

## DUI/DWI Offender Test

Confidential report

Name: Mrs. Elizabeth Smith  
Age: 34      Sex: Female  
Date of Birth: 01/12/1988  
Ethnicity/Race: Caucasian

Last 4 digits SSN: 1234  
Education: High School Grad  
Date Scored: 12/19/22  
Marital Status: Single

DUI/DWI Offender Test (DDOT) results are confidential and should be considered working hypotheses. No decision should be based solely upon DDOT results.

### Information Provided By Client

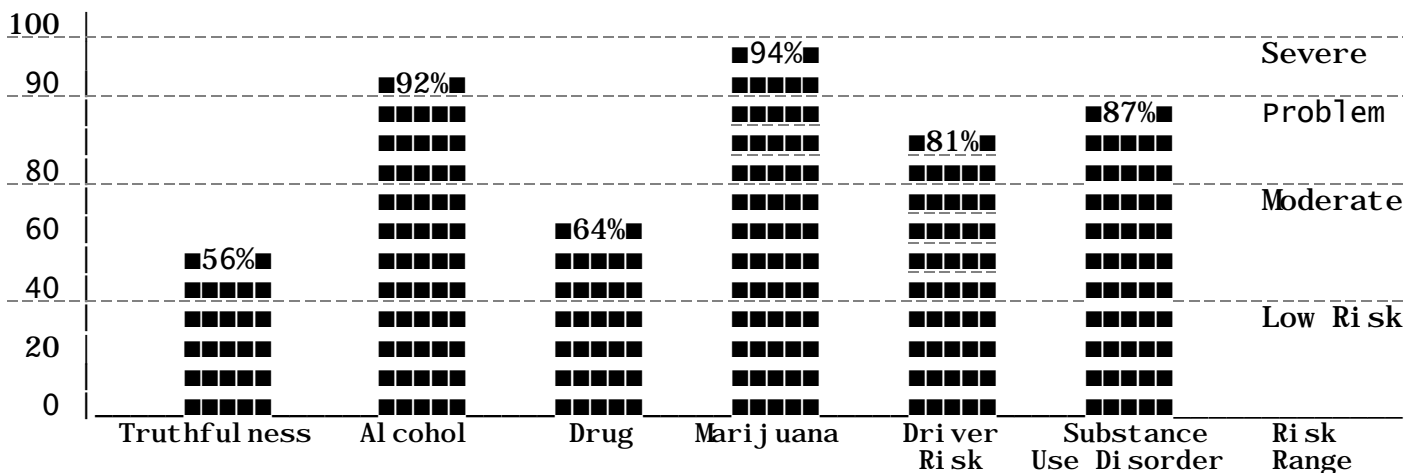
Primary reason for arrest: Alcohol  
BAC/BAL at time of arrest: .12  
Lifetime DUI/DWI arrests: 2  
Alcohol (not DUI/DWI) arrests: 1  
Drug (not DUI/DWI) arrests: 0

Additional DUI/DWI's pending: No  
Breath/blood test refusal: No  
License suspended/revoked: No  
Number of at-fault driving accidents: 1  
Arrests reduced to reckless driving: 0

### Truthfulness Scale

A Truthfulness Scale score at or below the 89<sup>th</sup> percentile means all DUI/DWI Offender Test (DDOT) scales are accurate. In contrast, a Truthfulness Scale score at or above the 90<sup>th</sup> percentile means all DDOT scales are inaccurate or invalid. As a general rule, the lower the Truthfulness Scale score the more accurate the results.

### DDOT Profile



### Four Substance-Related Scales

The DUI/DWI Offender Test (DDOT) integrates four substance-related scales and measures: Alcohol Scale, Drug Scale, Marijuana Scale, and DSM-5 Substance (alcohol/drug) Use Disorder Scale. The specific or focused scales (Alcohol, Drug and Marijuana) enable staff to match problem severity with comparable intervention or treatment intensity (or level of care). On the other hand, DSM-5 Substance (alcohol/drug) Use Disorder Scale is widely used in substance (alcohol/drug) use diagnosis, treatment and reimbursement.

**ATTAINED SCALE SCORES**

Each DUI/DWI Offender Test (DDOT) scale (Truthfulness, Alcohol, Drug, Marijuana, DSM-5 Substance Use Disorder and Driver Risk) is presented and as warranted, appropriate **level of care** recommendations are offered.

**Truthfulness Scale: Moderate Risk****56<sup>th</sup> Percentile**

Mrs. Smith's Truthfulness Scale score is in the moderate risk (40 to 69<sup>th</sup> percentile) range. This is an accurate DUI/DWI Offender Test (DDOT) profile and all DDOT scale scores are accurate. Nevertheless, there is a tendency for Mrs. Smith to be cautious when answering personal questions. This may be situation specific and related to why she is being evaluated. Some DUI/DWI offenders attempt to minimize or deny their problems. Truthfulness Scale scores at or below the 89<sup>th</sup> percentile are in the acceptable truthfulness range. Conversely, Truthfulness Scale score at or above the 90<sup>th</sup> percentile mean that the DDOT test is invalid or inaccurate. That said, Mrs. Smith's Truthfulness Scale score is within the acceptable or moderate Truthfulness Scale range. All DDOT scale scores are accurate. Prudent assessors will interpret scale scores cautiously.

**Alcohol Scale: Severe Risk****92<sup>nd</sup> Percentile**

Mrs. Smith's Alcohol Scale score is in the severe problem (90 to 100<sup>th</sup> percentile) range. Mrs. Smith has a severe drinking problem. Recommendations: consideration might be given to either "intensive outpatient treatment" or "partial hospitalization." This level of care allows patients to live in their home while receiving treatment. In other words, patients can sustain relationships and their employment while completing treatment. Effective therapies include, but are not limited to the following: cognitive behavioral therapy, didactic group therapy and motivational enhancement therapy. Conversely support groups and medication are important in preventing relapse. Should Mrs. Smith relapse, her level of care would likely increase to "residential/inpatient" treatment.

**Drug Scale: Moderate Risk****64<sup>th</sup> Percentile**

Mrs. Smith's Drug Scale score is in the moderate risk (40 to 69<sup>th</sup> percentile) range. Mrs. Smith has an emerging drug (prescription and nonprescription) problem. Without intervention or treatment it is likely that Mrs. Smith's drug involvement will increase. Recommendations: effective outpatient psychotherapies are many and include cognitive behavioral therapy, motivational counseling and dialectic behavior therapy. Drug treatment does not need to be voluntary to be effective. Behavioral therapy in combination with medication can be very effective. Ancillary services like Narcotics Anonymous (NA), Cocaine Anonymous (CA) or chemical dependency (substance use) classes have been demonstrated to be effective.

**Marijuana Scale: Severe Risk****94<sup>th</sup> Percentile**

**Cannabis:** Mrs. Smith's Marijuana Scale score is in the severe problem (90 to 100<sup>th</sup> percentile) range. Mrs. Smith has an established and serious marijuana problem that warrants prompt intervention and treatment. More specifically, marijuana use, on its own merits prompts outpatient treatment. Elevated co-occurring disorders would make treatment more complex. Should Mrs. Smith relapse her optimum level of care would likely be intensive outpatient treatment. Yet, in treatment planning personal and public safety always take precedence. Effective marijuana therapies include: cognitive behavioral therapy (CBT), motivational enhancement therapy (MET) and intensive family therapy (IFT). Mrs. Smith needs marijuana treatment.

**Substance Use Disorder: Problem**

Mrs. Smith has endorsed (admitted to) five or six of the eleven DSM-5 substance use disorder symptoms, which incorporate both alcohol and drug symptoms. Mrs. Smith endorsed **five** or **six** of the eleven DSM-5 substance use symptoms, which meets the **problem** substance use disorder criteria. Other co-occurring substance disorders (alcohol, drugs and marijuana) could involve several substances used simultaneously or sequentially, which would complicate the assessment. Recommendation: outpatient treatment or counseling appears warranted. Any elevated (70<sup>th</sup> percentile or higher) Alcohol, Drug or Marijuana Scale score would provide additional insight. By DSM-5 substance use standards Mrs. Smith has a substance use disorder.

**Driver Risk Scale: Problem Risk**

**81<sup>st</sup> Percentile**

Mrs. Smith's Driver Risk Scale score is in the problem (70 to 89<sup>th</sup> percentile) range. She has a driving-related problem. She would benefit from completing a Driver Improvement course or program. That said, check her other DUI/DWI Offender Test (DDOT) scales (Alcohol, Marijuana and other drugs) for elevated (70<sup>th</sup> percentile and higher) scores. As a general rule, the higher the scales score the more serious the problem. Co-occurring disorders or elevated scale scores could exacerbate her driver risk. The Driver Risk Scale enables staff to assess driver risk on its own merits, independent of substance (alcohol/drug) use or abuse. Then when substance (alcohol/drug) abuse occurs it greatly increases driver risk.

**SIGNIFICANT ITEMS.** The following self-report answers help in understating Mrs. Smith's situation.

**ALCOHOL**

- 2. Enjoys drinking
- 7. Drinks excessively
- 87. Problem in last month
- Additional: #20, 26, 45, 48, 52, 99, 107 .

**SUBSTANCE USE DISORDER**

- 8. All activities affected
- 12. Substance use takes lot of time
- 37. Continues use despite problems
- Additional: #43 81, 102. 103, 105.

**DRUG**

- 11. Uses more than should
- 23. Feels guilty about use
- 47. Has drug problem

**MARIJUANA**

- 8. Has smoked marijuana
- 21. Has lied about pot use
- 27. Increased tolerance
- Additional: #42, 54, 58.

**Recommendations:** \_\_\_\_\_

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**Staff Signature**

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**Date**

**DDOT Answers**

1- 50 FTTFTTTFFF FFFFFFFFTFT FTTTTFTTF FTTFFTFTFF FTTFFTFTF

51-100 FFFFFFFFTFT TFFTTFFTFF FFFTFTFTTT TFTF311232 1213322131

101-117 3211313233 2123243