

# Under the Influence Key Notes

## 11550 - The Evaluation

- Check for Horizontal Gaze and Vertical nystagmus and Lack of Convergence
  - Some drugs produce signs of nystagmus. By conducting these tests, it can help you determine if you are dealing with an 11550 or 647(f)DG matter.
- The Romberg Test
  - Have the person close their eyes and estimate 30 seconds. Plus or minus 10 seconds can be an indicator of something the person has used.
- Check for the pulse
  - 60-90 beats per minute is the regular range for a pulse
  - Anything above or below can be another indicator of someone being under the influence of anything.
- Observe pupil size
  - Dilation typically can mean someone is under the influence of many forms of narcotics
  - Opiates are the only drugs that will produce constricted pupil sizes
  - Indirect light is no longer part of the Room 138 pupil exam. Only room light, darkness and direct light.

\*\*\*\*Fluttering eyelids and the dry paste on a person's tongue are not actual tests! These are indicators and can be used as a lead in to your evaluation. By observing fluttering eyelids and the dry paste on the tongue, it can serve as your reasonable suspicion to perform an evaluation.

\*\*Remember to take three recordings of the person's pulse. The first one during your initial observation counts. You can choose to wait either 15 or 30 minutes between your pulse recordings. Anything less than 15 will not be considered an accurate reading.

\*\*When acquiring the bodily sample, the time of ingestion is a good thing to remember. If the person ingested the drug right before you contacted them, then blood is the better choice. A blood sample shows the person is currently affected by the drug because the blood circulates through their brain. Signs of drugs in urine occur after the drug has metabolized in the body. If it has been a few days, then urine is no problem.

\*\*Trust your gut. If the person comes clean about their drug usage then GREAT!! If not, go with what you see. Sucked in faces, fatigued looks, missing teeth, browning between teeth, acne, and horrible breath are all key things to notice when observing someone possibly under the influence. If it looks like a doper, scratches like a doper, and acts like a doper ...then your best bet is that he is a doper. Nobody goes through all of that trouble just to look like one.

## **647(f) Drugs**

The same type of evaluation applies except a bodily sample is not required for the prosecution. I know it is more work for an arrest but it is a valuable tool if you need probable cause for something greater. Your cheat sheets have a small listing of drugs applicable under 647(f) Drugs. Also remember that Spice is a 647(f) Drug and people can be arrested for being under the influence of it.

## **DUI – Drugs**

The key thing about DUI drugs is to show proof of impairment. Conduct your initial 11550/647(f) DG evaluation. If you see signs of drug use and decide to evaluate for a DUI, conduct your regular SFSTs. Impairment can range from people forgetting instructions, constantly reminding them of what to do, and also physical signs of impairment. If there is impairment, transport them downtown and complete your drug evaluation. Collect the sample and process the arrest. For the report, complete the DUI form and include your 11550 evaluation along with your findings.

## **Notable charges outside of your basic 11550 and 647(f) Drugs**

- 23152(c) VC – DUI unlawful for an addict to drive. You must show proof they are an addict. Get them to admit it somehow.
- 23152(e) VC – DUI for drugs only. Pretty much your 11550 but the driving version. Impairment is still necessary to prove the crime. Non-hazardous citations do not work as a sign of impairment.
- 23152(f) VC – DUI for the combined influence of drugs and alcohol. Same rules apply.
- 381(a) PC – It serves as possession and intoxication of inhalants. The person can be arrested anywhere and a bodily sample is not required. 381(a) PC is for Toluene and 380(b) PC is for Nitrous Oxide