

June 6, 2016

Dennis A. O'Brien Jr., Attorney
O'Brien Law Firm, P.C.
33 Bull Street, Suite 540
Savannah, GA 31401-3399

Re: Clinical Alcohol and Drug Assessment for Mark T. Kunkle (DOB – 12/19/1963)

Dear Mr. O'Brien:

I performed a Clinical Alcohol and Drug Assessment for Mr. Kunkle in reference to his paraphernalia and possession of a controlled substance charges in Chatham County Georgia. This assessment included a 40-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") whereas scores of 25 or more indicate high likelihood of a severe disorder being present

Alcohol/Substance Use Concerns & Risk Factors:

- ☐ previous legal history – denies prior history
- ☐ severity of incident – NA
- ☐ anxiety/depression/mental health – NA
- ☐ general health – required to receive a yearly physical per job requirements
- ☐ exposure to trauma – NA
- ☒ other substance use – daily use of tobacco
- ☒ family history – father
- ☐ prior treatment history – denies
- ☐ negative peer influence – NA
- ☐ at-risk work environment – NA
- ☐ stress (relational, work-related, other) – NA

Summary - 2 of 9 concerns (low-risk profile)

Clinical Interview/Summary:

ALCOHOL – Mr. Kunkle's written screenings provided no indication of an alcohol use disorder at any level (mild, moderate or severe). He reports no use of alcohol and admitted to only trying beer less than 5 times as a teen - without reaching a level of intoxication. He was descriptive of his reasons for not using alcohol, citing his line of work and a blood relative's misuse of alcohol as reasons for choosing to abstain.

NON-PRESCRIPTION DRUG – Mr. Kunkle acknowledged minimal experimentation with marijuana around the age of 15 but did not acknowledge any regular use following this. 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. Kunkle's report about non-prescription drug use suspect of minimization or deception. He reports that he has been subject to random drug and alcohol testing over his 37-year career without complication. He also suggested that this year he has already taken "4 or 5" tests that have all come back negative.

PRESCRIPTION DRUGS COMMONLY MISUSED/ABUSED – Mr. Kunkle denied any recreational use of prescription medications which are prone to abuse including: stimulant/ADD medications, narcotic painkiller medications, benzodiazepines, and anxiolytics and sleeping medications. The interview did not reveal hesitation, discrepancy with his written screenings, or other signs of minimization or covering a prescription drug use problem.

Summary: I found Mr. Kunkle's evaluation to be atypical and puzzling after reviewing his police report (received and reviewed on 6/9/16). It is impossible for me to make an accurate and informed clinical conclusion (or diagnosis) based on circumstantial evidence that conflicts with the subject's self-report. This is especially true given that there is reportedly no prior work or legal history that indicates substance use problems, and even more so in a DOT-environment where testing has taken place over 3 decades and within the 72-hour window following the accident. The strength of the circumstantial evidence, the safety sensitive nature of motor carrier work, and the severity of the incident (tractor-trailer accident) warrant caution. Therefore, while I am making no diagnostic conclusions, I believe it is warranted to recommend that Mr. Kunkle meet on two occasions with a substance abuse professional to discuss the incident and his history further. In this environment, additional evaluation can be provided and hopefully a more clear representation will emerge.

Revealed DSM-5 Alcohol/Substance Use 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 contra physical or psychological condition
- ☐ Tolerance
- ☐ Withdrawal symptoms

Summary - 0 of 11 symptoms (Mild 2-3 | Moderate 4-5. Severe 6+)

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

Treatment Recommendations: Further assessment; I am recommending Mr. Kunkle see a substance abuse provider in person for 2 more sessions to ensure accuracy. It is pertinent that Mr. Kunkle provide the following assessment, police report, collateral contacts to the follow-up provider for review.

If you possess any additional information about Mr. Johnston's use of alcohol or drugs that may 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. Kunkle, and yourself in this important matter.

Sincerely,



Trevor C. Davis, CDCA
Cert.# 150427

Reviewed by Ryan Smith, MSW, LISW-S, LICDC, SAP
SW Lic. #1.1000155-S; #101182
cc: Mark T. Kunkle

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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.