

# Officer Safety



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## **B. Officer Safety**

Police officers will, at times, encounter individuals with mental illness or intellectual/developmental disabilities. These individuals may exhibit signs and symptoms very similar to those of an individual impaired by drugs and/or alcohol. These individuals may also be experiencing coexisting conditions of mental illness and drug impairment. It is important for officers to make every effort to prevent violent interactions using an array of tools and resources necessary for positive, successful outcomes. Using a strategic approach to interactions with individuals with suspected mental health problems or intellectual/developmental disabilities can ensure office safety.

The International Association of Chiefs of Police (IACP) has a resource entitled, “Improving Officer Response to Persons with Mental Illness and Other Disabilities” that can be accessed at [www.theiacp.org](http://www.theiacp.org). Other recommended web sites and links for further information that may be beneficial for DREs and other police officers include [www.samhsa.gov](http://www.samhsa.gov), [www.nami.org](http://www.nami.org), [www.citinterational.org](http://www.citinterational.org), [www.mentalhealthfirstaid.org/cs](http://www.mentalhealthfirstaid.org/cs), [www.ncmhr.org](http://www.ncmhr.org), or [www.nasmhpd.org/index.aspx](http://www.nasmhpd.org/index.aspx).

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# QUESTIONS?

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## Drug Category Matrix

	<b>CNS Depressant</b>	<b>CNS Stimulant</b>	<b>Hallucinogen</b>	<b>Dissociative Anesthetic</b>	<b>Narcotic Analgesic</b>	<b>Inhalant</b>	<b>Cannabis</b>
HGN							
VGN							
LOC							
Pupil Size							

## Drug Category Matrix

	<b>CNS Depressant</b>	<b>CNS Stimulant</b>	<b>Hallucinogen</b>	<b>Dissociative Anesthetic</b>	<b>Narcotic Analgesic</b>	<b>Inhalant</b>	<b>Cannabis</b>
HGN	Present	None	None	Present	None	Present	None
VGN	Present	None	None	Present	None	Present	None
LOC	Present	None	None	Present	None	Present	Present
Pupil Size	Normal*	Dilated	Dilated	Normal	Constricted	Normal**	Dilated***

**\*Soma, Quaaludes, and possibly some Antidepressants usually dilate pupils**

**\*\*Normal (average range) but may be dilated**

**\*\*\*Dilated, may be normal (average range)**

**ARIDE Drug Category Matrix**

	<b>Depressants</b>	<b>Stimulants</b>	<b>Hallucinogens</b>	<b>Dissociative Anesthetics</b>	<b>Narcotic Analgesics</b>	<b>Inhalants</b>	<b>Cannabis</b>
<b>HGN</b>							
<b>VGN</b>							
<b>LOC</b>							
<b>Pupil Size</b>							
<b>General Indicators</b>							

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Session 7 – The Effects of Drug Combinations



February 2018

# Session 7

## The Effects of Drug Combinations





## Learning Objectives

- Describe the prevalence of drug and alcohol use (individually and in combination) as well as polydrug use
- Define polydrug use
- Articulate possible effects of polydrug use related to the general indicators of alcohol and drugs

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Upon successful completion of this Session the participant will be able to:

- Describe the prevalence of drug and alcohol use (individually and in combination) as well as polydrug use
- Define polydrug use
- Articulate possible effects of polydrug use related to the general indicators of alcohol and drugs

### CONTENT SEGMENTS

- A. Prevalence of drug and alcohol use
- B. Define polydrug use
- C. Potential effects of polydrug
- D. Types of drug combinations
- E. Combinations including alcohol

### LEARNING ACTIVITIES

Instructor-Led Presentation

## Prevalence of Drug and Alcohol Use

In 2016, approximately 6.2 million people aged 12 years or older used psychotherapeutic drugs non-medically in the past year.



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### A. Prevalence of Drug and Alcohol Use

- In 2016, approximately 6.2 million people aged 12 years or older used psychotherapeutic drugs non-medically in the past year
- The exact number of prescription-drug users in the U.S. is unknown. However, it is estimated 52 million people have used prescription drugs non-medically in their lifetime
- Among those aged 50 to 59, the rate of past month illicit drug use continues to increase and is at approximately 3.7 million (2016)
  - This trend may partially reflect the aging into this age group of the “Baby Boomer” generation, whose lifetime rate of illicit drug use is higher than those of older cohorts
- In 2016, 11.8 million persons aged 12 or older reported driving under the influence of illicit drugs during the past year
  - This corresponds to 4.7 percent of the population aged 12 or older

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## Prevalence of Drug and Alcohol Use

- **Alcohol is the most popular "mixer" with other drugs**
- **Cannabis is another popular "mixer" and frequently shows up in combination with Cocaine, PCP, and various other drugs**
- **The "speedball", a combination of Cocaine and Heroin, remains popular**

7-5

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- Research has shown alcohol is the most popular "mixer" with other drugs
  - Cannabis is another popular "mixer" and frequently shows up in combination with Cocaine, Dissociative Anesthetics, and various other drugs
  - The "speedball", a combination of Cocaine and Heroin, remains popular

Law enforcement officers should not be surprised to encounter virtually any possible combination of drugs.

Law enforcement officers may find more polydrug users than single drug users. This means if the law enforcement officer is to do a good job at interpreting the results of observations, they must understand the basic mechanisms of drug interaction.

This session will help the participant understand the effects of polydrug use.

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## Polydrug/Polycategory

- **Polydrug: When a person ingests two or more different drugs**
- **Polycategory: When a person ingests drugs from two or more different drug categories**

### B. Define Polydrug Use

Polydrug Use: When a person ingests two or more different drugs.

Polycategory Use: When a person ingests drugs from two or more drug categories

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## Potential Effects of Polydrug Use

- Null Effect
- Overlapping Effect
- Additive Effect
- Antagonistic Effect

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### C. Potential Effects of Polydrug Use

Four types of combined effects can, and generally will, occur when two or more drugs are used together:

- Null Effect
- Overlapping Effect
- Additive Effect
- Antagonistic Effect

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## Null Effect

If neither drug affects some particular indicator of impairment, their combination also will not affect that behavior.

$$\text{Nothing} + \text{Nothing} = \text{Nothing}$$

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### D. Types of Drug Combinations

#### *Null Effect*

The simplest way to explain the null effect is using the phrase: “zero plus zero equals zero” or “nothing plus nothing equals nothing.”

When a subject consumes one drug which does not cause Horizontal Gaze Nystagmus (HGN) and they also ingest another drug which does not cause HGN, then the officer should not expect to see HGN.

Another example of the null effect is the pupil size of a suspect who was under the influence of Dissociative Anesthetic and a Central Nervous System (CNS) Depressant.

Dissociative Anesthetics do not affect pupil size and neither do CNS Depressants. The combination of these drugs should not affect the size of the pupils.

If neither drug affects some particular indicator of impairment, then their combination also will not affect that indicator.

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## Overlapping Effect

If one drug affects some particular indicator of impairment and another does not, their combination also will affect that behavior.

$$\text{Action} + \text{Nothing} = \text{Action}$$

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### *Overlapping Effect*

The overlapping effect comes into play when one drug does affect an indicator of impairment and the other drug has no effect on that indicator (action plus nothing equals action).

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## Overlapping Effect Examples

Narcotic Analgesics typically cause:

- HGN - None
- VGN – None
- LOC – None
- Pupil Size – Constricted

CNS Depressants typically cause:

- HGN - Present
- VGN – Possibly Present
- LOC – Present
- Pupil Size – Normal

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Examples:

Narcotic Analgesics typically cause:

- HGN - None
- Vertical Gaze Nystagmus (VGN) – None
- LOC – None
- Pupil Size – Constricted

CNS Depressants typically cause:

- HGN - Present
- VGN – Possibly Present

**VGN is present in high doses.**

- LOC – Present
  - Pupil Size – Normal
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Session 7 - Drug Combinations

## Likely Effects of the Combination

- HGN – Present
- VGN – Possibly Present
- LOC – Present
- Pupil Size – Constricted

Action + Nothing = Action

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The specific combination of a CNS Depressant and Narcotic Analgesic can present four different overlapping effects:

- HGN – Present
- VGN – Possibly Present
- LOC – Present
- Pupil Size – Constricted

Action plus nothing equals action.

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Session 7 - Drug Combinations

### Additive Effect

If both drugs affect some particular indicator of impairment, their combination also will affect that behavior.

Action + Action = Greater Action

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*Additive Effect*

The additive effect occurs when two drugs affect the same indicator in the same way.

In other words, the effects “add together” or reinforce each other to produce a greater effect than one of the drugs could produce individually (action plus action equals greater action).

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## Likely Effects of Combination Depressant and Inhalant

- Both cause HGN and VGN
- Expect to see more clues or more pronounced HGN and/or VGN than seen with an individual under the influence of either a depressant or an inhalant alone

$$\text{Action} + \text{Action} = \text{Greater Action}$$

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If an officer observes general indicators related to a Depressant and an Inhalant:

- Both cause HGN and VGN
- We might expect to see more clues or more pronounced HGN and/or VGN than we might see with an individual under the influence of either a Depressant or an Inhalant alone

The simplest way to explain the additive effect is to say "action plus action equals greater action."

One thing we can't say for certain is how much the two drugs will reinforce each other.

Sometimes the reinforced effect is as simple as "one plus one equals two," while other drug combinations may produce a combined effect which is greater than the individual combinations of the two drugs "one plus one equals five."

For the purpose of this course, we use the term additive effect to cover all situations where two drugs impact an indicator in the same way.

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## Additive Effect Examples

**Alcohol typically causes:**

- HGN – Present
- VGN – Possibly present
- LOC – Present
- Pupil Size – Normal

**CNS Depressants typically cause:**

- HGN – Present
- VGN – Possibly present
- LOC – Present
- Pupil Size – Normal

Alcohol typically causes:

- HGN – Present
- VGN – Possibly present
- LOC – Present
- Pupil Size – Normal

CNS Depressants typically cause:

- HGN – Present
- VGN – Possibly present
- LOC – Present
- Pupil Size – Normal

Session 7 - Drug Combinations

## Additive Effects Cause Exaggerated Indicators

Action + Action = Greater Action

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The additive effects may cause the indicators to be exaggerated.

Action + Action = Greater Action

**Pupils may be dilated. What you see with HGN usually will not be consistent with the blood alcohol concentration (BAC).**

**VGN usually will not be present unless it's a high dose for that individual. The combination may allow the VGN to be observed at a low BAC.**

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## Antagonistic Effect

When two drugs affect some indicator in exactly the opposite way, their combined effect will be unpredictable.



Effects will be dependent on which drug is more dominant in the system at any given time.

### *Antagonistic Effect*

An antagonistic effect occurs when two drugs affect an indicator in exactly the opposite ways.

For example:

- Stimulant use results in dilated pupils while Narcotic Analgesics cause the pupils to be constricted
- An officer may observe normal, constricted, or dilated pupils due to the antagonistic effect

When we deal with an antagonistic effect, we cannot always predict the outcome effect. The effects you will see will be dependent on which drug is more dominant in the system at any given time.

Example:

- If the Stimulant is the psychoactive drug in the system, the pupils may be dilated
- If the Narcotic Analgesic is more psychoactive drug, the pupils may be constricted
- If the drugs are acting on the system in an equal manner you may see normal pupils

“Action plus opposite action will be unpredictable”

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## Summary

The actual effects can depend on a number of factors including, but not limited to:

- Dose levels
- Time of ingestion
- An individual's metabolism

### Summary

The actual effects can depend on a number of factors including, but not limited to:

- Dose levels
- Time of ingestion
- A subject's metabolism

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## Drug Combination Examples



Cocaine and Cannabis



Cocaine and Heroin



PCP and Cannabis



Alcohol and Practically Anything Else

### E. Combinations Including Alcohol

In order to illustrate the possible effects of drug combinations, the following examples will show a cumulative drug symptomatology matrix for two different drug combinations.

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## Combination Dissociative Anesthetic and Narcotic Analgesic

Impairment Indicator	Effect due to Dissociative Anesthetic	Effect due to Narcotic Analgesic	Type of Combined Effect	What we will see
HGN	Present	None	Overlapping	Present
VGN	Present	None	Overlapping	Present
LOC	Present	None	Overlapping	Present
Pupil size	Present	Constricted	Overlapping	Constricted

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# Combination Cannabis and Stimulant

Impairment Indicator	Effect due to Cannabis	Effect due to Stimulant	Type of Combined Effect	What we will see
HGN	None	None	Null	None
VGN	None	None	Null	None
LOC	Present	None	Overlapping	Present
Pupil size	Dilated or Normal	Dilated	Overlapping	Dilated

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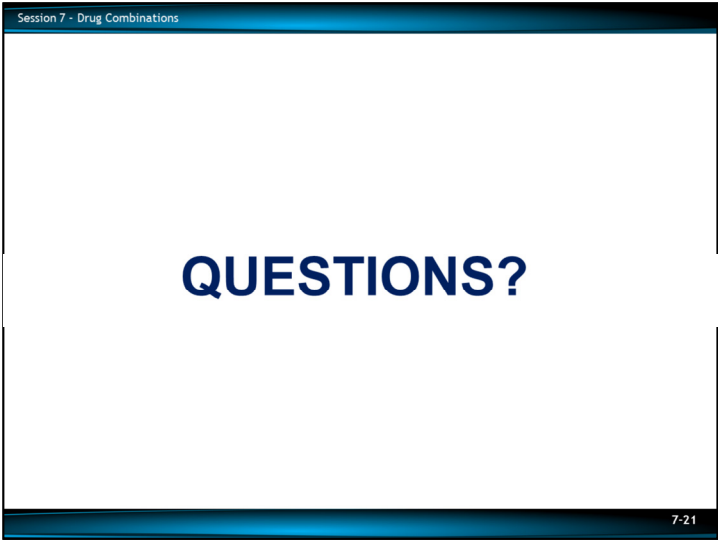
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Advanced  
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Session 8 – Pre and Post Arrest Procedures



February 2018

# Session 8

## Pre and Post Arrest Procedures



## Learning Objectives

- Describe the Three Phases of DWI Detection Process
- Describe effective roadside interview techniques
- List elements of *Driving While Under the Influence of Drugs (DUID) offense*
- Identify indicators of impairment during three phases of detection process

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Upon completion of this session, participants will be able to:

- Describe the three phases of the DWI detection process: Vehicle in Motion, Personal Contact, and Pre-Arrest Screening
- Describe effective roadside interview techniques
- List the elements of Driving While Under the Influence of Drugs (DUID) offense
- Identify the indicators of impairment observed during the three phases of the detection process

## Learning Objectives

- **Accurately document, in sequence, observed impairment in each of the three phases of the detection process**
- **Identify additional resources to support prosecution**
- **Articulate relevant evidence as it relates to case preparation and prosecution**

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- Accurately document, in the proper event sequence order, observed impairment in each of the three phases of the detection process
  - Identify additional resources to support prosecution
  - Articulate relevant evidence as it relates to case preparation and prosecution

### CONTENT SEGMENTS

- A. What is DWI Detection?
- B. Three phases of the detection process
- C. Effective roadside interview techniques
- D. Identifying and documenting observed indicators of impairment
- E. Case studies and scenarios
- F. Case preparation and prosecution

### LEARNING ACTIVITIES

Instructor-Led Presentation  
Student Practice Session  
Student Practical Exercise



## What do you need?

- **Active Observation**
- **Effective Documentation**
- **Articulation**
- **Courtroom Testimony**



Although this course is designed to make the participant aware of impairment of drugs, alcohol, or a combination of drugs and alcohol, the mission is also to reinforce skills which were taught in previous courses dealing with:

- Active Observation
- Effective Documentation
- Articulation
- Courtroom Testimony

To effectively gather and present the collective evidence as part of a DWI arrest and prosecution, the law enforcement officer, prosecutor, and other supporting professionals must consider information in terms of the totality of the evidence.

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Session 8 - Pre and Post Arrest Procedures

# DWI Detection

**Entire process of identifying and gathering evidence to determine whether or not a subject should be arrested for a DWI violation.**

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**A. What is DWI Detection?**

DWI detection will be defined as: “The entire process of identifying and gathering evidence to determine whether or not a subject should be arrested for a DWI violation.”

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### Three Phases

- Vehicle in Motion
- Personal Contact
- Pre-Arrest Screening



### B. Three Phases of the Detection Process

We will look at the collection and articulation of evidence in terms of the three phases of DWI detection.

- Vehicle in Motion
- Personal Contact
- Pre-Arrest Screening

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Session 8 - Pre and Post Arrest Procedures

## The Detection Process

**When does it begin?**

- What draws your attention to a vehicle?

**When does it end?**

- What do you base the arrest decision on?

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When does it begin?

- When the law enforcement officer's attention is first drawn to a vehicle

The detection process ends when the officer decides there is or is not sufficient probable cause to arrest the suspect for DWI.

The officer's attention may be drawn to a particular vehicle or individual for a variety of reasons.

The precipitating event may be a loud noise, an equipment or moving violation, unusual but not necessarily illegal behavior, or almost anything else.

Initial detection may or may not carry with it a suspicion the driver is impaired.

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Session 8 - Pre and Post Arrest Procedures

### 3 Possible Decisions

- **Yes – Do it Now**
- **Wait – Look for Additional Evidence**
- **No – Don't do it**



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The detection process:

- Yes - Do it now
- Wait - Look for additional evidence
- No - Don't do it

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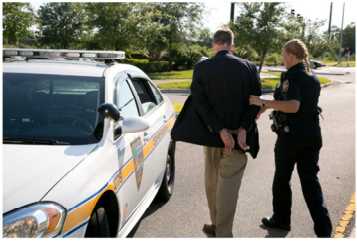
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Session 8 - Pre and Post Arrest Procedures

## The Detection Process

Ends with:

- An arrest
- Release decision



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The detection process ends with:

- An arrest
- Release decision

That decision should ideally be based on the totality of the evidence collected throughout each of the three phases.

However, situations and circumstances may vary in a manner that could preclude the completion of all three phases. Examples of these circumstances would be:

- Police pursuits
- Motorist assists
- Vehicle crashes
- Traffic direction
- Sobriety checkpoints

Law enforcement officers should not leap to the arrest/no arrest decision, but rather proceed carefully through each of the three phases when possible.

This process helps to identify all the available evidence needed to make an arrest decision.

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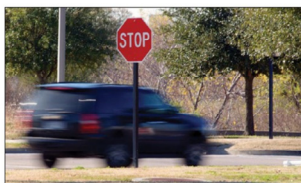
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## Phase One: Vehicle in Motion

- What do you observe?
- What do you do?
- When might Phase One not occur?



### *Phase One: Vehicle in Motion*

In Phase One, you usually observe the driver operating the vehicle.

- What do you observe?
- What do you do?

The DWI detection process does not always include all three phases. Sometimes DWI detection occurs when Phase One is absent, such as, cases in which you have no opportunity to observe the vehicle in motion.

Examples include:

- Crashes
- Sobriety checkpoint
- Motorist assistance

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Session 8 - Pre and Post Arrest Procedures

## Phase Two: Personal Contact

- **What do you observe?**
- **What do you do?**
- **When might Phase Two not occur?**



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*Phase Two: Personal Contact*

In Phase Two, after you have stopped the vehicle, there usually is an opportunity to observe and speak with the driver face-to-face.

- What do you observe?
- What do you do?

Sometimes there are situations when Phase Two does not occur.

Example:

- Crashes where a driver is transported to a hospital and significant time passes before contact is made by the investigating officer

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## Phase Three: Pre-Arrest Screening

- **Administer SFSTs**
- **Preliminary breath test**



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### *Phase Three: Pre-Arrest Screening*

In Phase Three, you usually have an opportunity to administer the SFSTs to the driver to evaluate whether there is any degree of impairment.

You may, depending upon your agency policies and State laws, administer a preliminary breath test in addition to SFSTs to verify alcohol is or is not the cause or a contributing factor of the impairment.

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## Each Detection Phase

- **Two major tasks**
- **Each task has one major decision**
- **Each decision has any one of three outcomes:**
  - ✓ **Yes – Do it Now**
  - ✓ **Wait – Look for Additional Evidence**
  - ✓ **No – Don't Do It**

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Each detection phase usually involves two major tasks and one major decision. Each of the major decisions can have any one of three different outcomes:

- Yes – Do it Now
- Wait – Look for Additional Evidence
- No – Don't Do It

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## Phase One - Task One

- **Observe the vehicle in motion**
- **Decision point: *Is there reasonable suspicion to stop the vehicle?***



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### Phase One:

- Task One – Observe the vehicle in motion
- Decision Point: Is there reasonable suspicion to stop the vehicle?

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Session 8 - Pre and Post Arrest Procedures

## Phase One - Task Two

- Continue to observe the vehicle and the stopping sequence

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**Phase One:**

- Task Two – Continue to observe the vehicle and the stopping sequence

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Session 8 - Pre and Post Arrest Procedures

## Phase Two - Task One

- **Observe and interview the driver face-to-face**
- **Decision point: *Should you instruct the driver to step from the vehicle for further investigation?***

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8-17

**Phase Two:**

- Task One – Observe and interview the driver face-to-face
- **Officer should follow their departmental policy governing traffic stops and investigations.**
- Decision Point: Should you instruct the driver to step from the vehicle for further investigation?

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## Phase Two - Task Two

- **Observe the driver's exit and walk from the vehicle**

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**Phase Two:**

- Task Two – Observe the driver's exit and walk from the vehicle

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Session 8 - Pre and Post Arrest Procedures

## Phase Three – Task One

- **Administer psychophysical tests**
- **Decision point: *Is there sufficient probable cause to arrest the driver for DWI?***

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**Phase Three:**

Task One – Administer psychophysical tests

Decision Point: Is there sufficient probable cause to arrest the driver for DWI?

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## Phase Three – Task Two

- **Arrange for or administer a preliminary breath test**

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### Phase Three:

Task Two - Arrange for or administer a preliminary breath test

- Do the results indicate an alcohol-DWI or a drug-DWI?
  - SFST (Horizontal Gaze Nystagmus (HGN), VGN, Walk and Turn (WAT), One Leg Stand (OLS))
  - Other Tests/Observations (MRB, LOC, Pupil size)

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Session 8 - Pre and Post Arrest Procedures

## When Might Phase Three NOT Occur?



Advanced Roadside Impaired Driving Enforcement 8-21

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Sometimes there are situations when Phase Three does not occur.

- There are cases in which you would not or could not administer SFSTs to the driver

**This decision is made by the officer.**

Examples include:

- Driver is impaired to the point they are unable to safely complete the tests
- Injured to the extent they are unable to complete the tests
- Refuses to submit to tests
- Circumstances or other conditions that do not allow for the safe administration of SFSTs

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Session 8 - Pre and Post Arrest Procedures

## Effective Roadside Interview Techniques

- This evidence is critical to successful prosecution of the DWI case
- Necessary to gather valuable information during detection
- Learn and practice effective roadside interview techniques

Advanced Roadside Impaired Driving Enforcement 8-22

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**C. Effective Roadside Interview Techniques**

This evidence is critical to successful prosecution of the DWI case.

In order for the law enforcement officer to gather valuable information during the detection process, they must learn and practice effective roadside interview techniques.

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Session 8 - Pre and Post Arrest Procedures

## What You Say

- **Word choice**
- **Communication style**
- **Tailor questioning speed and tone to the situation and circumstances**



Advanced Roadside Impaired Driving Enforcement 8-23

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*What you say : Word choice, communication style*

- Example: crash or accident

**You should tailor your word choices to the situation or circumstances that exist at the time.**

*Communication style*

- Example: The rate of the questioning, tone of your voice

**You should tailor the speed and tone of questioning to the situation and circumstances at the time.**

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Session 8 - Pre and Post Arrest Procedures

## What You Do

- **Physical positioning, demeanor**
- **Goal: encourage cooperation**
- **Facilitate open dialog**
- **Develop a good rapport with the subject**

Advanced Roadside Impaired Driving Enforcement 8-24

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*What you do:* Physical positioning, demeanor

- Physical Positioning example: Keeping officer safety in mind, avoid an over bearing posture or stance
- Demeanor example: maintain professionalism, facilitate open dialog

**Ask questions that will place them at ease. Allow them to talk about themselves. Develop a good rapport with the subject.**

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### What You See, Smell, Hear



*What you see* : Bloodshot eyes, clothing, paraphernalia, etc.

*What you smell*: Alcoholic beverage, chemical odors, marijuana, etc.

*What you hear* : Slurred speech, unusual and/or inappropriate statements, drug lingo, etc.

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Session 8 - Pre and Post Arrest Procedures

## Identifying and Documenting

- **Case Preparation Begins with Observation of the vehicle:**
- **Document in order of the 3 Phases**
- **Document environmental and other conditions**

8-26

Advanced Roadside Impaired Driving Enforcement

**D. Identifying and Documenting Observed Indicators of Impairment**

During the detection process, many different situations arise which can affect the identification and documentation of your observations.

It is the law enforcement officer’s responsibility to conduct a thorough and complete investigation.

Since case preparation begins with the observation of the vehicle, absent extraordinary conditions, short cuts in the three phases of detection process should not occur.

Officers should follow up on all observations that indicate impairment to determine whether impairment is present and if that impairment is due to alcohol, drugs, or a combination of both.

During Phase Two of the detection process, a driver may offer a reason for their behavior or physical appearance.

Examples:

- The reason they were weaving was because they were adjusting the radio
- The reason their eyes are glassy is because they worked a double shift

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## Explain your findings...

### Based on your training and experience:

- Is impairment present?
- What is causing the signs you have observed?
- Is more information needed to make a determination?

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At this point you should draw on your training and experience to determine:

- If impairment is present
- What is causing the signs you have observed
- Is more information needed to make a determination

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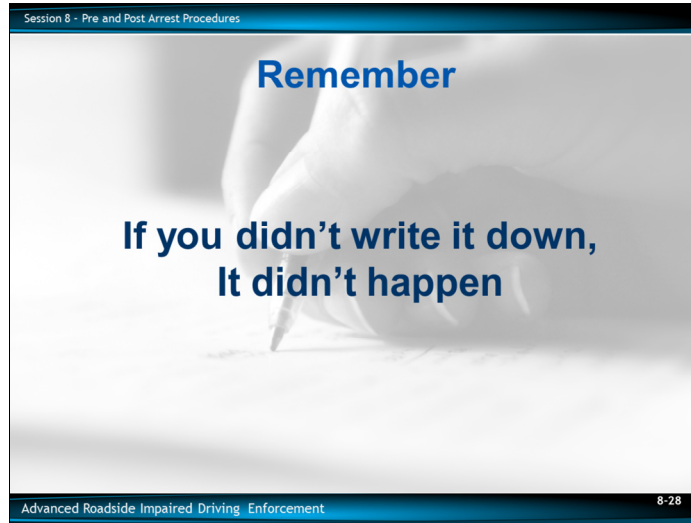
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**Remember: If you don't record the evidence, it didn't happen.**

This determination, similar to the decision to arrest, is rarely based on one observation or factor. Rather these decisions are usually based on the totality of the circumstances.

The signs, symptoms, and general indicators discussed during this course are meant to assist law enforcement officers in recognizing impairment based on alcohol, drugs, or a combination of both.

Additionally, it is intended to assist criminal justice professionals with understanding impairment based on alcohol, drugs, or a combination of both.

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Session 8 - Pre and Post Arrest Procedures

**If you didn't write it down . . .  
It didn't happen**

- Use drug matrix as a field reference
- Organize observations during traffic stop
- Articulate circumstances and environment in which stop was conducted
- Descriptive information will *paint a picture* for prosecutor and court

Advanced Roadside Impaired Driving Enforcement 8-29

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The information presented as part of this course is not intended nor meant to equip the officer with the knowledge or ability to categorize the impairment observed with a specific drug category.

In an effort to help the participant learn what types of observations may be important as part of the detection process, we have included a matrix which lists many common indicators of impairment.

It is suggested officers use this matrix or another documentation tool as a field reference.

The matrix will help the officer to organize their observations during the traffic stop.

In addition to documenting the indicators, the officer should take care to articulate the circumstances and environment in which the stop was conducted. This descriptive information will *paint a picture* for the prosecutor and the court, thereby presenting the evidence in an effective fashion.

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## Exercise: Document Observations

For each of the scenarios/case studies:

- Describe process of assessing impaired driver
- Evaluate scenario/case study information
- Articulate observations related to general indicators of impairment and basis for that interpretation

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### E. Case Studies and Scenarios

Practical Exercise: During this exercise, apply the information learned during this course in order to effectively document observations offered in the written scenarios and case studies.

Complete the following for each of the scenarios/case studies provided in the class:

- Describe the process of assessing the impaired driver in the context of the traffic safety related scenario/case study
- Evaluate scenario/case study information: How to analyze information/observations and articulate important evidence related to drug impairment

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Session 8 - Pre and Post Arrest Procedures

## Case Preparation

- Know your Legal Requirements
- Develop Case File
- Don't skip steps
- Know your limitations
- Ask for help

Advanced Roadside Impaired Driving Enforcement 8-31

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### **F. Case Preparation and Prosecution**

Case preparation begins with the first observations of the vehicle during Phase One of the detection process.

Although State DWI/DUID statutes are different and the legal requirements necessary to prove each element of the offense differs from State to State, the detection process remains the same. Therefore, regardless of what the statute requires, it is important law enforcement officers understand both the elements of the State statutes and what evidence the prosecution needs to prove each element.

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Session 8 - Pre and Post Arrest Procedures

## During the Detection Process

- **Keep in mind your State legal requirements**
- **Organize and document observations in terms of the three detection phases**
- **Successful prosecution for impaired driving begins with building a DWI Prosecution Team**

Advanced Roadside Impaired Driving Enforcement 8-32

During the detection process, it is critical officers keep in mind the legal requirements of their State. It is equally important the officer organize and document their observations in terms of the three detection phases. By doing this, you will assist the prosecutor in case preparation and presentation in court.

A successful prosecution for impaired driving begins with building a DWI Prosecution Team.

**The most important part of this process is to remember that it does not matter who leads the effort.**

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## Prosecution Team

- **More comprehensive case preparation**
- **More effective prosecution**
- **Foundation for a strong team – relationship between law enforcement officer(s) involved with arrest and prosecuting attorney(s) associated with case**

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The most significant benefit of the team is more comprehensive case preparation and a more effective prosecution.

- What does that mean – DWI Prosecution Team?
- Who is on that team?
- Why isn't the officer's word and observations enough?
- Doesn't this mean more work?
- How does this help me do my job?

The foundation for a strong DWI Prosecution team is the relationship between the law enforcement officer(s) involved with the arrest and the prosecuting attorney(s) associated with the case.

Effective communication and a clear understanding of each group's objectives and expectations is essential to the success of the DWI prosecution team.

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Session 8 - Pre and Post Arrest Procedures

## Prosecution Team

- Toxicologists
- Breath testing professionals
- DREs and other expert witnesses
- Provide specific details that help build case and support law enforcement officer’s testimony

Advanced Roadside Impaired Driving Enforcement 8-34

Additionally, toxicologists, breath testing professionals, DREs, and other expert witnesses provide specific details that help build the case as well as support the law enforcement officer’s testimony during the trial.

We often forget about the other potential members of the team who are not directly part of the case preparation.

This section will use the word “process” to describe the sequence of activities and actions which take place during a DWI traffic stop, arrest, and prosecution. This word is not used by accident. It is important for the participants in this course to begin to view DWI enforcement and prosecution as a process which can be continually improved and refined.

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Session 8 - Pre and Post Arrest Procedures

## Common Elements

- **Concentrate on common elements and work to optimize how we handle them**
- **Work together to utilize this team in order to follow a similar protocol with each case**
- ***Consistency Yields Reliability***

Advanced Roadside Impaired Driving Enforcement 8-35

It is rational to believe that every DWI traffic stop, arrest, and prosecution are different, but it is also reasonable to assume there are common elements each time an officer encounters an impaired driver and a prosecutor prepares a DWI case.

If we can concentrate on common elements and work to optimize how we handle them, then we can be better prepared for court and common defense strategies and challenges.

We must work together to utilize this team in order to follow a similar protocol with each case.

Remember, **Consistency Yields Reliability.**

Throughout this course, we have discussed information in terms of the three phases of DWI detection process.

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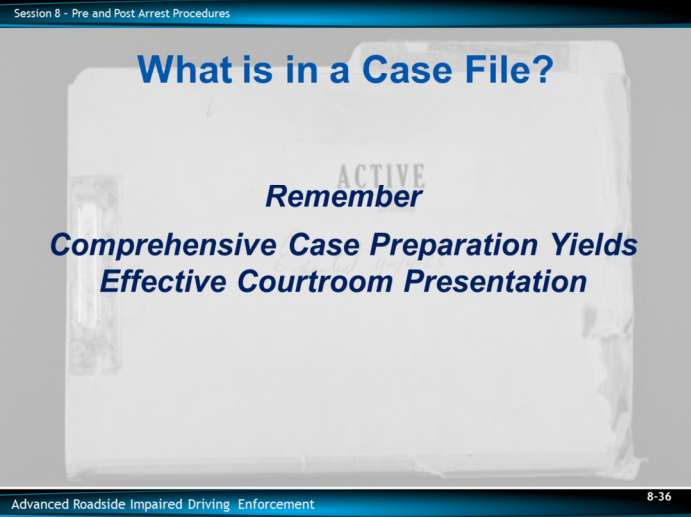
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**What is a Case File?**

- All Observations
- All Evidence
- Potential Witness List
- Chemical Test Results
- Photos, Diagrams, Scene Sketch
- Other

**Remember: Comprehensive Case Preparation Yields Effective Courtroom Presentation**

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## Phase One: Who Can Help?

- Law enforcement officer who observed driving and/or made traffic stop
- Other law enforcement officers who may have made observations or were called in to assist
- Lay witnesses, including other people in the vehicle or other motorists

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### Phase One: Vehicle in Motion

(Observation of the suspect's driving)

Preparation for trial begins with the first observation of the vehicle in motion, which is usually the first point of attack.

In some cases, the reasonable suspicion for the traffic stop may not be associated with driving behavior consistent with the impairment, for example an equipment violation. Therefore, all observations during the vehicle in motion phase should be noted in order to illustrate the environment to the court later.

Potential team members involved at this point may include:

- Law enforcement officer who observed the driving and/or made the traffic stop
- Other law enforcement officers who may have made observations or were called in to assist
- Lay witnesses, including other people in the vehicle or other motorists

Law enforcement officers should note every observation made regarding driving. This includes observations before and after you activate your emergency equipment.

If there is a crash involved, the officer probably will not actually observe driving. Therefore, witnesses to the crash should be noted to prove State-specific statutory requirements.

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Session 8 - Pre and Post Arrest Procedures

## Phase Two: Document Observations

- **Note every observation made regarding personal contact**
- **Include observations before and after subject exits vehicle**
- **Documenting can reinforce reasonable suspicion for the stop**

Advanced Roadside Impaired Driving Enforcement 8-38

**Phase Two: Personal Contact**

(Observations of the suspect after the stop)

Preparation for trial continues with the traffic stop. Observations made before and after the suspect exits the vehicle should be documented. Example:

- Odor of alcohol
- Slurred speech
- Red glassy eyes
- Inappropriate responses
- Using the vehicle for support during exit and/or while walking
- Accurate documentation is essential due to the length of time cases are adjudicated

Potential team members involved at this point may include:

- Law enforcement officer(s) who observed the subjects following the traffic stop
- Other law enforcement officers who may have made observations or were called in to assist
- Lay witnesses, including other people in the vehicle or other motorist

Law enforcement officers should note every observation made regarding personal contact. This includes your observations before and after the subject exits the vehicle.

Documenting and articulating these observations can reinforce the reasonable suspicion for the stop.

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Session 8 - Pre and Post Arrest Procedures

## Phase Three: Thoroughly Document

- **HGN, WAT, OLS and other sobriety tests, including associated clues**
- **Potential team members:**
  - Law enforcement officer(s)
  - Lay witnesses

Advanced Roadside Impaired Driving Enforcement 8-39

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### Phase Three: Pre-Arrest Screening

(Observations of the suspect while performing all sobriety tests)

Preparation for trial continues with the officer conducting pre-arrest screening. Observations made during HGN, WAT, OLS and other sobriety tests, including the associated clues, must be thoroughly documented. Example: During the WAT Test, the suspect may not count their steps out loud while walking. This is considered an observation. The suspect may start walking before being instructed to do so. This is considered a clue.

Potential team members involved at this point may include:

- Law enforcement officer(s) who conducts the field sobriety tests
- Lay witnesses including other people in the vehicle or at the scene

Law enforcement officers should note every observation made regarding pre-arrest screening.

This includes observations before, during and after the field sobriety tests. Recording and articulating these observations can reinforce the reasonable suspicion for the arrest.

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Session 8 - Pre and Post Arrest Procedures

## Post Arrest Screening Potential Team Members

- **Breath testing operators/technical supervisors**
- **DREs**
- **Medical personnel**
- **Jail personnel**

Advanced Roadside Impaired Driving Enforcement 8-40

*Post Arrest Screening*

During post arrest screening the team will potentially include:

- Breath testing operators/technical supervisors
- DREs
- Medical personnel
- Jail personnel

DREs should be utilized whenever available. The officer should document what DRE was contacted, when they were contacted, and when they arrived for the evaluation.

If a DRE is not available at the time of arrest, they may still be useful at trial to bridge the gap between the observations made by the arresting officer and any biological test results.

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## Pre-Trial Preparation Who Can Help?

- **Local Prosecutor**
- **Toxicologist**
- **DRE/DRE State Coordinator**
- **TSRP**
- **IACP DEC Program Coordinator**
- **NHTSA/NAPC Prosecutor Fellow**
- **NTLC**

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### *Pre-Trial Preparation*

For this reason, it remains essential to document, in detail, all observations including those made after arrest.

As preparation for trial begins the team may include:

- **Local prosecutor:** When possible, at a minimum, the local prosecutor and the arresting officers should meet to discuss the details of the case and determine potential prosecution strategies
  - **Toxicologist or representative from the appropriate state or contract lab:** The toxicologist in a Drug Evaluation and Classification (DEC) State can be used to corroborate the testimony of the DRE and to bridge the gap between the observations of the arresting officer and the lab report
  - **DRE Officer/DRE State Coordinator:** The DRE/DRE State Coordinator may be able to assist in identifying additional DRE resources
  - **Traffic Safety Resource Prosecutor (TSRP) (If available):** If your state has a TSRP they can be utilized as a resource to assist both prosecutors and law enforcement
  - **International Association of Chiefs of Police (IACP) DEC Program Coordinator**
  - **National Highway Traffic Safety Administration (NHTSA)/National Association of Prosecutor Coordinators (NAPC) Prosecutor Fellow**
  - **National Traffic Law Center (NTLC)**
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## Pre-Trial

- Review your case file
- Meet with prosecutor
- Anticipate defense
- Develop visual aids
- Other



As preparation for trial begins, remember to:

- Review your case file
- Meet with the prosecutor
- Anticipate the defense
- Develop visual aids
- Other

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Session 8 - Pre and Post Arrest Procedures

## Visual Aids



Advanced Roadside Impaired Driving Enforcement 8-43

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**Visual Aids:**

- Pictures or video
- Location of stop
- Appearance of defendant
- Performance on SFST
- Charts or diagrams
- Officer's training and experience
- Factual concepts
- Elements

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At trial, it is imperative the prosecutor, arresting officer, DRE (if applicable), toxicologist and any other witness avoid using legal, law enforcement, or medical-specific language. The use of plain English assists the judge, jury, and others who are involved in the case to understand the specifics of all testimony.

The team must work together to illustrate the entire process. Visual aids should be used to illustrate the location of the stop, physical appearance of defendant, and/or performance on the field sobriety tests.

Visual aids may also assist in explaining the officers training and experience, factual concepts, and/or the legal elements of the offense.

Remember, visual aids engage the judge/jury and increase retention of information.

From the time of the traffic stop, through post arrest screening, and until after the case is adjudicated the team must remain consistent.

The prosecutor may be added to the team at any time. Ideally, the prosecutor would be on board immediately, especially in the case of serious injury or fatal crashes.

Other items to remember for direct examination:

- Listen Carefully to Question
  - Think Before You Answer
  - Ask for Clarity if Needed
  - Relate Training and Experience
  - Talk to Your Audience
- 
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## Cross Examination

- **Be Professional**
- **Answer only Question Asked**
- **If You Don't Know Answer Just Say So**
  - I do not know
  - I do not recall
  - I cannot answer that question without explanation

### Cross Examination

- Be professional
- Answer only question asked
- If you don't know the answer, just say so:
  - I do not know
  - I do not recall
  - I cannot answer that question without explanation

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**Remember: There is no substitute for preparation.**

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Session 8 - Pre and Post Arrest Procedures

**QUESTIONS?**

Advanced Roadside Impaired Driving Enforcement 8-47

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**Scenario #1**

Ambience: night, dark and clear, 60 degrees

You respond to a crash scene where you contact a subject who tells you that he fell asleep while driving. Your investigation shows that the driver was not injured but was speeding and failed to negotiate a curve. When you ask the subject his name he tells you but then he continues telling you that his name is wrong on his enrollment papers at the local gym because he is adopted. He continues by telling you that he has never met his birth parents but was going to use their name for a while but has since changed his mind so the name on his driver’s license is correct but the address isn’t. He further advises that he is in the process of moving because he doesn’t like the neighbors and that they are always watching him. He tells you that he doesn’t know where he will move to, but probably in with his parents.

You notice that the subject seems to be fidgeting, restless and can’t stand still. His speech is clear, but quick and off topic. His pupils look big. You ask the subject to do SFSTs and he agrees. There were no clues detected for HGN or VGN and LOC was not present. When completing the WAT test, his movements were stiff and his steps are very quick and punctuated by slamming the heel of the front foot into the toe of the back foot. Two clues were observed; starts too soon and an improper turn. On the OLS test, he counted to 1042 in 30 seconds, displayed leg and body tremors, and put his foot down twice while attempting to balance. The subject had difficulty performing the MRB Test. He estimated 30 seconds in 22 seconds, and swayed quickly side to side.

The subject denies any drug use at first but later tells you he did take something for his sore throat the day before. You notice again that he can’t stand still and ask why. He tells you that he is afraid of the police because he watches Cops on TV and that Chicago PD used to be his favorite show. He further advises that he watches Breaking Bad reruns now because that’s a better show but he can’t watch it now because he is moving and had his cable turned off. He also tells you he is moving because his neighbors watch him all the time and one of them may have been following him when he wrecked.

Arrest for DUI-Drugs Yes / No

BAC 0.00

Request the assistance of a DRE after arrest Yes / No

Specific evidence you would describe to the DRE \_\_\_\_\_

\_\_\_\_\_

**Scenario #2**

Ambience: night, dark with street lights, 60 degrees with light rain

You stop a young lady for failing to obey a traffic control device at 0115 hours. When you contact her you see that her pupils look big. She responds to your questions, but slowly. You determine that she lives in the area, and you ask her if she knows that she failed to stop at the red light. She tells you no, she didn't see it, and looks at you with a glare. She is wearing shorts and a tank top and you notice that she has goose bumps on her arms. As you talk to her, she asks you repeatedly to turn off your patrol vehicle overhead lights. Every time she hears radio traffic from your portable radio, she looks at you glaringly and complains about your flashing lights. She then tells you that she can't stay in the car and she gets out.

You ask her why she can't stay in the car and she tells you it's because there are things crawling around in the car. You observe nothing in the car. You ask her to do SFSTs and she agrees. No HGN, VGN or a LOC is observed. You do observe three clues on the WAT test; starts too soon, incorrect number of steps and uses arms for balance. On the OLS test, she tells you that there are things crawling around on the ground and doesn't want to do the test. The subject did complete the MRB test, but swayed badly side to side and front to back. She estimated 30 seconds in 15 seconds.

She continues to complain about the lights from your patrol vehicle, which are not on, and continues to describe things crawling around in her car. She advises that she is not under a care of a doctor and not taking any medication. However, she does admit being at a concert earlier in the evening and may have taken something a friend gave her to help her enjoy the music better.

Arrest for DUI-Drugs Yes / No

BAC 0.00

Request the assistance of a DRE after arrest Yes / No

Specific evidence you would describe to the DRE \_\_\_\_\_

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### Scenario #3

Ambience: afternoon light; 75 degrees and overcast

You observe a vehicle speeding and while you are behind it, you notice that it is traveling straight, but on the center divider line. You contact the driver and find him wearing a light jacket over a sweat shirt even though it is a warm afternoon. During the contact the subject answers your questions, but appears to be acting very tired. When you inquire about his demeanor, the subject advises that he works nights and didn't get much sleep the day before. He denies taking any medication or drugs.

As you talk with the subject you notice that he has small smears of blood on his hands and small blood stains on his pants. You ask about them and he tells you that he scratched the top off a scab and it bled. You also notice that his voice is soft, low and raspy. You note that the subject is continuously licking his lips and has a dry mouth.

You notice that the subject's pupils are very small. You ask him to do SFSTs and he agrees, but wants to know why. You tell him that you want to make sure he is okay to drive since he is claiming to be tired. Upon completion of the SFSTs you have observed no clues of HGN and the subject did not have a LOC. You did observe two clues on the WAT; stops while walking and incorrect number of steps. The subject's movements are very slow and deliberate. Two clues were observed during the OLS test; uses arms to balance and puts foot down. You also note that he counted to 21 at the end of 30 seconds. On the MRB test, the subject was swaying front to back, and estimated the passage of 30 seconds in 42 seconds.

Arrest for DUI-Drugs Yes / No

BAC 0.00

Request the assistance of a DRE after arrest Yes / No

Specific evidence you would describe to the DRE \_\_\_\_\_

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**Scenario #4**

Ambience: afternoon light, 80 degrees, bright and sunny

You observe a van with a defective brake light and a roll of carpet in the back sticking out that is not properly secured. While you are behind the vehicle you notice some lane weaving and you initiate a traffic stop. After activating your emergency lights you notice that the driver is slow to pull over.

You contact the driver of the vehicle and confirm that he is a carpet installer and has just completed one job and is on his way to the next. He is wearing jeans and a work shirt with carpet adhesive spots on it. You can smell a chemical odor coming from the van as you stand at the window. When you ask him about the smell he tells you it is the adhesive. You ask the driver why it took him so long to stop. He tells you he didn't see you, and that he doesn't normally drive this van, and that the mirrors aren't adjusted properly.

When you ask the subject for his license, registration and proof of insurance he gives you his license, but forgets the other documents. You remind him and he starts to look again, but forgets what he is doing when you ask him where he is going. He pauses and then gives you the full address. You notice that his speech is slurred and hard to understand at times.

You ask the driver to do SFSTs and he agrees. After he gets out of the vehicle you see that he has a significant amount of adhesive on his clothes and hands. You ask him about it and he says he spilled the can at this last job. He tells you that he used an industrial cleaner to clean it up and the cleaner gave him a headache.

During the SFSTs, you observed six clues of HGN. You observed eight clues for the WAT, and four clues for the OLS. Several times he nearly fell and used the side of his van to steady himself during the OLS test. On the MRB test the subject swayed side to side and front to back by approximately 2 inches. He also estimated 30 seconds in 38 seconds. You also noted that the subject had a LOC.

Arrest for DUI-Drugs Yes / No

BAC 0.00

Request the assistance of a DRE after arrest Yes / No

Specific evidence you would describe to the DRE \_\_\_\_\_

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## Scenario #5

Ambience: early morning, daylight; 45 degrees with a light mist, almost fog

You are dispatched to a one vehicle crash where the driver ran off the roadway and into a ditch on a relatively straight, heavily traveled, but well maintained road. As you arrive you are advised that the driver of the vehicle is in the middle of the road trying to hit cars with a board and appears very agitated.

When you arrive you find the alleged female driver standing in the middle of the road wearing only a t-shirt and underpants. She appears agitated and is sweating profusely. She is bleeding slightly from the forehead, but other than that, appears to be uninjured.

You make contact with her and she does not respond to your verbal commands and pays very little attention to you. You see that the palms of both her hands are bloody from the board she is carrying, but she doesn't seem to notice the bleeding. You finally get her attention and ask her name, what she is doing, and what happened. She stares at you, but does not respond to your questions. You tell her to put the board down and she continues to stare at you. You ask her where her clothes are and she tells you that she is hot and didn't need them.

After taking the board away from her, she tells you her name and eventually tells you that she is mad at the cars because no one will stop to help her. After you determine that she is the driver of the vehicle, you ask her to do SFSTs. However, she just looks at you and makes no response. You finally get her to do the HGN test and you observe all six clues plus VGN. You also observe LOC. She agrees to do the WAT test where you observed all eight clues. You notice that her movements are very slow and rigid-like. You observe three clues on the OLS test, and again her movements are slow and rigid-like. On the MRB test the subject did not close her eyes and was very stiff and rigid. She estimated 30 seconds in 48 seconds. Her responses to your questions were delayed, and she had to concentrate very hard to complete them.

EMS advises you that they are going to transport the subject to the hospital. She becomes obviously annoyed, starts yelling, and is visibly upset, and transported to the local hospital.

Arrest for DUI-Drugs Yes / No

BAC 0.00

Request the assistance of a DRE after arrest Yes / No

Specific evidence you would describe to the DRE \_\_\_\_\_

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## Scenario #6

Ambience: late evening, dark; 40 degrees and raining

You stop a vehicle for failing to maintain a single lane of travel. You contact the driver and find that there are several people in the car, and the driver is talking on a cell phone. You have to instruct her to end her call when you make your contact with her. You ask the driver for her license and registration and she provides them, but she asks you twice what you have asked for. You can see her pupils are large and her eyes appear to be red and bloodshot. She doesn't seem to be overly concerned about being stopped, and does not give you her full attention. She is easily distracted by her passengers who are laughing, making various comments, and asking you irrelevant questions.

You ask the subject to exit the vehicle and ask her additional questions. She responds appropriately, but laughs several times, and several looks back at the car between each question. At one point she turns away from you and waves to the passengers in the vehicle and makes faces at them.

She denies any alcohol or drug use. You ask her to perform SFSTs and she agrees and tells you that she hasn't been drinking. During the SFSTs you observe no clues of HGN or VGN. However, you do observe a LOC. You also notice that her pupils still appear to be large and bloodshot. During the WAT test the subject displays four clues; uses arms for balance, misses heel-to-toe, stops while walking, and she made an improper turn. Several times she stopped and asked questions about the test and asked what she was supposed to do. During the OLS test, she swayed while she balanced and you observed that her pant legs and her shirt were trembling indicating body tremors. During the tests she laughed out loud numerous times. After completing them, she asked if her passengers could do the same tests. On the MRB test she had a side to side and front to back sway of about 3 inches. She estimated the passage of 30 seconds in 38 seconds and had noticeable eyelid tremors. During the tests you observed a marijuana-like odor coming from her clothing.

Arrest for DUI-Drugs  Yes / No

BAC 0.00

Request the assistance of a DRE after arrest  Yes / No

Specific evidence you would describe to the DRE \_\_\_\_\_

**Scenario #7**

Ambience: morning light; 65 degrees and overcast

You are working speed enforcement in a school zone when you stop a vehicle for traveling 50 mph in a 25 mph zone. You contact the driver and she tells you that she is taking her children to school and is running late. You notice that her speech is slurred, and her pupils appear to be very small. She has a great deal of difficulty finding her license. As she goes through her purse you see a plastic container with several pills in it. You ask her if she is taking any medication and she tells you that they are vitamins, and some pills that her doctor gave her for pain.

You ask her more questions about the pills. She tells you that she lifted a box, and hurt her back a few days ago. When questioned further, she states that she took a pill for pain last night before going to bed so she could sleep, and took another one that morning. She tells you that she is just following the advice of her doctor.

You notice that her actions are slow and deliberate and that her speech is thick and slurred at times. You ask her to perform SFSTs and she agrees. Upon completion of the HGN test, you observed six clues of nystagmus. You also noticed that her pupils appeared very small and also observed a LOC. During the WAT test you observed four clues, and then she terminated the test telling you it was hurting her back. After making a brief attempt to perform the OLS test, she immediately dropped her foot and refused to continue the test claiming it bothered her back. She was able to do the MRB test. As she performed the test she swayed noticeably side to side, and she estimated the passage of 30 seconds in 44 seconds.

You asked if she was using any other medications. She advised that she occasionally takes a pill to help her sleep, and may have taken one the night before.

Arrest for DUI-Drugs Yes / No

BAC 0.00

Request the assistance of a DRE after arrest Yes / No

Specific evidence you would describe to the DRE \_\_\_\_\_

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**Scenario #8**

Ambience: night, dark; 75 degrees

You observe a vehicle fail to maintain a single lane of travel, make an improper lane change, and fail to yield to oncoming traffic when crossing through an intersection. You also observe that the vehicle’s speed is inconsistent, and the vehicle is speeding up and slowing down for no apparent reason. After activating your emergency lights to stop the vehicle, the driver is slow to respond. The driver finally activates his turn signal when pulling to the shoulder of the roadway. When doing so, you notice that the vehicle’s windshield wipers come on, and its headlights change from low beam to high beam.

You contact the driver and see that his eyes are bloodshot and watery, and his speech is slurred. He has difficulty finding his license and you finally have to point it out to him. When he hands his license to you he tells you that he is looking for a bathroom and somewhere to eat, and tells you that he is hungry.

He tells you he is from out of town and just left a friend’s house, and is “a little lost.” He then starts laughing. He forgets to provide you with the vehicle registration and when reminded, he gives you an envelope containing the warranty for his car tires. After several attempts, he produces the requested document. You note a local address on both documents.

You ask him to perform SFSTs and he agrees, but he accuses you of harassing him because he is from out of town. You notice that he has difficulty getting out of the car. During the HGN test, you observe a Lack of Smooth Pursuit in both eyes and Distinct and Sustained Nystagmus at Maximum Deviation. No other HGN clues or VGN are observed. You also observe a LOC and that his pupils appear to be large in size. You observe three clues during the WAT test; cannot keep balance, does not touch heel-to-toe, and an improper turn. You also notice that the subject has difficulty following your instructions. During the OLS test, the subject sways badly, puts his foot down several times, and you stop the test because he is in danger of falling. During the MRB test the subject swayed noticeably from side to side, had eyelid tremors, and estimated the passage of 30 seconds in 36 seconds. You administer a preliminary breath test and the reading is 0.06.

Arrest for DUI-Drugs Yes / No

BAC 0.00

Request the assistance of a DRE after arrest Yes / No

Specific evidence you would describe to the DRE \_\_\_\_\_  
\_\_\_\_\_

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Advanced  
Roadside  
Impaired Driving  
Enforcement

Session 9 – Written Examination and  
Program Conclusion



February 2018

# Session 9

## Written Examination and Program Conclusion



## Learning Objectives

- **Complete written examination with passing grade**
- **Provide comments and suggestions for improving course**

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Upon successfully completing this session the participant will be able to:

- Complete a written examination with a passing grade
- Provide comments and suggestions for improving the course

### CONTENT SEGMENTS

- A. Post Test
- B. Critique
- C. Review of Post Test
- D. Concluding Remarks
- E. Certificates and Dismissal

### LEARNING ACTIVITIES

- Written Participant Examination
- Written Participant Critique
- Instructor-Led Presentation

Session 9 - Written Examination and Program Conclusion

# Post Test

- “Closed book”
- Passing score is 80%

Advanced Roadside Impaired Driving Enforcement 8-4

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**A. Post Test**

Purpose of the Post Test: to compare with pretest and determine extent of knowledge gained by participants.

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### ARIDE Course Critique

For items 1-6, please select your level of agreement with the following statements. Include any additional information in the space provided.

Item	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. I was prepared for the SFST proficiency requirements associated with this course.  Comments: _____ _____	○	○	○	○	○
2. The specific information provided in the seven drug categories (signs and symptoms) was sufficient to effectively understand how different drugs may affect individuals especially while driving.  Comments: _____ _____	○	○	○	○	○
3. Based on the classroom content, I feel confident to conduct an effective roadside assessment of a suspected impaired driver.  Comments: _____ _____	○	○	○	○	○
4. Based on the classroom content, I feel confident that I can identify general indicators associated with a suspected impaired driver.  Comments: _____ _____	○	○	○	○	○
5. Overall, the ARIDE course provided me with information which is immediately applicable to my job.  Comments: _____ _____	○	○	○	○	○
6. Upon completing the course, I can effectively communicate (in writing and in a courtroom setting) my observations associated with a driver who I suspect is impaired by alcohol, drugs, or a combination of both.  Comments: _____ _____	○	○	○	○	○

***Please rate how helpful each workshop session was for you personally.***

Item	Poor	Fair	Good	Very Good	Excellent
Introduction and Overview “Drugs and Highway Safety”	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Standardized Field Sobriety Testing Review	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Standardized Field Sobriety Testing Proficiency Examination	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drugs in the Human Body	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Observation of the Eyes and Additional Tests for Drug Impairment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Seven Drug Categories	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The Effects of Drug Combinations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pre and Post Arrest Procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please mark the appropriate word to indicate your agreement or disagreement with each of the following statements.

Item	Agree	Disagree	Not Sure
The program contains some information that is not needed and that should be deleted.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There are some important topics missing from the program that should be added.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The program is too short.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel this program has improved my own ability to enforce DWI laws.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The instructors did a good job.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am very glad I attended the program.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The program is too long.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The instructors should have been better prepared.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel fully qualified to use the nystagmus test now.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel fully qualified to use the two divided attention tests now.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Too much time was spent practicing with drinking volunteers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I wish we had more practice with drinking volunteers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If you absolutely had to delete one session or topic from this course, what would it be?

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If you could add one new topic or session to this course, what would it be?

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	Poor	Fair	Good	Very Good	Excellent
Please rate the overall quality of the course.	○	○	○	○	○

Please rate your instructors for this course. Rate the instructor(s) by selecting the appropriate response:

Instructor Name	Poor	Below Average	Average	Above Average	Excellent
Comments: _____ _____	○	○	○	○	○
Comments: _____ _____	○	○	○	○	○
Comments: _____ _____	○	○	○	○	○
Comments: _____ _____	○	○	○	○	○
Comments: _____ _____	○	○	○	○	○

Name (optional): \_\_\_\_\_