

**Los Angeles Police Department
LD12 Controlled Substances
EV10 Quality of Life
S8 Drug Categories**

Date Revised: December/2019

Course Goal: To develop basic knowledge how drugs affect the body, types of controlled substance and basic laws dealing with possession, possession for sales and officer safety.

Session Goal: Recruit officer will have an understanding of laws regarding the use, possession, and sales of a controlled substance.

Learning Objectives:

- Discuss the impact of drugs on the body. **[12.I.A]**
- Recognize the 7 categories, common names, symptoms, physical properties, and packaging of Controlled Substances. **[12.II.A]**
- Stimulants, Hallucinogens, Narcotic Analgesics, Marijuana, Depressants, Inhalants, and Dissociative Anesthetics [Phencyclidine] **[12.II.A.1,2,3,4,5,6,7]**
- Recognize how the following controlled substances are introduced into the body and general indicators of use. Stimulants, Hallucinogens, Narcotic Analgesics, Marijuana, Depressants, Inhalants, and Dissociative Anesthetics [Phencyclidine] **[12.II.B] [12.II.B.1,2,3,4,5,6,7]**

Session Time: 2 hours

Resources:

- Laptop with media software and power point developed for this module.
- [LD 12](#)
- Flipchart paper with markers

Session Summary: In this module the class will be separated by groups and a drug category will be assigned to each group. The groups will be given time to read their portion and create a presentation to teach the material to the class. Upon completion of each presentation, the instructor will discuss any content that was omitted.

Outline	Instructor Notes
<p>I. Controlled Substances</p> <p>A. Controlled Substances Terminology.</p> <p>1. Peace officers should be familiar with terms when investigating a crime that involves controlled substances:</p> <p>a. Drugs.</p> <p>b. Controlled substances.</p> <p>c. Narcotics.</p> <p>d. Drug abuse.</p>	<p>Ask: As a new law enforcement officer, how do you think having a basic understanding of laws regarding the use, possession, and sale of narcotics be helpful to you when you go out to the field?</p> <p>Lecture: Terminology</p>

**Los Angeles Police Department
LD12 Controlled Substances
EV10 Quality of Life
S8 Drug Categories**

<p>2. Drugs.</p> <p>a. Drugs are any substances which can impair a person's ability to function normally.</p> <p>b. This is a law enforcement definition that applies to psychoactive drug abuse. Psychoactive means that a drug has specific effects on the brain. Some drugs include:</p> <ol style="list-style-type: none">1) Marijuana.2) Toluene (often in model airplane glue).3) Heroin.4) Methamphetamines.5) Cocaine. <p>3. Controlled Substance.</p> <p>a. Controlled substances are any one of a number of drugs or other substances which are strictly regulated because of their potential for abuse or addiction.</p> <p>b. These include drugs classified as narcotics, depressants, stimulants, hallucinogens, and marijuana. controlled substances include:</p> <ol style="list-style-type: none">1) Stimulants (e.g., methamphetamines).2) Hallucinogens (e.g., LSD).3) Opiates (e.g., heroin).4) Depressants (e.g., Xanax and Valium). <p>4. Narcotics.</p> <p>a. Narcotics are opiates or synthetic opiates. Their major function is analgesic (pain suppressant). If used may produce a sense of euphoria.</p> <p>b. Examples of narcotic drugs which have legitimate medical use are:</p>	<p>Ask: What is a drug or the definition of a drug?</p> <ul style="list-style-type: none">• A drug is any substance which can impair a person's ability to function normally.• Refers only to psychoactive drugs. <i>(Drugs that cause change in the brain function, results in alterations in perception, mood, or consciousness.)</i>• They have a specific effect on brain. <p>Lecture: Types of Drugs Two types of drugs:</p> <ul style="list-style-type: none">• Controlled Substance• Narcotics. <p>Ask: Are all drugs illegal?</p> <ul style="list-style-type: none">• Drugs can be legal or illegal.• You have street drugs and pharmaceutical drugs which are controlled.
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**Los Angeles Police Department
LD12 Controlled Substances
EV10 Quality of Life
S8 Drug Categories**

<p>1) Morphine. 2) Methadone. 3) Oxycontin. 4) Vicodin.</p> <p>c. Heroin is an example of a narcotic drug that is not medicinal.</p> <p>5. Drug abuse.</p> <p>a. Drug abuse is the illegal use of a controlled substance. Possession or use of controlled substances may be a crime. Addiction to drugs is a disease.</p> <p>b. Drug abuse include:</p> <p>1) Injecting heroin. 2) Sniffing cocaine. 3) Smoking cocaine base/methamphetamine.</p> <p>B. Effects of Drugs on the Body.</p> <p>1. Drugs work by artificially introducing into the body chemicals that mimic the body's natural hormones and neurotransmitters. They may mimic, block, speed up or slow down the body's natural state; they interfere with the messages transmitted by the neurotransmitters.</p> <p>2. Methods of using drugs.</p> <p>a. Inhalation: Smoking or inhaling the drug enters the body through the tissue of the lower respiratory system (lungs).</p> <p>b. Injection: Using a syringe and hypodermic needle the drug goes directly into a muscle or a vein into the circulatory system.</p> <p>c. Intranasal: Snorting or sniffing the drug enters the body through the tissue of the upper respiratory system (nose).</p> <p>d. Transdermal: touching, the drug passes directly through the skin into the circulatory system.</p>	<ul style="list-style-type: none"> • Household products. (Glue, aerosol cans) not illegal to possess but illegal when used to get high. <p>ASK: What are some experiences or incidents some of you have had where you may have observed someone under the influence of drugs, using drugs, or maybe even selling narcotics? Drug abuse is viewed as a disease and possession or use of a controlled substance is a crime.</p> <p>[12.I.A] Lecture: Impact of Drugs on the Body</p> <ul style="list-style-type: none"> • Drugs can block, speed up or slow down the body's natural state. • Drugs interfere with the messages transmitted by the neurotransmitters. <p>Ask: What are some ways drugs can be taken or ingested?</p> <ul style="list-style-type: none"> • Inhalation. • Injection. • Intranasal. • Transdermal.
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**Los Angeles Police Department
LD12 Controlled Substances
EV10 Quality of Life
S8 Drug Categories**

<ul style="list-style-type: none">3. How drugs travel through the body.<ul style="list-style-type: none">a. The drug enters the blood stream (via inhalation, injection, ingestion, etc.).b. The drug is metabolized by the body into several metabolites (substances resulting from metabolism). The metabolite continues in the bloodstream to different parts of the body.c. Eventually, the metabolite is discharged from the body, usually in urine.4. A person seeking temporary relief usually achieves this by taking the correct dosage a doctor or label prescribes. Overtime a person can go from using a drug for therapeutic reasons (e.g., a pain killer), to becoming totally dependent on that drug in order to function.5. To understand how drugs affect the body, peace officers need to understand the following terms:<ul style="list-style-type: none">a. Central Nervous System (CNS) is the system of nerves which make up the brain and spinal cord.b. Polydrug use is when two or more substances are used which result in an effect that each substance could not reach on its own.c. Introducing a drug into the body upsets the body's dynamic chemical balance (the body's natural tendency to homeostasis). The body then alters its own supply of natural chemicals to accommodate the drug now in the system.	<p>Lecture: Terms to understand on how drugs affect the body physically.</p>
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**Los Angeles Police Department
LD12 Controlled Substances
EV10 Quality of Life
S8 Drug Categories**

<p>d. Drugs react with oxygen and other chemicals in the body; they are broken down from complex substances into simpler ones. Eventually they are eliminated from the body.</p> <p>6. Drug abuse.</p> <p>a. Drug abuse results from taking an excess of prescription or illegal drugs.</p> <p>b. In more serious situations, the excessive use of certain prescribed or illegal drugs can lead to serious drug abuse and addiction and, in extreme circumstances, to death from an overdose.</p> <p>7. Tolerance: Tolerance is building up resistance to a drug, requiring more of the substance to be ingested in order to cause the desired effects.</p> <p>8. Addiction: Addiction is the physical/psychological dependence on a drug. Addiction becomes apparent when:</p> <p>a. The body accommodates the routine presence of the drug.</p> <p>b. The body begins to rely on the drug.</p> <p>c. Tolerance to the drug builds.</p> <p>d. More drugs are needed to trigger the desired effect, and, finally the body becomes physically addicted to the drug.</p> <p>9. Overdose: Overdose (also referred to as OD) is the excessive consumption of a drug; often fatal.</p> <p>II. Drug Categories / Pharmacological classifications.</p> <p>A. Stimulants.</p> <p>1. Stimulants increase the activity of the brain and other parts of the central nervous system (CNS) by</p>	<p>.</p> <p>Lecture: how the body can become:</p> <ul style="list-style-type: none"> • Tolerant to drug. • Addicted to the drug. • Overdoes with the drug. <p>[12.II.A] Lecture: Category Names [12.II.A.1] Lecture: Stimulants</p>
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**Los Angeles Police Department
LD12 Controlled Substances
EV10 Quality of Life
S8 Drug Categories**

<p>temporarily increasing the body's functional activity.</p> <ol style="list-style-type: none">2. A synthetic stimulant is a controlled substance made from a combination of ingredients that are not of natural origin.3. An organic stimulant is a controlled substance made from a plant. The principle active ingredient of cocaine is derived from the coca plant, grown primarily in Central and South America. Cocaine is the strongest stimulant of natural origin.4. Type of Stimulant and Common names:<ol style="list-style-type: none">a. Methamphetamine, Amphetamine. Common Street Names: Crank, crystal, Meth, Speed, Wire, go fast Water (aqua), Glass, Ice.b. Prescription Stimulants (Ritalin, Phentermine, Dexadrine). Street Names: Beans, Whites, Mini, Bennies.c. Cocaine, Crack/Free Base Powder. Street Name: Rock, crack, Blow, Snow, Nose Candy, Free base, white girl, blanca, coca, snow birds, flake.5. Appearance and packaging of synthetic stimulants.<ol style="list-style-type: none">a. Methamphetamine/Amphetamine: powder or crystal forms packaged in small plastic "baggies", small paper bindles, tinfoil.b. Prescription Stimulants: Various colored pills and tablets packaged in baggies tinfoil, vials, bottles.6. Cocaine is frequently seen in a base form (rock) or as a powder (HCL). It is odorless. Its physical	
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**Los Angeles Police Department
LD12 Controlled Substances
EV10 Quality of Life
S8 Drug Categories**

<p>characteristics can vary within region or trend. Cocaine can be packaged using a variety of methods depending on the amount.</p> <ul style="list-style-type: none">a. Kilo or Half-Kilo (2.2 lbs or 1.1 lbs): heat-sealed, clear, heavy plastic bags, gallon-size zip-lock plastic bags.b. Ounce (28.5 gr): smaller, heat-sealed packages prophylactics sandwich-size zip-lock plastic bag.c. Grams (package of artificial sweetener is one gram): film canisters, balloons, tinfoil, paper/plastic bindles, small glass vials, various small containers, small zip-lock plastic bags. <p>7. Cocaine cutting agents.</p> <ul style="list-style-type: none">a. Procaine, lactoseb. Yeast, flourc. Vitamin B-12, Lidocained. Mannitol, Baking sodae. Vitablend, Inositol <p>8. Method of use.</p> <ul style="list-style-type: none">a. Methamphetamine/Amphetamine: intranasal, injected, inhalation (smoked with pipe), orally (less common than other three methods).b. Prescription Stimulants: intranasal injected inhalation (smoked with pipe) orally (less common than other three methods).c. Cocaine Base: inhalation (smoked).d. Cocaine HCL (powder): intranasal (snorted) injected (called a "speed ball" when mixed with heroin).	<p>[12.II.B.] Lecture: Method of Use-Stimulants</p>
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**Los Angeles Police Department
LD12 Controlled Substances
EV10 Quality of Life
S8 Drug Categories**

<ul style="list-style-type: none"> a. MDMA: Hallucinogen with stimulant-like properties. b. (LSD) “Lysergic Acid Diethylamide: Short-acting hallucinogen with possible long-term after effects. c. Peyote (mescaline): Derived from mescal button (dried disk-like top from mescal cactus); mescaline is the psychoactive ingredient. d. Psilocybin: Organic compound derived from fungus (mushrooms). <p>4. Street names.</p> <ul style="list-style-type: none"> a. MDMA: “E”, “Ecstasy”, “X-TC”. b. LSD: acid - Blotter paper, Tabs – sheets, Purple haze, Squares, Dots, Window pane, Micro dots. c. Peyote: Button, Cactus. d. Psilocybin: Shrooms, Magic Mushrooms. <p>5. Appearance and packaging.</p> <ul style="list-style-type: none"> a. LSD: Liquid or powder form or tablet. May be packaged in wrappers/cellophane (called microdots), tablets/microdots in baggies or vials, blotter paper/sheets, stamps/envelopes, sugar cubes. b. Peyote (mescaline): Buttons which are ground into a brown granular substance. May be inserted into gelatin capsules for Packaging. c. Psilocybin: Fresh or dried mushroom caps or stems (with a light blue to iridescent violet ring around the top of the stem). Packaged in clear plastic baggies. d. MDMA (Ecstasy): Crystallized powder or tablet form, numerous colors. Inserted into 	
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**Los Angeles Police Department
LD12 Controlled Substances
EV10 Quality of Life
S8 Drug Categories**

<ul style="list-style-type: none">k. Possible flashbacks (with LSD)l. Grinding of teeth (bruxism)9. Synesthesia is the transposing (crossing) of the senses (e.g., hearing colors and seeing sounds).C. Narcotic Analgesics.<ul style="list-style-type: none">1. Opiates are narcotic pain relievers and very addictive drugs. They produce withdrawal signs and symptoms when the drug is stopped after chronic use and suppress withdrawal signs and symptoms when the drug is re-administered.2. Opiates come from two sources.<ul style="list-style-type: none">a. Opium poppy plant (morphine, codeine, heroin).b. Synthetic manufacturers (Demerol, Methadone, Dilaudid, Vicodin, Percodan).3. The human body produces endorphins, which have similar qualities to opiates, i.e. relieves pain naturally.4. One of the most commonly abused opiates is heroin. Heroin is made from morphine, which is made directly from opium.5. Common names for Heroin.<ul style="list-style-type: none">a. Negra, Chiva.b. Black, La Blanca.c. Tar, White.d. Boy.6. Heroin appearance.<ul style="list-style-type: none">a. Varies (often white/tan): Consistency of a coarse face powder, little or no odor and color varies with exposure and adulterant.b. Brown: Consistency varies from tiny pebbles to coarse face powder, acetic acid (vinegar-like) odor. Color varies from dark gummy brown to tan.	<p>[12.II.A.3] Lecture: Narcotic Analgesics</p>
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**Los Angeles Police Department
LD12 Controlled Substances
EV10 Quality of Life
S8 Drug Categories**

<ul style="list-style-type: none">c. Tar: consistency of black or brown tar, acetic acid (vinegar-like) odor.7. Packaging.<ul style="list-style-type: none">a. Plastic bag (multi-ounces).b. Prophylactics (ounces).c. Wrapped in electrical tape (color is regional).d. prophylactics (multi-grams)e. Balloons (multi- and partial grams)f. Paper, plastic, cellophane bagsg. Tinfoil, Preloaded syringes8. Method of use.<ul style="list-style-type: none">a. Injection (most common)b. Intranasal (snorted as a powder or liquid)c. Inhalation (smoked)d. Orally (swallowed or mixed with water and consumed as a liquid)e. Eye drop container. (i.e., over-the-counter products)9. There are two ways a user smokes opiates:<ul style="list-style-type: none">a. Heroin is smoked by using tinfoil, referred to as “chasing the dragon”.b. Opium is smoked by using an opium pipe.10. Injection equipment.<ul style="list-style-type: none">a. Matches or lighterb. Waterc. Spoon, bottle cap, soda can bottom (items used as a cooker).d. Hypodermic needle (e.g., insulin syringes).e. Small amount of cotton/cigarette filters (used as strainer).f. Tourniquet (e.g., a belt or necktie).g. Handkerchief (to wrap the outfit to conceal it).	<p>[12.II.B] Lecture: Method of Use-Narcotic Analgesics</p>
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Los Angeles Police Department
LD12 Controlled Substances
EV10 Quality of Life
S8 Drug Categories

<p>h. Pouch, glasses case or other container to conceal the above.</p> <p>i. Eyedroppers.</p> <p>11. Snorting equipment.</p> <p>a. Straw</p> <p>b. plastic pen casing</p> <p>c. nasal sprayer</p> <p>d. Syringe (used to spray liquid).</p> <p>12. Signs and symptoms.</p> <p>a. Horizontal Gaze Nystagmus (HGM): Not present.</p> <p>b. Vertical Gaze Nystagmus (VGM): Not present.</p> <p>c. Lack of Convergence: Not present.</p> <p>d. Pupil Reaction: little or no visible reaction.</p> <p>e. Pupil Size: Constricted below 3.0 mm.</p> <p>f. Pulse Rate: Below normal.</p> <p>g. Romberg Test: Slow.</p> <p>13. General indicators of use.</p> <p>a. Droopy eyelids (eyelids to top of pupils).</p> <p>b. Nodding off or drowsiness.</p> <p>c. Slow breathing.</p> <p>d. Slow deliberate speech or low raspy voice.</p> <p>e. Injection sites/puncture wounds.</p> <p>f. Profuse itching/scratching.</p> <p>g. Dry skin and mouth.</p> <p>h. Muscle tone relaxation.</p> <p>i. Euphoria.</p> <p>j. Cold extremities.</p> <p>D. Cannabis</p> <p>1. The biological name for the plant is Marijuana Sativa L. The three main street drugs that come from the marijuana plant are:</p> <p>a. Marijuana.</p> <p>b. Hashish.</p> <p>c. hash oil.</p>	<p>[12.II.B:3] Lecture: Indicators of Use- Narcotic Analgesics</p> <p>[12.II.A.4] Lecture: Cannabis</p>
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**Los Angeles Police Department
LD12 Controlled Substances
EV10 Quality of Life
S8 Drug Categories**

<ol style="list-style-type: none">2. THC, is the active ingredient in marijuana. (Delta-9-Tetrahydro Cannabinol).3. Common names.<ol style="list-style-type: none">a. Grass, Weed.b. Buds, Pot.c. Dope, Purple.d. Doobie, Ganjae. Shake, Mota.f. Yerba, Kush.g. Sinsemilla, Mary Jane.h. "420", Blunt, Reefer.4. Appearance.<ol style="list-style-type: none">a. Plant form: Green leaves generally composed of an odd number (5 to 11) of leaflets or lobes. Leaves are 2 to 6 inches long, pointed tips, saw-like edges have a peculiar odor.b. Plant (dried for smoking): greenish contains plant buds, bits of small stems, and possibly seeds, very distinct and peculiar odor.c. Hashish (concentrated marijuana): A drug-rich resinous secretion from the flowers of the marijuana plant processed by extraction to produce a more potent form of Marijuana.d. Hashish Oil (concentrated marijuana): Produced by a process of chemical extraction to yield a dark, viscous liquid; oil is much more potent than marijuana.5. Packaging. Marijuana is usually packaged according to its weight.<ol style="list-style-type: none">a. When packaged in brick (vacuum sealed package), weight ranges from 1 kilo (2.2 pounds or greater).	
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**Los Angeles Police Department
LD12 Controlled Substances
EV10 Quality of Life
S8 Drug Categories**

<ul style="list-style-type: none">l. Frequent users may have a chronic cough.10. Penal code section.<ul style="list-style-type: none">a. If individuals are found in a public place under the influence of an intoxicating liquor, drug, or controlled substance, etc., and are in such condition that they are unable to exercise care for their own safety or for others, they are subject to arrest for disorderly conduct. (Penal Code Section 647(f)).b. Agency policy may vary, to ensure the proper process refer to Penal Code 11362.5 through 11362.83 and agency guidelines (medicinal marijuana proposition 215).E. Depressants.<ul style="list-style-type: none">1. Depressants slow brain functions and parts of the central nervous system, ultimately reducing functional activity. Alcohol is one of the most common depressant drugs. Because it is readily available and legal, it is the most commonly abused drug.2. Depressants are categorized as:<ul style="list-style-type: none">a. Tranquilizers, Xanax,b. Valium, Librium, and Halcyon.c. Sedatives, Barbiturates and Rohypnol.3. Common names.<ul style="list-style-type: none">a. Secobarbital, Ativanb. Rohypnol, roofies.c. Halcyon, noned. Librium, nonee. Valium (Diazepan), nonef. Xanax, Zannie (bars)g. Gamma Hydroxy Butyrate (GHB), easy lay "G".h. Soma, Soma	<p style="text-align: center;">[12.II.A.5] Lecture: Depressants</p>
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**Los Angeles Police Department
LD12 Controlled Substances
EV10 Quality of Life
S8 Drug Categories**

<p>from off-white to yellowish-tan to brown. Commonly packaged in zip-lock plastic baggies, wrapped in aluminum foil bindles, joints (parsley, oregano, tobacco), blunts.</p> <p>3) Tablets, Capsules: Pale yellow or pink in color. Commonly packaged in vial or bottles.</p> <p>6. Method of use.</p> <ul style="list-style-type: none">a. Inhalation (most common): commercial cigarettes are dipped in PCP, dried then smoked. Vegetable material treated with PCP and smoked as a cigarette or in a pipe.b. Injection: Injected into vein.c. Intranasal: Powder form inhaled into the nose (like cocaine).d. Orally: Capsule or tablet form.e. Transderma: Through mucus membranes and skin of the body. <p>7. Cigarettes. Commercial cigarettes are usually dipped into liquid PCP. The most popular cigarettes are Shermans, Tijuana Smalls, Mores, and Kools.</p> <p>8. Powder: In a powder form, PCP may be sprinkled on tobacco, parsley, tobacco, or marijuana.</p> <p>9. Signs and symptoms.</p> <ul style="list-style-type: none">a. PCP can cause impairments and a combination of effects produced by depressants, stimulants, and hallucinogens.b. Horizontal Gaze Nystagmus (HGM): Present.c. Vertical Gaze Nystagmus (VGM): Present.d. Lack of Convergence: Present.	<p>[12.II.B] Lecture: Method of Use-Dissociative Anesthetics (PCP)</p>
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Los Angeles Police Department

LD12 Controlled Substances

EV10 Quality of Life

S8 Drug Categories

<p>those experienced with use of Ketamine or Phencyclidine. Introduced into body orally (ingestion is most common) via pills, gel capsules or as a syrup.</p> <p>H. Designer/ Club drug.</p> <ol style="list-style-type: none">1. MDMA2. GHB3. Rohypnol4. Ketamine5. Steroid abuse can cause increased aggression, along with many other severe physical side effects. Steroid use is controlled by law. Law enforcement officers are seeing more abuse of steroids, especially by athletes and body builders.	<ul style="list-style-type: none">• Possible additional objective symptoms that may be present, but not observed in the video.• Officer safety considerations. <p>Video Clip #1, (Suspects smoking crack) Video Clip #2, (Suspect using heroin user) Video Clip #3, (Suspect using aerosol can) Video Clip #4, (Using inhalants) Video Clip #5, (Suspect using Meth) Video Clip #6, (Suspects using Marijuana) Video Clip #7, (Suspect on PCP) Video Clip #8 (This clip depicts a traffic stop where the suspect had something clenched in his hand. When the officer attempted to ascertain the item in the suspect's hand, the suspect resisted and placed the item into his mouth.)</p>
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