Instructional Goal: To have Officers successfully complete the classroom certification requirement to become a DRE, set out by National Highway Traffic Safety Administration (NHTSA) and by the International Association of Chiefs of Police (IACP).

<u>Performance Objectives:</u> Using Instructor-Led Presentations, Participant-Led Presentations Knowledge Examination, Reading Assignments students will:

- Acquire the knowledge and skills needed to distinguish individuals under the influence of: Alcohol, Drugs, Combinations of alcohol and other drugs, or who are suffering from an injury or illness
- □ Identify the broad categories of drugs introducing the observable signs of impairment manifested by an individual
- Learn what Drugs are common in Society
- □ Understand the Development and Effectiveness of the program
- Overview of the DEC (Drug Evaluation Classification) Program Procedures
- Eye Examinations (a major component of the DEC Program procedures)
- □ Physiology and Drugs
- □ Vital Signs Examinations (a major component of the DEC Program procedures)
- □ The Seven Categories of Drugs
- Drug reference sources
- □ Interviewing Suspects (a major component of the DEC Program procedures)
- **CV** (Curriculum Vitae) Preparation and Maintenance
- **Case Preparation and Testimony**
- Qualify police officers to progress through DRE (Drug Recognition Expert) Program into field certification
- By the conclusion of the training, students will understand how the application of this training is in keeping with IACP Standards and what is required for DRE certification

<u>References</u>: Instructors, facilitators and training supervisors shall ensure that the most current references are utilized

<u>Day 1</u>

I. INTRODUCTION AND OVERVIEW

(1Hour 50 min)

A. Introduction to The Second Stage of Training: The DRE School

- 1. Write the names of the principal instructors and their relevant background on the dry-erase board.
- 2. Write the names of the instructor aides and other relevant individuals on the dry-erase board.
- B. Goals and Objectives of the Training
 - 1. State the objectives and goals of the course
 - 2. Outline the major course content
 - 3. Outline the schedule of major course activities
- C. Overview of Content and Schedule
 - 1. Course schedule is located in the Participant Manual
 - 2. Give a brief overview of the schedule of sessions
- D. Overview of Student Manual
 - 1. Outline the Participant Manual content and organization

2. Recognize course administrative matters

II. DRUGS IN SOCIETY AND IN VEHICLE OPERATION (1 Hour 10min)

- A. Definition and Categories of Drugs
 - 1. This definition is derived from the California Vehicle Code "Any substance that, when taken into the human body, can impair the ability of the person to operate a vehicle safely."
 - 2. Name the Seven drug categories
- B. Incidence and Characteristics of Drug Use in America
 - 1. Discuss drug use in America stats
- C. Incidence of Drug Impaired Driving
 - 1. NHTSA crash findings

III.DEVELOPMENT AND EFFECTIVENESS OF THE DRUG EVALUATION
AND CLASSIFICATION PROCESS(1 Hour)

- A. Origin and Evolution of the Program
 - 1. The DEC Program was developed by personnel of the Los Angeles Police Department (LAPD).
 - 2. Development of the DEC Program began in the early 1970's in response to a growing awareness that many people apprehended for impaired driving were under the influence of drugs rather than alcohol.
- B. Evidence of Program Effectiveness
 - 1. Discuss Laboratory and field Validation Study's
- C. Case Law Review
 - 1. Daubert Standard

IV. OVERVIEW OF DRUG EVALUATION AND CLASSIFICATION PROCEDURES (2 Hours 30 Min)

- A. Components of the Drug Evaluation and Classification (DEC)1. 12 step process
- B. General Guidelines for Interviewing the Arresting Officer
 - 1. In most cases, the subjects you will examine will not be people you arrested.
 - 2. The arresting officer may have seen or heard things that would be valuable indicators of the kinds of drugs the subject has ingested.
 - 3. The arresting officer, in searching the subject, may have uncovered drugrelated paraphernalia or even drugs themselves.
 - 4. The arresting officer also may be able to alert you to important information about the subject's behavior that could be very valuable for your own safety.
- C. Overview of the Preliminary Examination
 - 1. A major purpose of the preliminary examination is to determine if the subject may be suffering from an injury or some other medical condition not necessarily related to drugs
- D. Overview of the Examinations of the Eyes

- 1. One of the most dramatic of these effects is nystagmus, which means an involuntary jerking of the eyes.
- E. Review of the Divided Attention Psychophysical Tests
 - 1. Modified Romberg Balance (MRB)
 - 2. Walk and Turn (WAT)
 - 3. One Leg Stand (OLS)
 - 4. Finger to Nose (FTN)
- F. Overview of the Vital Signs Examinations
 - 1. Many categories of drugs affect the operation of the heart, lungs, and other major organs of the body.
- G. Overview of the Dark Room Examinations
 - 1. By systematically changing the amount of light entering the subject's eyes, we can observe the pupils' appearance and reaction under controlled conditions.
- H. Examination of Muscle Tone
 - 1. Evidence of muscle tone can also be observed when taking the subject's pulse, blood pressure, or while examining for injection sites.
- I. Examination for Injection Sites
 - 1. Certain drugs are commonly injected by their users via hypodermic needles
- J. Subject Statements
 - 1. The DRE should proceed to interview the subject to support their opinion concerning the drug category or categories involved
- K. Opinion of DRE
 - 1. Based on all of the evidence and observations gleaned from the preceding steps, the DRE should be able to reach an informed opinion as to:
 - i. Whether the subject is under the influence of a drug or drugs, and if so
 - ii. The probable category or categories of drugs causing impairment
- L. Obtaining a Toxicological Sample
 - 1. The toxicological examination is a chemical test or tests designed to obtain scientific, admissible evidence to support the DRE's opinion
- M. A Brief Overview of Toxicology
 - 1. Urine
 - 2. Blood
 - 3. Must include preservative
 - 4. Chain of custody

V. EYE EXAMINATIONS

- A. Purpose of the Examinations
 - 1. The principal purpose of all of the eye examinations is to obtain articulable facts indicating the presence or absence of specific categories of drugs.
 - 2. Certain drug categories usually cause the eyes to react in specific ways. Other drug categories usually do not cause those reactions.

(1 Hour 30 Min)

- 3. The tests of Horizontal Gaze Nystagmus (HGN) and Vertical Gaze Nystagmus (VGN) provide important indicators of the drug categories that may or may not be present.
- B. Procedures and Clues
 - 1. HGN
 - 2. VGN
 - 3. LOC
 - 4. Pupil Size Estimation
 - 5. Reaction to Light
- C. Demonstrations
- D. Document Procedures
 - 1. DRE face sheet

<u>Day 2</u>

VI. PHYSIOLOGY AND DRUGS: AN OVERVIEW

(4 Hours)

A. Body Systems

1. MURDERS INC

- B. The Concept of Homeostasis
 - 1. The tendency toward a relatively stable equilibrium between interdependent elements, especially as maintained by physiological processes.
- C. A Simple View of the Heart and the Circulatory System
- D. The heart is the pump and has two sides:
 - 1. Consists of the left atrium and ventricle. The upper chamber (atrium) receives blood from the great veins, the lower chamber discharges blood into the great arteries.
 - 2. Left side pumps blood through the aorta and the arteries to the tissues.
 - 3. Blood, after passing through the tissues, returns via the veins to the right side.
 - 4. Right side pumps blood through the pulmonary artery to the lungs and returns it to the left side of the heart again via the four pulmonary veins.
 - 5. Consists of the right atrium and ventricle.
- E. Circulation is a closed system, where blood is propelled by contractions of the heart.
- F. Blood is driven into arteries, arteries divide into smaller and smaller branches and finally into meshwork of fine capillaries which pervade body tissues.
- G. A Simplified Concept of the Nervous System
 - 1. CLARIFICATION: Nerves are often pictured as telephone or telegraph wires.
 - 2. The nerves that carry messages to and from the brain often are pictured as "wires" that carry electrical signals.
 - 3. A more accurate, but still simplified concept would envision a nerve as a series of broken wire segments, with the segments separated by short spaces, or gaps.
- H. How Drugs Work
 - 1. In very simple terms, drugs work by artificially creating natural body reactions generally associated with the work of neurotransmitters and hormones.
 - 2. Therapeutic doses of legitimate prescription and over-the-counter drugs are designed to produce mild and carefully-controlled simulations of the natural action of neurotransmitters and hormones.

- 3. Ask participants: What drug do many people take to artificially overcome the drowsiness they feel in the morning?
- 4. Large, abusive doses of drugs may produce greatly exaggerated simulations of the natural action of hormones and neurotransmitters, sometimes with disastrous results.
- I. Medical Conditions Which Sometimes Mimic Drug Impairment
 - 1. Certain medical conditions or injuries may cause signs and symptoms similar to those of drug impairment.
 - i. Shock
 - ii. Stroke
 - iii. Others

VII. EXAMINATION OF VITAL SIGNS

(2 Hours)

- A. Concepts and Procedures for Measuring Pulse Rate
 - 1. Pulse: The rhythmic dilation and relaxation of an artery that results from the beating of the heart
 - 2. Pulse Rate: The number of pulsations in an artery per minute
 - 3. Artery: A strong, elastic blood vessel that carries blood from the heart to the body tissues
 - 4. Vein: A blood vessel that carries blood back to the heart from the body tissues
- B. Step-by-step procedures for measuring Blood Pressure
 - 1. Slowly release the pressure in the cuff.
 - 2. Slowly release the air pressure until the blood just begins to spurt through the artery: that level will be the systolic pressure.
 - 3. Continue to release the air pressure until the blood flows continuously through the artery: that level will be the diastolic pressure.
- C. Concepts of Temperature Measurement
 - 1. Body temperature is measured using an oral digital thermometer.

VIII. DEMONSTRATIONS OF THE EVALUATION SEQUENCE (2 Hours)

- A. The sequence in which examinations and other activities are performed during the drug influence evaluation procedure
 - 1. Live Demonstrations
 - 2. Video Demonstrations

<u>Day 3</u>

IX. CENTRAL NERVOUS SYSTEM DEPRESSANTS

(3 Hours)

- A. Overview of CNS Depressants
 - 1. Overview of the Category
 - 2. Possible Effects
 - 3. Onset and Duration of Effects
 - 4. Overdose Signs and Symptoms
 - 5. Expected Results of the Evaluation

- 6. Classification Exemplars
- B. Possible Effects of CNS Depressants
 - 1. CNS Depressants slow down the operations of the brain.
- C. The Onset and Duration of Depressants' Effects
 - 1. Smoked
 - 2. Oral
 - 3. Injected
 - 4. Other
- D. Signs and Symptoms of Depressant Overdose
 - 1. Subject will become extremely drowsy and may pass out
 - 2. The heartbeat (pulse) will be rapid and weak
 - 3. Respiration will become shallow
 - 4. Skin may feel cold and clammy
 - 5. One major danger with CNS Depressant overdoses is death from respiratory failure
 - 6. A sufficiently high dose of CNS Depressant will suppress the portions of the brain that control respiration
- E. Expected Results of the Evaluation
 - 1. Matrix

X. CENTRAL NERVOUS SYSTEM STIMULANTS

(2 Hours)

- A. Overview of Central Nervous System Stimulants
 - 1. Overview of the Category
 - 2. Possible Effects
 - 3. Onset and Duration Effects
 - 4. Overdose Signs and Symptoms
 - 5. Expected Results of the Evaluation
 - 6. Classification Exemplars
- B. Possible Effects of CNS Stimulants
 - 1. CNS Stimulants speed up the operation of the Central Nervous System.
 - 2. "Speed Up" does not mean "improve"
 - 3. They accelerate the heart rate and many other processes of the body. For that reason, they have also been referred to as "Uppers."
- C. Onset and Duration of CNS Stimulants' Effects
 - 1. Smoked
 - 2. Oral
 - 3. Injected
 - 4. Other
- D. Signs and Symptoms of Stimulant Overdose
 - 1. Convulsions, faint, or pass into a coma
 - 2. Heartbeat (pulse) increases
 - 3. Hallucinations may occur
- E. Expected Results of the Evaluation
 - 1. Matrix

XI. PRACTICE: EYE EXAMINATIONS

A. Describe eye examination procedures

1. Team Assignments

- B. Conduct pupil size and reaction to light exams
 - 1. Room light
 - 2. Dark Room
- C. Document results of eye exams
 - 1. Record Results

XII. ALCOHOL WORKSHOP

- A. Properly administer eye examinations
 - 1. Hands-On Practice
- B. Properly administer psychophysical tests
 - 1. Hands-On Practice
- C. Observe and record subject's performance
 - 1. One team member will administer tests
 - 2. One team member will record results
 - 3. Other team member(s) will assist
- D. Determine level of impairment
 - 1. Record teams' assessments of each volunteer's probable BAC status

XIII. PHYSICIAN'S DESK REFERENCE AND OTHER RESOURCES (1 Hour)

A. The Physician's Desk Reference as a Resource

- 1. The Complete Guide to Prescription and Non-prescription Drugs
- 2. The Pill Book
- 3. Nursing Drug Handbook
- 4. Nurse Pocket Drug Guide
- 5. Drug Identification Bible
- B. The Contents of the PDR
 - 1. Use PDR to identify Drugs

Day 4

XIV. HALLUCINOGENS

A. Overview of Hallucinogens

1. Hallucinogens are drugs that affect a person's perceptions, sensations, thinking, self-awareness and emotions

thinking, self-awareness and emotion

- B. Possible Effects of Hallucinogens
 - 1. Synesthesia
 - 2. Delusion
 - 3. Illusion
 - 4. Intensify whatever mood user is in at the time drug is taken
 - 5. Uncover mental or emotional flaws user was unaware of possessing
 - 6. Hallucination: distorted perception of reality

(2 Hours)

(1 Hours 30 Min)

(30 Min)

- C. Onset and Duration of Hallucinogens' Effects
 - 1. Smoked
 - 2. Oral
 - 3. Injected
 - 4. Other

D. Signs and Symptoms of Hallucinogen Overdose

- 1. Bad trip
- 2. Hyperthermia
- 3. Convulsions
- E. Expected Results of the Evaluation
 - 1. Matrix

XV. PRACTICE: TEST INTERPRETATION

- A. Analyze results of a drug influence evaluation
 - 1. Identify the category of drugs affecting the individual examined
- B. Articulate basis for opinion
 - 1. Instructor-Led Demonstrations
 - 2. Small-Group Practice
 - 3. Participant-Led Presentations

XVI. DISSOCIATIVE ANESTHETICS

- A. Overview of the Category
 - 1. Dissociative Anesthetics include drugs that inhibit pain by cutting off or disassociating the brain's perception of pain. The drugs within this category normally will induce a state of sedation, immobility, amnesia, and marked analgesia.
- B. Possible Effects of Dissociative Anesthetics
 - 1. Drugs that inhibit pain by cutting off or dissociating brain's perception of pain
 - 2. Induce a state of sedation, immobility, amnesia, and analgesia
- C. Signs and Symptoms of Dissociative Anesthetic Overdose
 - 1. Difficulty with speech
 - 2. Disoriented
 - 3. Early HGN angle of onset
 - 4. Hallucinations
- D. Onset and Duration of Effects
 - 1. Smoked
 - 2. Oral
 - 3. Injected
 - 4. Other
- E. Expected Results of the Evaluation
 - 1. Matrix

(2 Hours)

(1 Hour)

XVII. NARCOTIC ANALGESICS

(3 Hours)

- A. Overview of Narcotic Analgesics
 - 1. Narcotic a drug derived from Opium, or produced synthetically, that relieves pain but also induces euphoria, alters mood, and produces sedation
 - 2. "Analgesic" a medication or drug that relieves pain.
- B. Possible Effects of Narcotic Analgesics
 - 1. Relieve pain
 - 2. Produce withdrawal signs and symptoms
 - 3. Suppress withdrawal signs and symptoms
- C. Onset and Duration of Effects of Narcotic Analgesics
 - 1. Smoked
 - 2. Oral
 - 3. Injected
 - 4. Other
- D. Signs and Symptoms of Narcotic Analgesic Overdose
 - 1. Slow, shallow breathing
 - 2. Clammy skin
 - 3. Convulsions
 - 4. Blue lips and pale or blue body
 - 5. Extremely constricted pupils
 - 6. Recent needle marks
 - 7. Coma
 - 8. Death
- E. Expected Results of the Evaluation
 - 1. Matrix
- F. Injection Site Examination
 - 1. The slang term for an injection site is a "mark"
 - 2. Many drugs can be injected
 - 3. The presence of injection sites doesn't ensure the subject is under the influence of drugs
 - 4. Examination of injection sites is just one of the 12 steps in the evaluation
 - 5. Injection sites are a sign of drug abuse which may or may not be present
 - 6. May be evidence of habitual use
 - 7. The trauma to the skin, muscles, and the blood is the basic concept of injection sites
- G. Expected Location of Injection Marks
 - 1. Ankles
 - 2. Feet
 - 3. Legs
- H. Conclusion
 - 1. The injection site examination may reveal evidence of recent use

<u>Day 5</u>

XVIII. PRACTICE: TEST INTERPRETATION

- A. Analyze results of a drug influence evaluation
 - 1. Identify the category of drugs affecting the individual examined
- B. Articulate basis for opinion
 - 1. Instructor-Led Demonstrations
 - 2. Small-Group Practice
 - 3. Participant-Led Presentations

XIX. INHALANTS

- A. Overview of Inhalants
 - 1. Inhalants are breathable chemicals that produce mind altering results
 - 2. Sometimes called "Deliriants"
 - 3. Effects similar to CNS Stimulants, Depressants, or Hallucinogens
- B. Possible Effects of Inhalants
 - 1. Altered shapes and colors
 - 2. Antagonistic behavior
 - 3. Bizarre thoughts
 - 4. Distorted perceptions of time and distance
 - 5. Dizziness and numbness
 - 6. Drowsiness and weakness
- C. Onset and Duration of Inhalants' Effects
 - 1. Smoked
 - 2. Oral
 - 3. Injected
 - 4. Other
- D. Signs and Symptoms of Inhalant Overdose
 - 1. Risk of death
 - 2. Cardiac arrhythmia "sudden sniffing death" (SSD)
 - 3. Respiration ceases
 - 4. Severe nausea and vomiting
 - 5. Long term abuse:
 - i. Permanent damage to Central Nervous System
 - ii. Reduced mental and physical abilities
- E. Expected Results of the Evaluation
 - 1. Matrix

XX. PRACTICE: VITAL SIGNS EXAMINATIONS

- (30 Min)
- 1. Conduct examinations of pulse, blood pressure and temperature 1.Team Assignments
 - 2.Participants will work in three- or four-member teams
- 2. Describe the vital signs examination procedures
 - 1.Instructor Led Presentations

(1 Hour 30 Min)

(1 Hour)

- 3. Document the results of the vital signs examinations
 - 1. Instructor Led Coaching

XXI. CANNABIS

(3 Hours 30 Min)

- A. Overview of Cannabis
 - 1. Derived primarily from various species of Cannabis plants. Cannabis Sativa and Cannabis Indica.
 - 2. Primary psychoactive ingredient is Delta-9 Tetrahydrocannabinol
- B. Possible Effects of Cannabis
 - 1. Lowers intraocular pressure
 - 2. Suppresses nausea
 - 3. Helps inhibit seizures
 - 4. Appetite enhancer
 - 5. A muscle relaxant
 - 6. A tumor growth retardant
- B. Onset and Duration of Cannabis' Effects
 - 1. Smoked
 - 2. Oral
 - 3. Injected
 - 4. Other
- C. Signs and Symptoms of Cannabis Overdose
 - 1. Excessive or long-term use of Marijuana can have very undesirable consequences
- D. Expected Results of the Evaluation
 - 1. Matrix

XXII. CURRICULUM VITAE PREPARATION AND MAINTENANCE

(1 Hour 30 Min)

- A. Purpose of the Curriculum Vitae
 - 1. A witness is not qualified as an expert witness unless it is shown he or she is familiar with the subject upon which he or she is asked to give an opinion.
- B. Preparation for Court Qualification
 - 1. Being qualified as an expert may be as simple as stating your occupation or take several hours of exhausting questioning by both the prosecutor and the defense attorney.
 - 2. Although knowledge only greater than what the public has is required to qualify you as an expert, your testimony will carry much more "weight" if you have good credentials.
 - 3. Accurate, up-to-date information is essential for an officer who is called upon to give his or her qualification as an expert in any field.
- C. Curriculum Vitae Content
 - 1. Relevant Formal Education
 - 2. Formal Training
 - 3. Relevant Experience

- 4. Outside Readings and Study
- 5. Training or research conducted
- 6. Published works
- D. Curriculum Vitae Examples
 - 1. Handouts

<u>Day 6</u>

XXIII. DRUG COMBINATIONS

- A. Examples of Polydrug Use
 - 1. Polydrug use means ingesting drugs from two or more drug categories.
- B. Possible Effects of Drug Combinations
 - 1. The Null Effect
 - 2. The Overlapping Effect
 - 3. The Additive Effect
 - 4. The Antagonistic Effect
- C. Identifying Expected Indicators of Specific Combinations 1. Manual examples for student practice

XXIV. PRACTICE: TEST INTERPRETATION

- A. Analyze results of a drug influence evaluation
 - 1. Identify the category of drugs affecting the individual examined
- B. Articulate basis for opinion
 - 1. Instructor-Led Demonstrations
 - 2. Small-Group Practice
 - 3. Participant-Led Presentations

XXV. PREPARING THE NARRATIVE REPORT

- A. Discuss the essential elements of the drug influence evaluation report
 - 1. Complete, clear, convincing
 - 2. Well written
 - 3. Descriptive, detailed and complete
 - 4. Organized, clearly documented, and compelling
- B. Prepare a clear and concise narrative description of the results of the drug influence evaluation
 - 1. Components of the Process
 - 2. Components of the Drug Evaluation
 - 3. Drug Evaluation Narrative Report
 - 4. Sample Report

XXVI. PRACTICE: TEST ADMINISTRATION

- A. Test
 - 1. Student Testing

(1 Hour)

(1 Hour)

(1 Hour)

(2 Hours)

XXVII. DRE School Full Course Review

A. Review Study material

1. Student participation for study review

<u>Day 7</u>

XXVIII. DRE FINAL

A. Test

1. Student Testing

XXIX. CASE PREPARATION AND TESTIMONY

- A. Guidelines for Case Preparation
 - 1. Begins during your initial investigation
 - 2. Review all records and reports
 - 3. Review all evidence and your conclusion
 - 4. Review notes with arresting officer
 - 5. Clarify or resolve any discrepancies
- B. Guidelines for Direct Testimony
 - 1. Testifying about your qualifications as a Drug Recognition Expert
 - 2. Testifying about the facts of the case
- C. Typical Defense Tactics
 - 1. Challenging your observations and interpretations
 - 2. Challenging your credentials

XXX. CLASSIFYING A SUSPECT (ROLE PLAY)

- A. Conduct a complete drug influence evaluation using the systematic and standardized 12step process
 - 1. Scenarios: Simulated Examinations
- B. Compile a complete, clear and accurate report documenting the results of a drug influence evaluation using the 13-step component narrative report format
 - 1. Group Writing Exercise

XXXI. TRANSITION TO CERTIFICATION TRAINING

- A. Receive assignments for Field Certification Training
 1. Pick partners/ units
- B. Understand the steps in the DRE certification process
 - 1. Phase I- Two-day (16-hour) Pre-school
 - 2. Phase II- Seven-day (56-hour) DRE School
 - 3. Phase III- Field Certifications (usually within 60 to 90 days, but not longer than six months following the completion of the classroom training)

(3 Hours)

(2Hours)

(2 Hours)

(2 Hours)

(1 Hour)

XXXII. GRADUATION

(1 Hour)

A. Closing remarks will be offered by appropriate representatives of the department of faculty.