of an alcohol use disorder at any level (mild, moderate, or severe); screening was valid and covered a lifetime frame of reference;

MAST: score = 1 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use, (screen relative to lifetime use of alcohol)

AUDIT: score = 2 / *NEGATIVE SCREEN*; scores of 8 or more indicate *hazardous use*, whereas scores of 15 or more in men indicate a *moderate to severe* disorder may be present, mitigate concerns with clinical recommendations (screen relative to use of alcohol within the past 24 months)

Alcohol Use Risk Factors:

- ☐ legal history – denies previous history
- ☐ severity of incident – NA
- ☐ anxiety/depression/mental health – NA
- ☐ general health issues – NA
- ☐ exposure to trauma – NA
- ☒ use of liquor – occasional use of liquor, not drink of choice;
- ☐ other substance use – NA
- ☐ contraindicated prescription use – NA
- ☐ family history – none reported
- ☐ prior substance-related treatment history – NA

- ☐ negative peer influence – NA
- ☒ at-risk work environment – works as general manager of restaurant/bar
- ☐ current stress (relational, work, etc.) – NA

Summary - 2 of 13 concerns, mitigate concern with clinical recommendations

Clinical Interview/Summary:

ALCOHOL – Mr. Watterly'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 before this charge as 1-3 drinks on 1-2 occasions per month. He also acknowledged use of 3-6 drinks on 2-3 special occasions (weddings, birthdays, etc.) per year.

Mr. Watterly and I discussed his OVI incident and general use of alcohol at length. While I did not find him meeting DSM-5 alcohol use disorder criteria, I did note the risks associated with even a once or twice yearly binge use pattern of alcohol consumption. Mr. Watterly and I also reviewed World Health Organization standards for low risk problem alcohol use and strategies to keep his alcohol use within the range of responsible alcohol use. As an addition I am also providing some recommendations for brief education to increase Mr. Watterly's awareness of the risks associated with excessive alcohol use.

DSM-5 Alcohol Use Symptoms:

- ☐ Recurrent use beyond intention
- ☐ Persistent desire or unsuccessful efforts to reduce/quit use
- ☐ Substantial time spent obtaining, using, or recovering from use
- ☐ Strong craving/desire
- ☐ Recurrent failure to fulfill a major role (work, home, school)
- ☐ Continued use despite recurrent social/interpersonal problems
- ☐ Important social, occupational, recreational activities relinquished
- ☐ Recurrent 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:

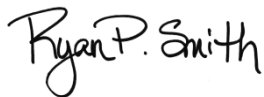
- 1) Attend a local MADD – Victim Impact Panel, 5900 Roche Dr. #250
Columbus, OH 43229, Phone - 614.885.6233, email - oh.state@madd.org

- 2) If another negative consequence is incurred as a result of any alcohol use it is recommended that Mr. Watterly seek further evaluation and follow all updated treatment recommendations.

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

Sincerely,



Ryan P. Smith MSW, LISW-S, LICDC, SAP
SW Lic. #I.1000155-S, CD Lic. #101182
cc: Jason Watterly

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.