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ARIZONA DRUG RECOGNITION EXPERT PROGRAM

BEGINNING OF THE DRE PROGRAM

The Drug Recognition Expert (DRE) Program and protocol was initially developed in the 1970s by traffic enforcement officers of the Los Angeles Police Department in an effort to assist with evaluating, arresting, and prosecuting drug impaired drivers. The DRE Schools train selected officers to follow a standardized and systematic twelve -step evaluation protocol to determine the possible presence of any of the seven recognized drug categories. The evaluation protocol enables the officer to determine:

Is an individual is impaired?

Are drugs involved?

If drugs are involved, what category of drug is present?

The DRE protocol provides officers with the skills to recognize the signs and symptoms associated with seven categories of psychoactive drugs. The ability to recognize such signs and symptoms also provides the DRE the capability to rule in (or out) many medical conditions, such as illness or injury possibly contributing to the observed impairment.

Although the primary focus of the DRE process is recognition of impaired drivers, the evaluation process also applies to Health and Safety Code violations, probation, parole, drug usage in the workplace, and other areas to assist with identifying a potentially drug-impaired individual.

THE DRE PROGRAM IN ARIZONA

The DRE Program came to Arizona as a pilot program in 1987 and began with training 14 DRE's in Los Angeles. DRE classes began in-state in 1989 with at least one class per year. With 52 law enforcement agencies hosting more than 406 active DRE's, 125 active DRE Instructors in the state, the Arizona DRE Program is among the top in the nation. As a leader in the DRE community, Arizona also hosted the first training conference in June 1995, now known as the Annual IACP DRE Conference.

Arizona's commitment to the DRE Program is evident in their outreach to other agencies. Arizona participated in the certification process for more than 700 DRE candidates from 13 other states and Canada, during 75 DRE Certification Nights at the Maricopa County Sheriff's Office 4th Ave Jail in 2013.

The Governor's Office of Highway Safety continues to support the DRE Program through coordination of training opportunities and funding.

THE 7 DRUG CATEGORIES

(1) Central Nervous System (CNS) Depressants

CNS Depressants slow down the operations of the brain and the body. Examples of CNS Depressants include alcohol, barbiturates, anti-anxiety tranquilizers (e.g., Valium, Librium, Xanax, Prozac, and Thorazine), GHB (Gamma Hydroxybutyrate), Rohypnol and many other anti-depressants (e.g., as Zoloft, Paxil).

(2) CNS Stimulants

CNS Stimulants accelerate the heart rate and elevate the blood pressure and "speed-up" or over-stimulate the body. Examples of CNS Stimulants include Cocaine, "Crack", Amphetamines and Methamphetamine ("Crank").

(3) Hallucinogens

Hallucinogens cause the user to perceive things differently than they actually are. Examples include LSD, Peyote, Psilocybin and MDMA (Ecstasy).

(4) Dissociative Anesthetics

The Dissociative Anesthetics category includes drugs that inhibit pain by cutting off or dissociating the brain's perception of the pain. PCP and its analogs are examples of Dissociative Anesthetics.

(5) Narcotic Analgesics

A narcotic analgesic relieves pain, induces euphoria and creates mood changes in the user. Examples of narcotic analgesics include Opium, Codeine, Heroin, Demerol, Darvon, Morphine, Methadone, Vicodin and OxyContin.

(6) Inhalants

Inhalants include a wide variety of breathable substances that produce mind-altering results and effects. Examples of inhalants include Toluene, plastic cement, paint, gasoline, paint thinners, hair sprays and various anesthetic gases.

(7) Cannabis

Cannabis is the scientific name for marijuana. The active ingredient in cannabis is delta-9 tetrahydrocannabinol, or THC. This category includes cannabinoids and synthetics like Dronabinol.

[1] [1] *The 7 Drug Categories*. (2011). Retrieved from The International Drug Evaluation and Classification Program website: http://www.deep.org/experts/7categories.htm

ARIZONA DRUG RECOGNITION
THE 7 DRUG CATEGORIES

THE 12-STEP DRE PROTOCOL

The DREs utilize a 12-step process to assess their suspects:

1. *Breath Alcohol Test*

The arresting officer reviews the subject's breath alcohol concentration (BrAC) test results and determines if the subject's apparent impairment is consistent with the subject's BrAC. If so, the officer will not normally call a DRE. If the impairment is not explained by the BrAC, the officer requests a DRE evaluation.

2. *Interview of the Arresting Officer*

The DRE begins the investigation by reviewing the BrAC test results and discussing the circumstances of the arrest with the arresting officer. The DRE asks about the subject's behavior, appearance, and driving. The DRE also asks if the subject made any statements regarding drug use and if the arresting officer(s) found any other relevant evidence consistent with drug use.

3. *Preliminary Examination and First Pulse*

The DRE conducts a preliminary examination, in large part, to ascertain whether the subject may be suffering from an injury or other condition unrelated to drugs. Accordingly, the DRE asks the subject a series of standard questions relating to the subject's health and recent ingestion of food, alcohol and drugs, including prescribed medications. The DRE observes the subject's attitude, coordination, speech, breath and face. The DRE also determines if the subject's pupils are of equal size and if the subject's eyes can follow a moving stimulus and track equally. The DRE also looks for horizontal gaze Nystagmus (HGN) and takes the subject's pulse for the first of three times. The DRE takes each subject's pulse three times to account for nervousness, check for consistency and determine if the subject is getting worse or better. If the DRE believes that the subject *may* be suffering from a significant medical condition, the DRE will seek medical assistance immediately. If the DRE believes that the subject's condition is drug-related, the evaluation continues.

4. Eye Examination

The DRE examines the subject for HGN, vertical gaze Nystagmus (VGN) and for a lack of ocular convergence. A subject lacks convergence if his eyes are unable to converge toward the bridge of his nose when a stimulus is moved inward. Depressants, inhalants, and dissociative anesthetics, the so-called "DID drugs", may cause HGN. In addition, the DID drugs may cause VGN when taken in higher doses for that individual. The DID drugs, as well as cannabis (marijuana), may also cause a lack of convergence.

5. *Divided Attention Psychophysical Tests*

The DRE administers four psychophysical tests: the Romberg Balance, the Walk and Turn, the One Leg Stand, and the Finger to Nose tests. The DRE can accurately determine if a subject's psychomotor and/or divided attention skills are impaired by administering these tests.

6. *Vital Signs and Second Pulse*

The DRE takes the subject's blood pressure, temperature and pulse. Some drug categories may elevate the vital signs. Others may lower them. Vital signs provide valuable evidence of the presence and influence of a variety of drugs.

7. *Dark Room Examinations*

The DRE estimates the subject's pupil sizes under three different lighting conditions with a measuring device called a pupilometer. The device will assist the DRE in determining whether the subject's pupils are dilated, constricted, or normal. Some drugs increase pupil size (dilate), while others may decrease (constrict) pupil size. The DRE also checks for the eyes' reaction to light. Certain drugs may slow the eyes' reaction to light. Finally, the DRE examines the subject's nasal and oral cavities for signs of drug ingestion.

8. *Examination for Muscle Tone*

The DRE examines the subject's skeletal muscle tone. Certain categories of drugs may cause the muscles to become rigid. Other categories may cause the muscles to become very loose and flaccid.

9. *Check for Injection Sites and Third Pulse*

The DRE examines the subject for injection sites, which may indicate recent use of certain types of drugs. The DRE also takes the subject's pulse for the third and final time.

10. *Subject's Statements and Other Observations*

The DRE typically reads *Miranda,* if not done so previously, and asks the subject a series of questions regarding the subject's drug use.

11. *Analysis and Opinions of the Evaluator*

Based on the totality of the evaluation, the DRE forms an opinion as to whether or not the subject is impaired. If the DRE determines that the subject is impaired, the DRE will indicate what category or categories of drugs may have contributed to the subject's impairment. The DRE bases these conclusions on his training and experience and the DRE Drug Symptomology Matrix. While DREs use the drug matrix, they also rely heavily on their general training and experience.

12. *Toxicological Examination*

After completing the evaluation, the DRE normally requests a urine, blood and/or saliva sample from the subject for a toxicology lab analysis.

Nothing in or about the DRE protocol is new or novel. The DRE protocol is a compilation of tests that physicians have used for decades to identify and assess alcohol- and/or drug-induced impairment.

DRUG RECOGNITION EXPERT PROGRAM

TRAINING PROGRAM

"The DEC Program trains police officers and other approved public safety officials as drug recognition experts (DREs) through a three-phase training process:

1. Drug Recognition Expert Pre-School (16 hours)
2. Drug Recognition Expert DRE School (56 hours)
3. Drug Recognition Expert Field Certification (Approximately 40 – 60 hrs)

The training relies heavily on the Standardized Field Sobriety Tests (SFST's), which provide the foundation for the DEC Program. Once trained and certified, DREs become highly effective officers skilled in the detection and identification of persons impaired by alcohol and/or drugs. DREs are trained to conduct a systematic and standardized 12-step evaluation consisting of physical, mental and medical components." (excerpt taken from the website: The International Drug Evaluation and Classification Program, page: Drug Recognition Experts DRE Certification and Training Section, http://www.decp.org/training/)