

Basic Course Workbook Series Student Materials

**Learning Domain 12
Controlled Substances
Version Four**

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Student Materials
Learning Domain 12
Controlled Substances
Version Four**

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THE ACADEMY TRAINING MISSION

The primary mission of basic training is to prepare students mentally, morally, and physically to advance into a field training program, assume the responsibilities, and execute the duties of a peace officer in society.

FOREWORD

The California Commission on Peace Officer Standards and Training sincerely appreciates the efforts of the many curriculum consultants, academy instructors, directors and coordinators who worked with POST to develop this workbook. The Commission extends its heartfelt appreciation to the California law enforcement agencies who freely offered personnel who gave of their time to participate in the development of this training material.

This student workbook is part of the POST Basic Course Training System. The workbook component of this system provides self-study documents for every learning domain that makes up the basic course. Each workbook is intended to be a supplement to, not a substitute for, classroom instruction. Its objective is to improve learning and retention of information by a student attending the academy.

The content of each workbook is organized into sequenced learning modules to meet requirements as proscribed both by California law and the POST Training and Testing Specifications for the Basic Course.

It is our hope that the collective wisdom and experience of all who contributed to this book helps you, the student, to successfully complete the academy course, to advance to the Field Training Officer program and to enjoy a safe and rewarding career as a peace officer serving the communities of California.

A handwritten signature in black ink, appearing to read "Hal Snow". The signature is fluid and cursive, with a large initial "H" and "S".

HAL SNOW
Interim Executive Director

LD 12: Controlled Substances

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Preface

Introduction

Student workbooks

The student workbooks are part of the POST Basic Course Instructional System. This system is designed to provide students with a self-study document to be used in preparation for classroom training.

Regular Basic Course training requirement

Completion of the Regular Basic Course is required, prior to exercising peace officer powers, as recognized in the California Penal Code and where the POST-required standard is the POST Regular Basic Course.

Student workbook elements

The following elements are included in each workbook:

- chapter contents, including a synopsis of key points,
 - supplementary material, and
 - a glossary of terms used in this workbook.
-

How to Use the Student Workbook

Introduction

This workbook provides an introduction to the training requirements for this Learning Domain. You may use the workbook in several ways: for initial learning, for test preparation, and for remedial training.

Workbook format

To use the workbook most effectively, follow the steps listed below.

Step	Action
1	Begin by reading the: Preface and How to Use the Workbook, which provide an overview of how the workbook fits into the POST training program and how it should be used.
2	Refer to the Chapter Synopsis section at the end of each chapter to review the key points that support the chapter objectives.
3	Begin reading the text.
4	Complete the workbook learning activities at the end of each chapter. These activities reinforce the material taught in the chapter.
5	Refer to the Glossary section for a definition of important terms. The terms appear throughout the text and are bolded and underlined (e.g., <u>term</u>).

Chapter 1

Drugs in the Body

Overview

Learning need Peace officers need to know how drugs can affect normal behavior. This information assists the officer in determining which controlled substance is influencing a person's conduct.

Learning objectives The chart below identifies the student learning objectives in this chapter.

After completing study of this chapter, the student will be able to...	E.O. Code
<ul style="list-style-type: none">• discuss the impact of drugs on the body.	12.01.EO14

In this chapter This chapter focuses on the effect of controlled substances on the human body. Refer to the chart below for a specific topic.

Topic	See Page
Controlled Substances Terminology	1-2
Effects of Drugs on the Body	1-5
Chapter Synopsis	1-9
Workbook Learning Activities	1-10

Controlled Substance Terminology

Introduction

The Uniform Controlled Substance Act regulates **drugs**, including possession, sales, transportation, manufacturing, etc. Peace officers need to understand what is covered by the law regarding use, possession or sales of a controlled substance. Peace officers should be familiar with the following terms when investigating a crime that involves controlled substances:

- drugs
 - controlled substances
 - narcotics, and
 - drug abuse
-

Drugs

Drugs are any substances which can impair a person's ability to function normally.

NOTE: This is a law enforcement definition that applies to psychoactive drug abuse. Psychoactive means that a drug has specific effects on the brain.

Examples of drugs include:

- marijuana,
 - toluene (often in model airplane glue), and
 - heroin.
-

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Controlled Substance Terminology, Continued

Controlled substances

Controlled substances are any one of a number of drugs or other substances which are strictly regulated because of their potential for abuse or addiction. These substances are included in the Health and Safety Code as **Schedules I-V**. These include drugs classified as narcotics, depressants, stimulants, hallucinogens, and cannabis.

Examples of controlled substances include:

- stimulants (e.g., methamphetamines),
 - hallucinogens (e.g., LSD),
 - opiates (e.g., heroin),
 - depressants (e.g., barbiturates).
-

Narcotics

Narcotics are opiates or synthetic opiates. Their major function is analgesic (pain suppressant). Use may produce a sense of euphoria.

Examples of narcotic drugs which have legitimate medical use are:

- Morphine,
- Methadone, and
- Demerol.

NOTE: Heroin is an example of a narcotic drug that is not medicinal.

Drug abuse

Drug abuse is the illegal use of a controlled substance. Possession or use of controlled substances may be a crime. Addiction to drugs is a disease.

Examples of drug abuse include:

- injecting heroin,
 - sniffing cocaine, and
 - smoking crack.
-

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Controlled Substance Terminology, Continued

Leadership

Peace officers can influence young peoples' choices by being exemplary role models and by voicing a clear and consistent message regarding the illegal use of drugs. We need to continually reinforce the message that it is not OK to experiment with these substances in violation of the law.

Ethics

The world of narcotic investigations; dealing with narcotics users, dealers, and traffickers can be a particularly nasty one with high stakes in terms of officer safety, money and power. The lure of the easy money and power can be intoxicating. Deception and lying are particularly complex issues that will test an officer's integrity and cause severe consequences. The peace officer has to demonstrate strong, ethical leadership, honesty, and integrity for career survival.

Effects of Drugs on the Body

[12.01.EO14]

Introduction

Before peace officers can begin to identify the adverse reactions a drug may have on the body, it is necessary to have a general knowledge of what is considered the normal state of the body and how drugs affect the body.

How drugs work

Drugs work by artificially introducing into the body chemicals that mimic the body's natural hormones and neurotransmitters. They may mimic, block, speed up or slow down the body's natural state; they interfere with the messages transmitted by the **neurotransmitters**.

Methods for taking drugs into the body

Depending on the method selected, a person can increase the speed in which the drug enters the body and takes effect. The following chart lists the methods and the path into the body, starting with inhalation (the fastest method) and concluding with ingestion (the slowest).

If a drug is taken into the body via ...	by...	then the drug...
inhalation,	smoking or inhaling,	enters the body through the tissue of the lower respiratory system (lungs).
injection,	using a syringe and hypodermic needle,	goes directly into a muscle or a vein into the circulatory system.
intranasal,	snorting or sniffing,	enters the body through the tissue of the upper <u>respiratory system</u> (nose).

Continued on next page

Effects of Drugs on the Body, Continued

Methods for taking drugs into the body
(continued)

If a drug is taken into the body via ...	by...	then the drug...
transdermal,	touching,	passes directly through the skin into the circulatory system.
ingestion,	eating,	enters the body via the tissues of the <u>digestive system</u> into the <u>circulatory system</u> .

How drugs travel through the body

No matter how a drug enters the body, it must go through the following process.

Step	Action(s)
1	The drug enters the blood stream (via inhalation, injection, ingestion, etc.).
2	The drug is metabolized by the body into several metabolites (substances resulting from metabolism). The metabolite continues in the bloodstream to different parts of the body.
3	Eventually, the metabolite is discharged from the body, usually in urine.

Continued on next page

Effects of Drugs on the Body, Continued

Use

A person who uses a drug to seek temporary relief, usually achieves this by taking the correct dosage that the doctor and/or label prescribes. Over time a person can go from using a drug for therapeutic reasons (e.g., a pain killer), to becoming totally dependent on that drug in order to function.

Related terms

To understand how drugs affect the body, peace officers need to understand the following terms.

Central Nervous System (CNS) is the system of nerves which make up the brain and spinal cord.

Synergism effect is the effect when two or more substances are used which result in an effect that each substance could not reach on its own.

Neurotransmitters are chemicals in the brain which transmit nerve messages across synaptic gaps (gap between two neurons) throughout the nervous system in the body.

The effect of drugs on the body

Introducing a drug into the body upsets the body's dynamic chemical balance (the body's natural tendency to **homeostasis**). The body then alters its own supply of natural chemicals to accommodate the drug now in the system.

Drugs react with oxygen and other chemicals in the body; they are broken down from complex substances into simpler ones. Eventually they are eliminated from the body.

Drug abuse

Drug abuse results from taking an excess of prescription or illegal drugs. In more serious situations, the excessive use of certain prescribed or illegal drugs can lead to serious drug abuse and addiction and, in extreme circumstances, to death from an overdose.

Continued on next page

Effects of Drugs on the Body, Continued

Tolerance

Tolerance is building up resistance to a drug, requiring more of the substance to be ingested in order to cause the desired effects.

The brain accommodates the routine presence of a drug by turning off the supply of natural chemicals that correspond to the drug. Because the drug is artificially simulating the actions of certain hormones and transmitters, the body may come to rely on the drug to supply those actions and may simply cease producing those natural chemicals. This is sometimes called negative feedback.

Addiction

Addiction is the physical/psychological **dependence** on a drug. Addiction becomes apparent when:

- the body accommodates the routine presence of the drug,
 - the body begins to rely on the drug,
 - tolerance to the drug builds,
 - more drug is needed to trigger the desired effect, and, finally,
 - the body becomes physically addicted to the drug.
-

Overdose

Overdose (also referred to as OD) is the excessive consumption of a drug; often fatal.

Chapter Synopsis

Learning need Peace officers need to know how drugs can effect normal behavior. This information assists the officer in determining which controlled substance is influencing a person's conduct.

Effects of controlled substances on the body
[12.01.EO14] Introducing a drug into the body upsets the body's dynamic chemical balance (the body's homeostasis). The body then alters its own supply of natural chemicals to accommodate the outside drug now in the system.

Workbook Learning Activities

Introduction

To help you review and apply the material covered in this chapter, a selection of learning activities has been included. No answers are provided. However, by referring to the appropriate text, you should be able to prepare a response.

Activity questions

1. Describe the concept of homeostasis. How can a person's body, which is always changing, achieve this dynamic balance? What are the key functions of the 10 major body systems?

2. Complete the following chart.

Action	Method of Entering the Body	Pathway
	inhalation	
		muscle/vein to circulatory system
snorting or sniffing		
	ingestion	
touching		

Chapter 2

Drugs

Overview

Learning need To develop probable cause for possession of controlled substances, peace officers must be able to recognize what category of drug the person possesses.

Learning objectives The chart below identifies the student learning objectives for this chapter.

After completing the study of this chapter, the student will be able to...	E.O. Code
<ul style="list-style-type: none">• recognize the category, common name(s), symptoms, physical properties and packaging of the following controlled substances:<ul style="list-style-type: none">- stimulants,- hallucinogens,- narcotic analgesics,- cannabis,- depressants,- inhalants, and- dissociative anesthetics. (Phencylidine)	12.02.EO4 12.02.EO5 12.02.EO6 12.02.EO7 12.02.EO8 12.02.EO9 12.02.EO10
<ul style="list-style-type: none">• recognize how the following substances are introduced into the body and general indicators of use:<ul style="list-style-type: none">- stimulants,- hallucinogens,- narcotic analgesics,- cannabis,- depressants,- inhalants, and- dissociative anesthetics. (Phencylidine)	12.02.EO11

Continued on next page

Overview, Continued

In this chapter This chapter focuses on the identification of controlled substances. Refer to the chart below for a specific topic.

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Drug Categories

[12.02.EO4, 12.02.EO5, 12.02.EO6, 12.02.EO7, 12.02.EO8, 12.02.EO9, 12.02.EO10]

Introduction

Peace officers need to be familiar with the major pharmacological classifications for drugs to better understand the effects of each class on the body.

Pharmacological classifications

The chart below describes the different pharmacological classes.

Class	Description	Effect on the Body	Examples
<u>Stimulants</u>	drugs that increase activity and promote a sense of well-being	<ul style="list-style-type: none">impairment by overstimulating the brain, accelerating the heart rate and respiration, and elevating blood pressure	<ul style="list-style-type: none">cocaineamphetaminesmethamphetamines
<u>Hallucinogens</u>	drugs that induce intense emotional feelings characterized by a magnification of sensory perceptions and possible visual hallucinations at relatively low doses	<ul style="list-style-type: none">impairs the user's ability to perceive reality and often produces a dazed appearance	<ul style="list-style-type: none">LSDMDMA (Ecstasy)peyote (mescaline)psilocybin

Continued on next page

Drug Categories, Continued

Pharmaceutical classifications
(continued)

Class	Description	Effect on the Body	Examples
<u>Narcotic Analgesics</u>	a category of drugs called narcotic analgesics which can be synthetic or natural	<ul style="list-style-type: none"> used to relieve pain and effect a comparatively weak general CNS depression (sedation) very addictive; can produce withdrawal symptoms when stopped after chronic administration 	<ul style="list-style-type: none"> opiates: <ul style="list-style-type: none"> - Demerol - Methadone - Darvon opioids: <ul style="list-style-type: none"> - morphine - codeine - heroin Vicodin Percodan
<u>Cannabis</u>	dried leaves or buds of the marijuana plant	<ul style="list-style-type: none"> can lead to the impairment of the attention process produces as its most prominent effect changes in appetite, and a floating sensation 	<ul style="list-style-type: none"> marijuana hashish/hash oil synthetic (Marinol)

Continued on next page

Drug Categories, Continued

Pharmaceutical classifications
(continued)

Class	Description	Effect on the Body	Examples
<u>Depressants</u>	a large number of different drugs, all of which are named for the most prominent property of dampening CNS activity while carrying relatively weak analgesic effects. Alcohol is a subcategory of depressants that affect the CNS; it is the most common depressant drug	<ul style="list-style-type: none">• slows the operation of the brain and other parts of the CNS	<ul style="list-style-type: none">• tranquilizers• barbiturates• anti-anxiety agents (e.g., Librium, Valium, Xanax, etc.)• GHB, GBL• distilled spirits• beer• wine

Continued on next page

Drug Categories, Continued

Pharmaceutical classifications
(continued)

Class	Description	Effect on the Body	Examples
<u>Inhalants</u>	substances inhaled through the lungs (lower respiratory system)	<ul style="list-style-type: none">• impairs performance by blocking the passage of oxygen to the brain, producing disorientation and slurred speech• most prominent psychological actions of these drugs at the usual doses are feelings of excitement and confusion	<ul style="list-style-type: none">• solvents• aerosols• nitrates• anesthetics (nitrous oxide, ether, chloroform)

Continued on next page

Drug Categories, Continued

Pharmaceutical classifications
(continued)

Class	Description	Effect on the Body	Examples
Dissociative Anesthetics	synthetic drug has many unpredictable effects.	<ul style="list-style-type: none">• changes in sensory perceptions and visual hallucinations similar to those described for the hallucinogens• can act as a stimulant, depressant, or hallucinogen, and can cause bizarre and sometimes violent behavior	<ul style="list-style-type: none">• PCP and its analogs• Ketamine

NOTE: Steroid abuse can cause increased aggression, along with many other severe physical side effects. Steroid use is controlled by law. Law enforcement officers are seeing more abuse of steroids, especially by athletes and body builders.

Stimulants

[12.02.EO4, 12.02.EO11]

Introduction

Stimulants increase the activity of the brain and other parts of the **central nervous system (CNS)** by temporarily increasing the body's functional activity.

A *synthetic stimulant* is a controlled substance made from a combination of ingredients that are not of natural origin.

An *organic stimulant* is a controlled substance made from a plant. The principle active ingredient of cocaine is derived from the coca plant, grown primarily in Central and South America. Cocaine is the strongest stimulant of natural origin.

Continued on next page

Stimulants, Continued

Common names

Stimulants have several common names, as shown in the following chart.

Type of Stimulant	Common “Street” Names
methamphetamine/amphetamine	<ul style="list-style-type: none">- crank- meth- wire- water- batu- shabu- crystal- speed- go fast- rice- glass- ice
prescription stimulants (i.e., Ritalin, Phentermine, Dexadrine, etc.)	<ul style="list-style-type: none">- beans- whites- mini- black beauties- pink hearts- bennies- phen-phen
cocaine: crack/free base powder	<ul style="list-style-type: none">- rock- crack- blow- snow- 2- nose candy- big C- lady- free base (base)- 2-0- white girl- blanca- coca- snow birds- flake

Continued on next page

Stimulants, Continued

Appearance and packaging of synthetic stimulants

The following chart lists the characteristics and typical packaging for synthetic stimulants.

Stimulant	Appearance	Packaging
methamphetamine/ amphetamine	<ul style="list-style-type: none">- powder, or- crystal forms	<ul style="list-style-type: none">- small plastic “baggies,”- small paper bindles, or- tinfoil
prescription stimulants	<ul style="list-style-type: none">- various colored pills and tablets	<ul style="list-style-type: none">- baggies,- tinfoil,- vials, or- bottles

Continued on next page

Stimulants, Continued

Appearance and packaging of cocaine

Cocaine is frequently seen in a base form (rock) or as a powder (HCL). It is odorless. Its physical characteristics can vary within region or trend.

Cocaine can be packaged using a variety of methods depending on the amount. The most common quantities are shown in the chart below. (See the Supplementary Material section for a complete list of weights.)

Quantity	Packaging
kilo or half-kilo (2.2 lbs or 1.1 lbs)	<ul style="list-style-type: none">- heat-sealed, clear, heavy plastic bags, or- gallon-size zip-lock plastic bags
ounce (28.5 gr)	<ul style="list-style-type: none">- smaller, heat-sealed packages,- prophylactics, or- sandwich-size zip-lock plastic bags
grams (package of artificial sweetener is one gram)	<ul style="list-style-type: none">- film canisters,- tinfoil,- paper bindles,- small glass vials,- various small containers purchased at “head shops,” or- small zip-lock plastic bags

Cocaine cutting agents

Pure cocaine is cut with a variety of substances. These include:

- procaine
- lactose
- yeast
- flour
- vitamin B-12
- lidocaine
- mannitol
- baking soda
- vitablend
- inositol

Continued on next page

Stimulants, Continued

Method of use

The common methods for taking stimulants are outlined in the table below.

Drug	Method of Use
methamphetamine/ amphetamine	<ul style="list-style-type: none">- intranasal (snorted - most common)- injected- inhalation (smoked with pipe)- orally (less common than other three methods)
prescription stimulants	<ul style="list-style-type: none">- oral
cocaine base	<ul style="list-style-type: none">- inhalation (smoked - most common)
cocaine HCL (powder)	<ul style="list-style-type: none">- intranasal (snorted)- injected (called a “speed ball” when mixed with heroin)

Related terms

Dilated pupil is a widening of the pupil diameter to a width greater than 6.5 mm.

Constricted pupil is a narrowing of the pupil diameter to a width less than 2.9 mm.

Nystagmus is an involuntary jerking of the eyes.

Romberg test is a field sobriety test that uses an individual’s estimate of elapsed time to determine whether the body internal clock is normal, too slow, or too fast.

Continued on next page

Stimulants, Continued

Signs and symptoms

Stimulants increase the activity of the body both internally and externally. Possible effects are shown in the chart below.

Vital Signs	How are they affected?
<u>horizontal gaze nystagmus</u>	not present
<u>vertical gaze nystagmus</u>	not present
<u>lack of convergence</u>	not present
<u>pupil reaction</u>	slowed
<u>pupil size</u>	dilated (may be constricted with chronic use)
<u>pulse rate</u>	elevated
<u>Romberg test</u>	fast

NOTE: Pupil size can be indicator of drug use. The sizes mean:

constricted = pupil size below 2.9 mm
dilated = pupil size above 6.5 mm
normal = pupil size between 3.0 and 6.5 mm

Chronic users of stimulants may not have dilated pupils.

Continued on next page

Stimulants, Continued

General indicators of use

After taking a [stimulant](#), a person may exhibit the following symptoms:

- paranoia,
 - increased alertness,
 - insomnia or restlessness,
 - body tremors (including eyelids),
 - increased respiration,
 - loss of appetite,
 - rapid speech,
 - agitation,
 - dry mouth,
 - euphoria,
 - sweating,
 - grinding teeth,
 - residue or redness in nasal septum/under nose (if snorted),
 - bloody or running nose (if snorted),
 - blackened gums, (if smoked),
 - burned fingers and lips (if smoked), and
 - a hacking cough (if smoked).
-

Hallucinogens

[12.02.EO5, 12.02.EO11]

Introduction

Hallucinogens share the ability to induce intense emotional states characterized by a magnification of sensory perceptions and possible visual hallucinations.

A synthetic hallucinogen is a controlled substance that is made up of a combination of ingredients and manufactured in a laboratory.

Organic hallucinogens are derived from plant materials.

Common names

There are several types of hallucinogens with specific characteristics, as explained in the following chart.

Type	Characteristic
MDMA	hallucinogen with stimulant-like properties
dimethyltryptamine (DMT)	short acting hallucinogen found in seeds of the cohoba plant
diethyltryptamine (DET)	analogue of DMT
lysergic acid diethylamide (LSD)	short-acting hallucinogen with possible long-term after effects
peyote (mescaline)	derived from mescal button (dried disk-like top from mescal cactus); mescaline is the psychoactive ingredient
psilocybin	organic compound derived from fungus (mushrooms)

Continued on next page

Hallucinogens, Continued

Street names

The following chart lists some of the street names for hallucinogens.

Synthetic Hallucinogens	
Drug	Street Name
MDMA	- E - Ecstasy - X-TC
LSD	- acid - blotter paper - tabs - sheets - purple haze - squares - dots - window pane - micro dots

Organic Hallucinogens	
Drug	Street Name
peyote	- button - cactus
psilocybin	- shrooms - magic mushrooms

Continued on next page

Hallucinogens, Continued

Appearance and packaging

The appearance and packaging of synthetic and organic hallucinogens are listed in the chart below.

Type	Appearance	Packaging
LSD	liquid or powder form or tablet	<ul style="list-style-type: none">- wrappers/cellophane (called microdots)- tablets/microdots in baggies or vials- blotter paper/sheets- stamps/envelopes- sugar cubes
peyote (mescaline)	buttons which are ground into a brown granular substance	<ul style="list-style-type: none">- inserted into gelatin capsules
psilocybin	fresh or dried mushroom caps or stems (with a light blue to iridescent violet ring around the top of the stem)	<ul style="list-style-type: none">- clear plastic baggies
M.D.M.A. (Ecstasy) E	brown crystalized powder or tablet form, numerous colors	<ul style="list-style-type: none">- inserted into gelatin capsules- tablets stamped with popular logos (i.e., Nike, etc.)

Continued on next page

Hallucinogens, Continued

**Method
of use**

The most common methods for taking hallucinogens are shown in the table below. While preferred methods of use vary between specific hallucinogens, overall, the most common method of using hallucinogens is ingestion by swallowing.

Drug	Method of Use
MDMA	- oral (swallowed)
DMT	- inhalation (seeds are smoked)
DET	- Inhalation (smoked) - oral (eaten)
LSD	- oral (licked from paper source or swallowed as pills, tablets, paper, liquid, or in food) - via eye in eye drops
peyote	- oral (dried cactus buttons are chewed or eaten, drunk as bitter tea; mescaline is swallowed in capsule form) - inhalation (smoked)
psilocybin	- oral (most common) (mushrooms are eaten, or ground up and put into capsules to be swallowed, or made into tea) - inhalation (smoking)

Continued on next page

Hallucinogens, Continued

Signs and symptoms

Hallucinogens may cause the user to perceive things differently from the way they really are. Possible effects are shown in the chart below.

Vital Signs	How are they affected?
horizontal gaze nystagmus	generally not present
vertical gaze nystagmus	not present
lack of convergence	not present
pupil reaction	normal
pupil size	dilated
pulse rate	elevated
Romberg test	fast

General indicators of use

After taking a hallucinogen, a person may exhibit the following symptoms:

- hallucinations (intensified visual images and/or illusions),
- irrational, bizarre behavior and/or paranoia,
- insomnia,
- loss of appetite,
- dazed appearance,
- impaired memory,
- body tremors,
- excessive sweating,
- increased respiration,
- restlessness,
- possible flashbacks (with LSD), and/or
- grinding of teeth.

NOTE: **Synesthesia** is the transposing (crossing) of the senses (e.g., hearing colors and seeing sounds).

Narcotic Analgesics

[12.02.EO6, 12.02.EO11]

Introduction

Opiates are narcotic pain relievers and very addictive drugs. They produce withdrawal signs and symptoms when the drug is stopped after chronic use and suppress withdrawal signs and symptoms when the drug is readministered.

Sources

Opiates come from two sources:

- opium poppy plant (morphine, codeine, heroin), and
- synthetic manufacturers (Demerol, Methadone, Dilaudid, Vicodin, Percodan).

NOTE: The human body produces endorphines, which have similar qualities to opiates, i.e., relieves pain naturally.

One of the most commonly abused opiates is heroin. Heroin is made from morphine, which is made directly from opium.

Common name

The street names for heroin vary by region of the state. Some common street names for heroin include:

- negra
 - black
 - tar
 - chiva
 - la blanca
 - white
-

Continued on next page

Narcotic Analgesics, Continued

Heroin appearance

Heroin can be identified by its color and other characteristics. The following chart identifies numerous types.

Variety	Characteristics
varies (often white/tan)	<ul style="list-style-type: none">- consistency of a coarse face powder- little or no odor- color varies with exposure and adulterant (cutting agent)
brown	<ul style="list-style-type: none">- consistency varies from tiny pebbles to coarse face powder- acetic acid (vinegar-like) odor- color varies from dark gummy brown to tan
tar	<ul style="list-style-type: none">- consistency of black or brown tar- acetic acid (vinegar-like) odor

Packaging

Heroin packaging varies. The following chart describes the two methods.

Sales Method	Packaging
wholesale	<ul style="list-style-type: none">- plastic bag (multi-ounces)- prophylactics (ounces)- wrapped in electrical tape (color is regional)
retail	<ul style="list-style-type: none">- prophylactics (multi-grams)- balloons (multi- and partial grams)- paper, plastic, cellophane bags- tinfoil- preloaded syringes

Continued on next page

Narcotic Analgesics, Continued

Method of use

The common methods for taking heroin include:

- injection (most common),
 - intranasal (snorted as a powder or liquid),
 - inhalation (smoked),
 - orally (swallowed or mixed with water and consumed as a liquid), and
 - eye drop container. (i.e., over the counter products)
-

Smoking

There are two ways a user smokes opiates:

- heroin is smoked by using tinfoil, referred to as “chasing the dragon,” and
 - opium is smoked by using an opium pipe.
-

Injection equipment

The equipment used for injecting heroin may include:

- matches or lighter
 - water,
 - spoon, bottle cap, soda can bottom (or other instrument that can be used as a cooker),
 - hypodermic needle (e.g., insulin syringes),
 - small amount of cotton/cigarette filters (used as strainer),
 - tourniquet (e.g., a belt or necktie),
 - handkerchief (to wrap the outfit to conceal it),
 - pouch, glasses case or other container to conceal the above, and
 - eyedroppers.
-

Snorting equipment

The equipment used for snorting may include:

- straw,
 - plastic pen casing,
 - nasal sprayer, and
 - syringe (used to spray liquid).
-

Continued on next page

Narcotic Analgesics, Continued

Signs and symptoms

Opiates are used to relieve pain and can effect a comparatively general CNS depression (sedation). Possible effects are shown in the chart below.

Vital Signs	How are they affected?
horizontal gaze nystagmus	not present
vertical gaze nystagmus	not present
lack of convergence	not present
pupil reaction	little or no visible reaction
pupil size	constricted below 3.0 mm
pulse rate	below normal
Romberg test	slow

General indicators of use

After taking a narcotic analgesic, a person may exhibit the following symptoms:

- droopy eyelids (eyelids to top of pupils)
 - nodding off or drowsiness,
 - slow breathing,
 - slow deliberate speech or low raspy voice,
 - injection sites/puncture wounds,
 - profuse itching/scratching,
 - dry skin and mouth,
 - muscle tone relaxation,
 - euphoria, and/or
 - cold extremities.
-

Cannabis

[12.02.EO7, 12.02.EO11]

Introduction

The biological name for the plant is *Cannabis Sativa L.* The three main street drugs that come from the [cannabis](#) plant are:

- marijuana,
- hashish, and
- hash oil.

THC, is the active ingredient in cannabis.

Common names

Some of the street names for marijuana include:

- | | | |
|----------|----------|--------------|
| - grass | - doobie | - sinsemilla |
| - weed | - ganja | - Mary Jane |
| - buds | - shake | - "420" |
| - pot | - mota | - blunt |
| - dope | - yerba | - reefer |
| - purple | | |
-

Continued on next page

Cannabis, Continued

Appearance

Marijuana is derived from the cannabis plant. The following graphic depicts the characteristics of the plant.

Format	Characteristics
plant	<ul style="list-style-type: none">- green leaves generally composed of an odd number (5 to 11) of leaflets or lobes- leaves are 2 to 6 inches long, pointed tips, saw-like edges- have a peculiar odor
plant (dried for smoking)	<ul style="list-style-type: none">- greenish- contains plant buds, bits of small stems, and possibly seeds- very distinct and peculiar odor
hashish (concentrated cannabis)	<ul style="list-style-type: none">- a drug-rich resinous secretion from the flowers of the cannabis plant- processed by extraction to produce a more potent form of Marijuana
hashish oil (concentrated cannabis)	<ul style="list-style-type: none">- produced by a process of chemical extraction to yield a dark, viscous liquid; oil is much more potent than marijuana

Continued on next page

Cannabis, Continued

Packaging

Marijuana is usually packaged according to its weight. The chart below lists the type of packaging for a particular weight.

Packaging	Weight
brick (vacuum sealed package)	1 kilo (2.2 pounds or greater)
plastic bag	1 pound
plastic baggie	1, 1/2, 1/4, 1/8 ounce
joint	.25 to .35 grams

NOTE: Dime bags (\$10) and nickel bags (\$5) are commonly packaged quantities of marijuana. It is also sold in an ounce quantity called an OZ.

Method of use

The common methods for taking cannabis, in general, include:

- inhalation ([smoking](#) - most common), and
 - orally.
-

Continued on next page

Cannabis, Continued

Signs and symptoms

Marijuana is a plant which contains a chemical known as THC. This chemical can have the following effect on a person.

Vital Signs	How are they affected?
horizontal gaze nystagmus	not present
vertical gaze nystagmus	not present
lack of convergence	present
pupil reaction	normal with rebound dilation
pupil size	dilated or may be normal
pulse rate	elevated
Romberg test	distorted

Continued on next page

Cannabis, Continued

General indicators of use

A person taking marijuana may experience reduced attention span and be slow to respond. The person may also exhibit some or all of the following symptoms:

- bloodshot or reddening of the eyes,
- eyelid and body tremors,
- debris residue in mouth,
- dry mouth,
- loss of sense of time and space,
- diminished inhibitions,
- difficulty in concentrating or disorientation,
- increased appetite,
- odor of burnt marijuana, and/or
- green or yellow coating on tongue.

Frequent users may have a chronic cough.

Penal code section

If individuals are found in a public place under the influence of an intoxicating liquor, drug, or controlled substance, etc., and are in such condition that they are unable to exercise care for their own safety or for others, they are subject to arrest for disorderly conduct. (*Penal Code Section 647(f)*)

NOTE: Agency policy may vary, to ensure the proper process refer to *Penal Code 11362.5 through 11362.83* and agency guidelines.

Depressants

[12.02.EO8, 12.02.EO11]

Introduction

Depressants slow brain functions and parts of the central nervous system, ultimately reducing functional activity. Alcohol is one of the most common depressant drugs. Because it is readily available and legal, it is the most commonly abused drug.

Depressants are categorized as:

- tranquilizers - Xanax, Valium, Librium, and Halcyon, and
- sedatives - barbiturates and Rohypnol.

Common names

Some of the most common illegally used depressants and their street names are shown in the table below. Depressants, in general, are called “downers.”

Drug	Street Name
<ul style="list-style-type: none">• Secobarbital• Pentobarbital• Amosecobarbital• Ativan	<ul style="list-style-type: none">• Commonly referred to by the predominate color of the drug. (i.e., reds, yellows)
Rohypnol	- roofies
Halcyon	none
Librium	none
Valium	none
Xanax	none
Gamma Hydroxy Butyrate (GHB)	- easy lay - G
Soma	Soma
Alcohol	- beer - wine - distilled spirits

Continued on next page

Depressants, Continued

General indicators of alcohol use

After consuming alcohol, a person may exhibit the following symptoms:

- bloodshot and watery eyes,
 - odor of alcoholic beverage,
 - loss of coordination, and/or
 - slurred speech.
-

Appearance and packaging

Depressants can be found in a variety of forms. The following chart lists the different forms and the various packaging methods.

Appearance	Packaging
<ul style="list-style-type: none">- capsules- tablets- pills- powders- liquids	<ul style="list-style-type: none">- baggies- prescription bottles- vials- no packaging at all

Methods of use

The common methods for taking depressants include:

- orally (most common),
 - injection (either into vein, muscle, or under skin),
 - absorption as suppositories inserted into body cavities, and
 - intranasal (crushed and snorted).
-

Continued on next page

Depressants, Continued

Sign and symptoms

Depressants decrease the activity of the body both internally and externally. Possible effects are shown in the chart below.

Vital Signs	How are they affected?
horizontal gaze nystagmus	present
vertical gaze nystagmus	present (only in high doses)
lack of convergence	present
pupil reaction	slowed
pupil size	near normal (possibly dilated with Quaalude and Soma, Alcohol)
pulse rate	down (can be less than 60 bpm, but possibly up with Methaqualone, Prozac, or Alcohol)
Romberg test	slow

General indicators of use

After taking a depressant, a person may appear sluggish and somewhat disoriented. They may also exhibit:

- drunken behavior with or without the odor of alcohol,
 - drowsiness,
 - slurred speech,
 - droopy eye lids,
 - decreased inhibitions, and/or
 - impaired coordination or slowed reflexes.
-

Inhalants

[12.02.EO9, 12.02.EO11]

Introduction

This broad category of drugs impairs performance by blocking the passage of oxygen to the brain.

Common names

The common form of inhalants include:

- solvents,
 - aerosols, and
 - anesthetic gases.
-

Appearance and packaging

Inhalants are commonly in liquid form. Inhaled fumes from the liquid cause the effect. The following chart lists the different packaging associated with each type of inhalant.

Appearance	Packaging
solvent	<ul style="list-style-type: none">- airplane glue- household cement- gasoline- paint/paint thinner- lacquer thinner- kerosene- toluene- acetone- isopropanol- methyl ethyl ketone- methyl isobutyl ketone- lighter fluid
aerosol	<ul style="list-style-type: none">- spray paint (especially blue, silver, and gold)- spray cooking oil- hair spray and other propellants used in aerosol cans
anesthetic gases	<ul style="list-style-type: none">- ether- chloroform- nitrous oxide- amyl nitrite- butyl nitrite

Continued on next page

Inhalants, Continued

Method of use

Inhalation of fumes is accomplished in ways shown in the table below.

Inhalant	Method
glue, household cement	Substance is often placed in paper or plastic bags or handkerchiefs to contain fumes for inhaling.
aerosols	Aerosols are sprayed directly into the nose.
other inhalants	Substance is inhaled by pouring it into a cloth.
nitrous oxide (laughing gas)	Balloon is filled with substance and inhaled from balloon.

Signs and symptoms

Inhalants can cause a temporary sense of euphoria, yet at the same time can lead to severe damage of vital organs. Possible effects are shown in the chart below.

Vital Signs	How are they affected?
horizontal gaze nystagmus	present
vertical gaze nystagmus	present (in high doses)
lack of convergence	present
pupil reaction	normal to slow
pupil size	near normal
pulse rate	elevated
Romberg test	normal or slow

Continued on next page

Inhalants, Continued

General indicators of use

A person using an inhalant may have a feeling of euphoria, exaggerated well-being, vigor, and high spirits. This may be replaced with drowsiness and distorted perception. In addition, the person may exhibit:

- double vision, slurred speech, and poor coordination,
 - headache and nausea,
 - sneezing and coughing,
 - odor of substance on breath,
 - substance around mouth or nose area,
 - feeling of intoxication,
 - possible unconsciousness,
 - hallucinations,
 - excess nasal secretions, and/or
 - watering eyes.
-

Dissociative Anesthetics (Phencyclidine)

[12.02.EO10, 12.02.EO11]

Introduction

Dissociative Anesthetics have the ability to alter sensory perceptions and cause hallucinations similar to those described for hallucinogens. It can also act as a visual stimulant, or cause extreme mood swings.

Phencyclidine (PCP) is the most encountered dissociative anesthetics.

Common names

PCP is known by a variety of street names, including:

- angel dust
 - dust
 - shermans or sherms
 - KJ (kool joint)
-

Appearance and packaging

The process of manufacturing PCP requires numerous chemicals, including ether. Liquid PCP has an odor similar to ether. The presence of this odor is a possible indication that the substance could be PCP. Powder PCP has little or no odor.

Continued on next page

Dissociative Anesthetics (Phencyclidine), Continued

Appearance and packaging (continued)

The following chart lists the common forms and their associated appearance and packaging.

Form	Appearance	Packaging
liquid	clear or yellow-colored, but can be disguised by any color	<ul style="list-style-type: none">- eye drop container (i.e., over the counter eye drops)- baby or soft drink bottles or similar containers- small glass vials
crystal	loose powder to lumps, usually in any color from off-white to yellowish-tan to brown.	<ul style="list-style-type: none">- zip-lock plastic baggies- wrapped in aluminum foil bindles- joints
tablets, capsules	pale yellow or pink in color	<ul style="list-style-type: none">- in vials or bottles

Continued on next page

Dissociative Anesthetics (Phencyclidine), Continued

Method of use

PCP can be taken several ways:

Method	Technique
inhalation (most common)	<ul style="list-style-type: none">- commercial cigarettes are treated with PCP, then smoked- vegetable material treated with PCP and smoked as a cigarette or in a pipe
injection	<ul style="list-style-type: none">- injected into vein
intranasal	<ul style="list-style-type: none">- powder form inhaled into the nose (like cocaine)
orally	<ul style="list-style-type: none">- capsule or tablet form
transdermal	<ul style="list-style-type: none">- through mucus membranes and skin of the body

Cigarettes

Commercial cigarettes are usually dipped into liquid PCP. The most popular cigarettes are Shermans, Tijuana Smalls, Mores, and Kools.

Continued on next page

Dissociative Anesthetics (Phencyclidine), Continued

Powder

In a powder form, PCP may be sprinkled on tobacco or marijuana.

Signs and symptoms

PCP can cause impairments and a combination of effects produced by depressants, stimulants, and hallucinogens. Possible effects are shown in the chart below.

Vital Signs	How are they affected?
horizontal gaze nystagmus	present
vertical gaze nystagmus	present
lack of convergence	present
pupil reaction	normal
pupil size	normal
pulse rate	elevated
Romberg stand	distorted

Continued on next page

Dissociative Anesthetics (Phencyclidine), Continued

General indicators of use

A person taking PCP may exhibit the following symptoms:

- disorientation, sensory distortions and paranoia,
 - loss of memory or loss of a sense of personal identity,
 - noncommunicative or slow, slurred, repetitive, and/or fragmented speech,
 - blank or catatonic stare,
 - hallucinations,
 - chemical odor on person,
 - feeling of extreme heat or profuse perspiration,
 - high tolerance to pain,
 - cyclic behavior,
 - convulsions, and/or
 - muscle rigidity or an unusual gait.
-

Analogs

There are a number of **analogues** (drugs chemically similar) which produce the same effects as PCP.

One of these is Ketamine Hydrochloride, an anesthetic, which is widely and legitimately used in pediatric surgery. This analogue is marketed under the trade name “Ketalar” for human use and “Vetalar” for veterinary use.

Officer Safety Guidelines

Introduction Peace officers may encounter drug users. Drug users may behave differently based on the type of drug the user has taken. Drugs affect on a body may cause the user to become dangerous and violent. Officers should always exercise special caution in situations involving drugs.

Officer safety In the identification and apprehension of drug users under the influence of stimulants, some situations require special caution. Peace officers should be aware that:

- clandestine labs where certain stimulants are manufactured are extremely dangerous,
- many chemicals are dangerous to touch or breathe,
- drug-induced psychotic behavior can be dangerous,
- stimulant users are often armed,
- they should avoid touching cocaine or methamphetamine with their hands (*always wear rubber gloves*), and avoid sniffing the drugs, and
- they need to watch for exposed syringes and blood from fresh puncture wounds.

Safety precautions The apprehension of drug users under the influence of hallucinogens may require special caution. Peace officers should be aware that suspects could have suicidal tendencies.

Officer safety When dealing with suspected controlled substances, peace officers:

- should NOT taste, smell, or touch any substance that may appear to be LSD (wear rubber gloves). (It can be absorbed through the pores of the skin, cuts, mucus membranes (transdermal), or inhaled when a person is in the vicinity of a LSD lab), and
- should *always* wait for chemical control specialists.

Continued on next page

Officer Safety Guidelines, Continued

Safety precautions

In the identification and apprehension of drug users under the influence of heroin, some situations require special caution. Peace officers should:

- check for indications of overdose that may lead to death of the subject while in custody.
 - recognize that subjects going through withdrawal can be very agitated and violent.
-

Officer safety

When dealing with incidents involving heroin, peace officers should:

- watch for exposed syringes, and
 - refrain from sniffing, smelling, or tasting the drug.
-

Safety precautions

The apprehension of drug users under the influence of marijuana may require special caution. Peace officers should:

- watch for foods that may be tainted with marijuana or other drugs, and
 - consider that normal looking cigarettes may actually contain marijuana or other drugs.
-

Safety precautions

The apprehension of people using alcohol may require special caution. Peace officers should:

- be careful that subjects do not fall or injure themselves while performing divided attention tests.

NOTE: Alcohol can mask the presence of other controlled substances.

Continued on next page

Officer Safety Guidelines, Continued

Officer safety

When dealing with suspected alcohol situations, peace officers should be aware that:

- reduced inhibitions of intoxicated subjects with alcohol may result in unexpected episodes of violence.
 - alcohol combined with other controlled substances may lead to unpredictable violent reactions (synergism).
-

Safety precautions

The apprehension of drug users under the influence of depressants may require special caution. Peace officers should be aware of indicators of overdose.

Safety precautions

The apprehension of drug users under the influence of inhalants may require special caution. Peace officers need to confirm the medical condition of subjects and look for indicators of overdose.

Officer safety

When dealing with suspected inhalants situations, peace officers should not:

- smoke around solvents or in the vicinity of any inhaleable substances (they may be volatile and can explode), and
 - sniff inhalants in an attempt to identify the substance.
-

Continued on next page

Officer Safety Guidelines, Continued

Safety precautions

The apprehension of drug users under the influence of PCP may require special caution. Peace officers need to recognize that:

- the person may appear agitated and exhibit a combative behavior.
 - the individual experiences heightened sensitivity to auditory and visual stimuli such as lightbars, flashlights, sharp voice commands, and display of weapon.
 - the person has a high tolerance to pain.
 - exposures to PCP are cumulative and can cause long term ill effects. Some evidence suggests that PCP can be passed from mother to unborn child.
 - chemicals used in manufacturing are very volatile.
-

Officer safety

When dealing with potential PCP situations, peace officers should avoid touching or sniffing PCP to evaluate it (*always wear rubber gloves*).

Chapter Synopsis

Learning need To develop probable cause for possession of controlled substances, peace officers must be able to recognize what drug the person possesses.

Stimulants
[12.02.EO4,
12.02.EO11] Stimulants can appear as a powder or crystal (methamphetamine/
amphetamines), various colored pills or tablets (prescription stimulants), or
a cocaine base (rock) or cocaine powder.

Hallucinogens
[12.02.EO5,
12.02.EO11] Hallucinogens can be in a liquid or powder form and, if organic, in the
original form of fresh or dried caps or stems, buttons, or seeds.

**Narcotic
analgesics**
[12.02.EO6,
12.02.EO11] Heroin and opiates are some of the most commonly abused narcotic
analgesics. Its appearance varies.

Cannabis
[12.02.EO7,
12.02.EO11] Marijuana is the dried leaves or buds of the cannabis plant. Hashish and hash
oil are also products of the plant.

Depressants
[12.02.EO8,
12.02.EO11] Depressants can be in the form of capsules, tablets, liquid or pills. They are
usually packaged in baggies, bottles, or vials. The most commonly abused
depressant is alcohol.

Inhalants
[12.02.EO9,
12.02.EO11] Inhalants can be found in solvents (e.g., gasoline, paint thinner, airplane glue),
aerosols (e.g., spray paint), and anesthetic gases (e.g., ether, chloroform).

Continued on next page

Chapter Synopsis, Continued

**Dissociative
anesthetics
(phencyclidine)**
[12.02.EO10,
12.02.EO11]

PCP is the most common of dissociative anesthetics and can appear in the form of a:

- liquid - clear or yellow-colored,
- crystal - off-white to yellowish-tan, or
- tablet - pale yellow or pink.

PCP can be packaged using eyedroppers, bottles, ziploc baggies, aluminum foil, vials, or joints.

Workbook Learning Activities, Continued

**Activity
questions**
(continued)

7. Describe a Romberg test.

8. Describe the characteristics of a person who is under the influence of “magic mushrooms.”

Workbook Corrections

Suggested corrections to this workbook can be made by going to the POST website at: www.post.ca.gov

Chapter 3

Recognizing Elements of Crimes Involving Controlled Substances

Overview

Learning need Arrest and successful prosecution depend on the development of probable cause. Peace officers must know the elements required to arrest for violations of controlled substances statutes, and to categorize these crimes as misdemeanors or felonies.

Learning objectives The chart below identifies the student learning objectives for this chapter.

After completing study of this chapter, the student will be able to...	E.O. Code
<ul style="list-style-type: none">• recognize the crime elements required to arrest for:<ul style="list-style-type: none">- possession of drug paraphernalia, 12.03.EO13- being under the influence of a controlled substance 12.03.EO14- possession of a controlled substance, 12.03.EO15- possession of a controlled substance for sale, 12.03.EO16- transporting/selling/furnishing, etc., of a controlled substance, 12.03.EO17- cultivating or harvesting marijuana, 12.03.EO18- manufacturing a controlled substance, 12.03.EO19- possession of precursor chemicals for manufacturing. 12.03.EO20	
<ul style="list-style-type: none">• recognize the crime classification as a misdemeanor or felony.	12.03.EO21

Continued on next page

Overview, Continued

In this chapter This chapter focuses on identifying and classifying crimes involving controlled substances. Refer to the chart below for specific topics.

Topic	See Page
Probable Cause	3-3
Possession of Drug Paraphernalia	3-4
Being Under the Influence of a Controlled Substance	3-7
Possession of a Controlled Substance	3-11
Possession of a Controlled Substance for Sale	3-15
Transporting/Selling/Furnishing, etc., of a Controlled Substance	3-18
Cultivating or Harvesting Cannabis	3-22
Manufacturing a Controlled Substance	3-25
Possession of Precursor Chemicals for Manufacturing	3-27
Chapter Synopsis	3-29
Workbook Learning Activities	3-31

Probable Cause

Observable behavior

Officers will be able to establish elements of probable cause based on the following factors:

Observation of behavior and physical **signs** and **symptoms** of drug impairment and/or use.

Signs may be:

- Hyperactivity
- Impaired Gait
- Abandoning packages, objects, etc.
- Evasion/avoidance

Symptoms may be:

- excessive or constant scratching
 - physiological conditions
 - slurring
 - dry mouth
 - eye dilation problem
-

Associated paraphernalia

Recognition of paraphernalia associated with a controlled substance (drug):

Some examples are:

- Crack pipe
- needles
- spools
- eyedroppers

Recognition of the existence of controlled substances and / or evidence indicating transporting or sales of controlled substances.

Possession of Drug Paraphernalia

[12.03.EO13, 12.03.EO21]

Introduction

It is unlawful to possess *any device, contrivance, instrument, or paraphernalia* used for unlawfully injecting or smoking specific controlled substances.

Health and safety code section

Possession of drug paraphernalia is covered by *Health and Safety Code Section 11364*.

NOTE: It is legal to possess paraphernalia until it is used or intent to use is shown. To show specific intent to use, there must be the presence of evidence of prior use (e.g., residue)

Classification

Crime	Classification	<i>Health and Safety Code</i>
possessing a device for injecting or smoking a controlled substance other than marijuana	misdemeanor	11364

NOTE: Possession of a syringe without a prescription is a misdemeanor (*Business and Professional Code 4140*).

NOTE: Possession of syringe for needle exchange exception (*Health and Safety Code 11364.7*).

Continued on next page

Possession of Drug Paraphernalia, Continued

Example

Example: A legal search revealed the person was in possession of a bent spoon with residue, rubber tie-off strap, and cotton balls. The residue showed specific intent, and the person was in actual physical possession. The person had committed the crime of possession of drug paraphernalia, a misdemeanor.

Example: A person had a glass sucking pipe with cocaine residue. The residue showed specific intent and there was actual physical possession. The person had committed the crime of possession of drug paraphernalia, misdemeanor.

Example: A person was seen smoking a substance that appeared to be crack cocaine out of a make-shift pipe made from an aluminum can. Intent, possession, and knowledge were clear. If the substance was actually crack cocaine, or another controlled substance, the person had committed the crime of possession of drug paraphernalia, misdemeanor. (The person had also committed the crimes of possession of a controlled substance and use or being under the influence of a controlled substance.)

Continued on next page

Possession of Drug Paraphernalia, Continued

Examples
(continued)

Non-example: While handling a family disturbance, the officer found a glass pipe on a side-board with no residue. In fact, it appeared to be brand new. Without residue or the presence of supporting evidence, such as the controlled substance itself, intent to use cannot be shown. Therefore, the crime of possession of drug paraphernalia was not complete.

Non-example: A person left a “head-shop” with a glass pipe specially made for smoking cocaine. There were no other apparent indications of drugs. Again, this person has not committed the crime of possession of drug paraphernalia, since intent to use the pipe cannot be shown from the available evidence.

Being Under the Influence of a Controlled Substance

[12.03.EO14, 12.03.EO21]

Introduction

No person shall *use or be under the influence* of certain specified controlled substances except when administered by or under the direction of a person licensed by the state to dispense, prescribe, or administer controlled substances. Examples include opiates, phencyclidine, methamphetamine, cocaine hydrochloride, cocaine base, peyote, and mescaline.

Health and safety code section

Being under the influence of certain specified controlled substances is covered by *Health and Safety Code Section 11550*.

Crime elements

To arrest for being under the influence of a controlled substance, the necessary crime elements must include that a person has:

- knowledge of its presence,
 - control or willfully takes into his or her body a controlled substance, and
 - specific intent to inhale, inject, ingest, etc., a controlled substance.
-

Under the influence vs. use

As per *Health and Safety Code Section 11550*, both *being under the influence* and *use* of a controlled substance are considered violations. However, case law has established the meanings of the two terms differently.

- A person is considered to be *under the influence* if the controlled substance is affecting the **nervous system**, brain, muscles, or other parts of that person's body or if the substance is creating an abnormal mental or physical condition.
 - To establish *use*, it must be shown that, in an officer's presence, the suspect had recently used one of the controlled substances.
-

Classification

Using or being under the influence of a controlled substance is classified as a misdemeanor.

Continued on next page

Being Under the Influence of a Controlled Substance,

Continued

Intent to inhale volatile poisonous substances

Penal Code Section 381 covers any substance or material containing toluene, including, but not limited to, glue, cement, dope, paint thinner, paint, etc., and any combination thereof.

The elements of the crime include:

- any person who possesses or willfully ingests, inhales, or breathes fumes,
- of any poison as defined in *Schedule D of Section 4160 of the Business and Professions Code*, with
- intent to cause intoxication, elation, euphoria, dizziness, stupefaction, intoxication, or dulling of the senses.

NOTE: *Schedule D of Section 4160 of the Business and Professions Code* applies to other inhalants such as glue, cement, dope, paint thinner, and other hydrocarbons.

NOTE: *Penal Code Section 381b* has the same elements, but it refers to nitrous oxide.

Disorderly conduct

Penal Code Section 647(f) covers disorderly conduct while under the influence.

The elements of the crime include:

- any person,
 - found in any public place,
 - under the influence of intoxicating liquor, any drug, controlled substance, toluene, or any combination thereof,
 - in such a condition that he or she is unable to exercise care for his or her own safety or the safety of others, or
 - who interferes with or obstructs or prevents the free use of any street, sidewalk, or any other public way.
-

Continued on next page

Being Under the Influence of a Controlled Substance, Continued

Examples (continued)

The following examples illustrate the crime of being under the influence of a controlled substance.

Example: An officer arrived at a residence because of a domestic dispute and saw that the wife was hyperactive and had dilated pupils. A pipe commonly used to smoke crack cocaine was on the table. If tests show that the woman had cocaine in her system, she had committed the crime of being under the influence of a controlled substance.

Non-example: An officer saw a woman dancing in the street. As the officer approached, he noticed a heavy smell of alcohol on her breath. Tests determined that she was under the influence of marijuana and alcohol. These substances are not covered by the crime of being under the influence of a controlled substance. (However, if the woman is unable to care for her own safety or that of others, she could be arrested for disorderly conduct. (*Penal Code Section 647(f)*)

Continued on next page

Being Under the Influence of a Controlled Substance, Continued

Examples (continued)

The following examples illustrate the crime of possession of certain controlled substances while armed with a firearm.

Example: An officer stopped a vehicle for a traffic violation. While writing the ticket, the officer saw a shotgun on the back seat of the vehicle. After the officer determined the firearm was loaded, she continued to search the vehicle and found a bindle of cocaine. The officer arrested the man for the felony offense of possession of certain controlled substances while armed with a firearm.

Example: An undercover officer arrested a person for possession of methamphetamine. During the search, the officer found a loaded pistol in the man's sock. The person was arrested for possession of a controlled substance and possession of certain controlled substances while armed with a firearm, both felony offenses.

Non-example: Two officers entered a person's home with a warrant to search for stolen goods. During the search, one officer found a trace of cocaine in plain view on a coffee table. The officer also found an unloaded shotgun in the same room. Although the person is guilty of possession of a controlled substance, he is not guilty of possession of certain controlled substances while armed with a firearm because the firearm was not loaded.

Possession of a Controlled Substance

[12.03.EO15, 12.03.EO21]

Introduction

Every person who *possesses any controlled substance*, without the written prescription of a physician, dentist, podiatrist, or veterinarian licensed to practice in the state of California, has committed a crime.

Community policing

Law enforcement uses three distinct strategies to limit the illegal use and distribution of controlled substances. They are: enforcement methods, prevention and education techniques, and, in partnership with the community and other members of the criminal justice system, effective intervention programs.

Health and safety code section

Possession of a controlled substance is covered by a number of sections within the *Health and Safety Code*, depending on the controlled substance used and the amount.

The following chart lists the crimes related to possession of controlled substances with the classifications and the corresponding *Health and Safety Code* sections.

Substance and/or Quantity	Classification	<i>Health and Safety Code Section</i>
- heroin and other opiates - cocaine	felony	11350
- any usable amount of hash/hash oil (concentrated cannabis)	felony	11357(a)
- one ounce (28.5 grams) or less of marijuana *	Non- bookable misdemeanor	11357(b)

Continued on next page

Possession of a Controlled Substance, Continued

Health and
safety code
section
(continued)

Substance and/or Quantity	Classification	Health and Safety Code Section
- over one ounce (28.5 grams) of marijuana *	misdemeanor	11357(c)
- less than one ounce (28.5 grams) of marijuana on school grounds and person is 18 years of age or older *	misdemeanor	11357(d)
- less than one ounce (28.5 grams) of marijuana on school grounds and person is <i>under</i> 18 years of age *	misdemeanor	11357(e)
- unlawful possession of specified substances (methamphetamine, PCP, LSD, Rohypnol, etc.)	felony	11377

* for personal use only

Continued on next page

Possession of a Controlled Substance, Continued

Crime elements

To arrest a subject for the crime of possession of a controlled substance, the necessary crime elements include:

- actual control or constructive possession, and
- any amount (usable quantity).

NOTE: Usable quantity is a sufficient amount of the substance to be used as a controlled substance.

Possession

Possession is the act of having or taking control.

Constructive possession does not require actual possession, but does require that a person knowingly exercises control or the right to control an object, either directly or through another person or persons.

Supporting an arrest

Some circumstances that could support an arrest for the possession of a controlled substance are:

- statements from the subject,
 - drug residue in clothing (i.e., pockets) on person or in close proximity,
 - user paraphernalia (e.g., straws, syringe, spoons, razor blades, etc.),
 - objective symptoms of drug use.
-

Control or constructive control

Control or constructive control is when a person shows ownership of a controlled substance or object. This is corroborated by:

- actual physical possession,
 - presence in house, vehicle, purse, etc., of subject who is owner, renter, or lessee,
 - evidence supporting constructive control (e.g., keys, clothing, utility bills, vehicle registration, rental agreements, etc.), or
 - fingerprints.
-

Continued on next page

Possession of a Controlled Substance, Continued

Examples

Example: During a traffic stop a woman opened her purse in front of an officer to hunt for her driver's license. In the open purse, the officer observed approximately ½ ounce of marijuana. A record check revealed the woman had a previous arrest(s) for possession of controlled substances. The substance was confirmed to be marijuana. The woman committed the crime of possession of a controlled substance, a misdemeanor.

Example: Peace officers called to the scene of a domestic dispute discovered two lines of cocaine and a straw in plain sight on a coffee table. The cohabitants were both in the room. One or both parties (depending upon control of the substance) committed the crime of possession of a controlled substance, a felony.

Non-example: Peace officers were called to a shopping mall to investigate a report of disorderly conduct. They stopped a woman acting erratically, and they suspected drug use. The woman produced a bottle of prescription pain medication with her name on it. The woman did not commit the crime of possession of a controlled substance, even if she was misusing her prescription.

Possession of a Controlled Substance for Sale

[12.03.EO16, 12.03.EO21]

Introduction

Every person who possesses or purchases a controlled substance for sale or for the purpose of sale has committed a crime. **Possession for sale** differs from possession for personal use.

Health and safety code section

Possession or purchase of a controlled substance for sale is covered by a number of sections within the *Health and Safety Code*.

The following chart lists the crimes related to possession of controlled substances for sale, and the corresponding *Health and Safety Code* sections.

Crime	Classification	<i>Health and Safety Code Section</i>
possession or purchase for sale of controlled substance (heroin, cocaine, etc.)	felony	11351
possession of cocaine base for sale	felony	11351.5
possession for sale: marijuana or concentrated cannabis	felony	11359
possession for sale of specified prescription drugs (Valium, Lorazepam, etc.)	felony	11375
possession for sale: amphetamine or methamphetamine, LSD, Rohypnol, etc.	felony	11378
possession for sale of designated substances: PCP	felony	11378.5

Continued on next page

Possession of a Controlled Substance for Sale, Continued

Crime elements

To arrest a subject for the crime of possession of a controlled substance for sale, the necessary crime elements include:

- actual control or constructive possession,
 - specific intent, to sell, and
 - a quantity for sale.
-

Related terms

To understand the crime of possession of a controlled substance for sale, peace officers need to become familiar with the following terms.

Specific intent to sell indicates a person plans to receive money or any other consideration in exchange for a controlled substance. This is corroborated by:

- observation of subject's movements, behavior, characteristics, associates, and high volume of vehicle and pedestrian traffic at a specified location,
 - evidence such as packaging, scales, calculator, notebook, mathematical notations, cutting agents, denominations and location of U.S. currency, etc., and
 - a quantity available to sell.
-

Continued on next page

Possession of a Controlled Substance for Sale, Continued

Examples

- Example: A drug sniffing dog alerted officers to the gym bag of an attendee at a large outdoor rock concert. The contents of the bag included two zip-lock plastic bags, one full of a white powdery substance, apparently cocaine, and the other full of marijuana. The amounts within the bags were more than what would be reasonable for personal use. Based on the large quantity in each bag, if the substances were shown to be cocaine and/or marijuana, the person committed the crime of possession of a controlled substance for sale, a felony.
- Example: Peace officers were called to a college dorm room by one of two roommates. The occupant reported that his roommate had a dresser drawer full of bags of marijuana. Along with the marijuana in the drawer, officers found scales and peyote. If the roommate owning the dresser had knowledge of the marijuana, he committed the crime of possession of a controlled substance for sale, a felony.
- Non-example: During a traffic stop, an officer noticed a plastic bag containing approximately ½ gram of a substance (that later tested positive for cocaine) on the front seat of the car. The driver did not commit the crime of possession of a controlled substance for sale. She committed the crime of possession of a controlled substance.
-

Transporting/Selling/Furnishing, etc., of a Controlled Substance

[12.03.EO17, 12.03.EO21]

Introduction

Every person who *transports, sells, imports, furnishes, offers, administers, or gives away* any controlled substance in the state of California, unless upon the written prescription of a physician, dentist, podiatrist, or veterinarian licensed to practice in this state, has committed a crime.

Health and safety code section

Transporting/selling/furnishing/offering of a controlled substance is covered by numerous sections within the *Health and Safety Code*.

The following chart lists the crimes related to transportation/sales/furnish, etc., of controlled substances and the corresponding *Health and Safety Code* sections.

Crime	Classification	<i>Health and Safety Code Section</i>
transport, sale, give away, etc., of controlled substances: heroin, cocaine, etc.	felony	11352
transport, sale, furnish controlled substances: amphetamine and methamphetamine, LSD, ecstasy, etc.	felony	11379
transport, sale, furnish controlled substances: PCP	felony	11379.5
transport, sale, import, giveaway of marijuana and concentrated cannabis	felony	11360
substance provided in lieu of controlled substance	misdemeanor/ felony	11355

NOTE: Giveaway of less than one ounce of marijuana is a misdemeanor.

Continued on next page

Transporting/Selling/Furnishing, etc., of a Controlled Substance, Continued

Crime elements

To arrest a subject for the crime of transporting/selling/furnishing, etc., of a controlled substance, the necessary crime elements include:

- actual control or constructive possession,
 - specific intent to transport, sell, furnish, or offer, and
 - any amount (i.e., usable quantity).
-

Related term

To understand the crime of transporting/selling/furnishing/offering a controlled substance, peace officers need to become familiar with the following term:

Intent to transport a controlled substance specifically involves a vehicle, vessel, or aircraft. Some factors worth noting might be:

- vehicle registration,
 - maps or notes bearing destination,
 - indicators of cash purchases, such as, common carrier tickets and/or receipts (i.e., airline or bus),
 - hidden compartments.
-

Trafficking

There are many methods for smuggling controlled substances, shown in the following chart. Smuggling methods are only limited by the imagination.

If it is...	Some common trafficking methods might include:
commercial or wholesale quantities (multi-pounds),	<ul style="list-style-type: none">- private aircraft, vessel, vehicles,- commercial cargo,- body packs,- false bottom suitcases.
personal or smaller quantities,	<ul style="list-style-type: none">- attached to or in body cavities.

Continued on next page

Transporting/Selling/Furnishing, etc., of a Controlled Substance, Continued

False compartments

False compartment crimes are covered by *Health and Safety Code Section 11366.8*.

Possession of a false compartment occurs when:

- any person possesses, uses, or controls a false compartment, with
 - intent to store, conceal, smuggle, or transport,
 - a controlled substance.
-

Examples

Example:

A person was stopped as she tried to board a plane. Officers found more than 25 rocks of crack cocaine. The woman has committed the crime of transporting a controlled substance, a felony.

(NOTE: The quantity is sufficient also to arrest her for possession with intent to sell. She cannot be arrested for selling the cocaine, since no sale was completed.)

Example:

A man with a previous record of dealing drugs was seen passing out small paper tabs outside a local high school. He told officers that he was not “selling” anything; it was free. Analysis showed that the tabs contained LSD. The man has committed the crime of furnishing a controlled substance, a felony. He may be arrested even though no money changed hands.

Continued on next page

Transporting/Selling/Furnishing, etc., of a Controlled Substance, Continued

Examples
(continued)

Non-example: A person convicted of prior controlled substance offenses was seen on a street corner selling pills he had called “speed.” Lab tests revealed the pills to be over-the-counter diet pills. The dealer has not committed the crime of sale of a controlled substance since the diet pills are legal, but he did commit the crime of sales in lieu of controlled substance.

Cultivating or Harvesting Cannabis

[12.03.EO18, 12.03.EO21]

Introduction

Every person who *plants, cultivates, harvests, dries, or processes* any marijuana or any part thereof, except as otherwise provided by the law, has committed a crime.

Health and safety code section

Cultivating or harvesting marijuana is covered by *Health and Safety Code Section 11358*.

Crime elements

To arrest a subject for the crime of cultivating or harvesting marijuana, the necessary crime elements include that a person:

- has knowledge of its presence, and
 - physically plants, cultivates, harvests, dries, or processes any amount of marijuana.
-

Classification

Any unauthorized planting, cultivating, or harvesting of marijuana is classified as a felony.

Officer safety

Peace officers need to be aware that growers:

- have been known to use booby traps,
 - are often armed,
 - often have vicious dogs, and
 - early detection systems: alarms and/or video cameras.
-

Continued on next page

Cultivating or Harvesting Cannabis, Continued

Firearm violation

Every person who unlawfully possesses any amount of substance containing:

- cocaine,
- heroin,
- methamphetamine,
- phencyclidine that is crystalline, liquid, or a hand-rolled cigarette treated with phencyclidine,

while armed with (i.e., having available for immediate offensive or defensive use) a loaded, operable firearm is guilty of a felony. (*Health and Safety Code Section 11370.1*)

Examples

Example: The individual had a roommate who was growing marijuana plants. When the roommate went on vacation, she asked the person to water the plants. Because the person had knowledge of the plants and helped to cultivate them, she had committed the crime of cultivating or harvesting marijuana.

Non-example: The individual saw his neighbor watering his plants, most of which appeared to be vegetables. When he asked what kind of vegetable has such large leaves, his neighbor whispered that it was marijuana. Knowledge of the plants alone was not enough. The person will only complete the crime of cultivating or harvesting marijuana if he helps with the growing, harvesting, or processing.

Continued on next page

Cultivating or Harvesting Cannabis, Continued

Examples
(continued)

Non-example:

The person was living with his grandmother. He was growing marijuana in the basement. Because she couldn't climb stairs, she never knew about the plants. The grandmother did not commit the crime of cultivating or harvesting marijuana since she had no knowledge and did not participate in the care, harvest, or processing of the plants.

Manufacturing a Controlled Substance

[12.03.EO19, 12.03.EO21]

Introduction

Every person who *manufactures, compounds, converts, produces, derives, processes, or prepares, either directly or indirectly by chemical extraction or independently by means of chemical synthesis*, any controlled substance has committed a crime.

Health and safety code section

Manufacturing a controlled substance is covered by *Health and Safety Code Section 11379.6(a)*.

Crime elements

To arrest a subject for the crime of manufacturing a controlled substance, the necessary crime elements include that a person:

- has knowledge of its presence, and
 - is engaged, either directly or indirectly, in the manufacturing, conversion, production, or preparation of a controlled substance.
-

Classification

Manufacturing a controlled substance is classified as a felony.

Manufacturing

Evidence of manufacturing or preparing a controlled substance by chemical synthesis may come from:

- precursor chemicals used to make controlled substances,
 - laboratory equipment (i.e., chemicals, glassware, electrical devices, etc.) ,
 - receipts, literature, or formulas,
 - associates,
 - prior arrests, or
 - statements of admission/consciousness of guilt.
-

Continued on next page

Manufacturing a Controlled Substance, Continued

Examples

Example: The individuals were discovered attempting to make methamphetamine by combining muriatic acid with elemental iodine and mini-thins. Since they were actively engaged in manufacturing, they had committed the crime of manufacturing a controlled substance.

Example: A search warrant served at a residence revealed a supply of glassware, filter papers, tubing, chemicals, and a bi-layered solution containing methamphetamine. The equipment and chemicals were evidence of manufacturing a controlled substance. It was reasonable to believe that a resident of the home had committed the crime of manufacturing a controlled substance, though not all residents may have had knowledge of the activity.

Non-example: A child had an extensive chemistry set that contained glassware, tubing, and a variety of chemicals. Since the set was used to conduct legal experiments, the user did not commit the crime of manufacturing a controlled substance.

Possession of Precursor Chemicals for Manufacturing

[12.03.EO20, 12.03.EO21]

Introduction

Any person who possesses certain *precursor chemicals with the intent to manufacture* controlled substances has committed a crime.

Health and safety code section

Possession of precursor chemicals for manufacturing is covered by *Health and Safety Code Section 11383*.

Crime elements

To arrest a subject for the crime of possession of precursor chemicals for manufacturing, the necessary crime elements include:

- knowledge of their presence, and
 - possesses specified precursor chemicals, with
 - intent to manufacture controlled substances.
-

Classification

Possession of precursor chemicals for manufacturing purposes is classified as a felony.

Related term

To understand the crime of possession of precursor chemical for manufacturing, peace officers must understand the following term.

Precursor chemical is a substance from which another substance is formed.

Continued on next page

Possession of Precursor Chemicals for Manufacturing, Continued

Examples

- Example: During a “knock and talk,” the suspect was found to be in possession of ephedrine and hydrogen gas as well as glassware, electrical equipment, and chemical formulas for methamphetamine. Since ephedrine is the key precursor chemical for methamphetamine, the suspect had committed the crime of possession of precursor chemicals for manufacturing.
- Example: During a traffic stop a subject was found to be in possession of several bottles of ephedrine tablets and a recipe for manufacturing methamphetamine. Again, ephedrine is the key precursor to methamphetamine, and the recipe showed the subject’s knowledge of its purpose and intent. The subject had committed the crime of possession of precursor chemicals for manufacturing.
- Non-example: An officer serving a search warrant discovered chemicals, used to make soap. There was no intent to manufacture controlled substances, and the correct chemicals were not involved. No crime has been committed.
-

Chapter Synopsis

Learning need Arrest and successful prosecution depend on the development of probable cause. Peace officers must know the elements required to arrest for violations of controlled substances statutes, and to categorize these crimes as misdemeanors or felonies.

Possession of drug paraphernalia It is unlawful to *possess an opium pipe or any device, contrivance, instrument, or paraphernalia* used for unlawfully injecting or smoking a controlled substance.

[12.03.EO13,
12.03.EO21]

Possession of drug paraphernalia is covered by *Health and Safety Code Section 11364*.

Being under the influence of a controlled substance

[12.03.EO14,
12.03. EO21]

Being under the influence of a controlled substance is covered by *Health and Safety Code Section 11550*.

Possession of a controlled substance

[12.03.EO15,
12.03.EO21]

Possession of a controlled substance is covered by a number of sections within the *Health and Safety Code*, depending on the controlled substance used and the amount.

Possession of a controlled substance for sale

[12.03.EO16,
12.03.EO21]

Possession or purchase of a controlled substance for sale is covered by a number of sections within the *Health and Safety Code*.

Continued on next page

Chapter Synopsis, Continued

**Transporting/
selling/
furnishing of
a controlled
substance**
[12.03.EO17,
12.03.EO21]

Transporting, selling, furnishing or offering of a controlled substance is covered by numerous sections within the *Health and Safety Code*.

**Cultivating
or harvesting
marijuana**
[12.03.EO18,
12.03.EO21]

Cultivating and harvesting marijuana is covered by *Health and Safety Code Section 11358*.

**Manufacturing
a controlled
substance**
[12.03.EO19,
12.03.EO21]

Manufacturing a controlled substance is covered by *Health and Safety Code Section 11379.6*.

**Possession
of precursor
chemicals for
manufacturing**
[12.03.EO20,
12.03.EO21]

Possession of precursor chemicals for manufacturing is covered by *Health and Safety Code Section 11383*.

Workbook Learning Activities, Continued

Student notes

Chapter 4

Clandestine Laboratories

Overview

Learning need Peace officers need to recognize the existence of an illegal manufacturing site for controlled substances based on observations, upon discovery, and take the appropriate actions. They need to know how to protect themselves and the public from the potential problems associated with a clandestine laboratory.

Learning objectives The chart below identifies the student learning objectives for this chapter.

After completing study of this chapter, the student will be able to...	E.O. Code
• identify the characteristics of a clandestine laboratory.	12.04.EO2
• identify types of clandestine laboratory.	12.04.EO4
• identify the required safety precautions when securing a clandestine laboratory.	12.04.EO3

Continued on next page

Overview, Continued

In this chapter

This chapter focuses on identifying clandestine laboratories. Refer to the chart below for a specific topic.

Topic	See Page
Identifying Characteristics of Clandestine Laboratories	4-3
Types of and Detecting Clandestine Laboratories	4-5
Hazards of a Clandestine Laboratory	4-7
Chapter Synopsis	4-8
Workbook Learning Activities	4-9

Identifying Characteristics of Clandestine Laboratories

[12.04.EO2]

Introduction

A **clandestine laboratory** is an illegal operation that produces a controlled substance through a chemical process.

Dangers associated with identifying clandestine laboratories

It is essential that peace officers understand the inherent danger surrounding any laboratory investigation. The following chart lists these dangers.

Source of danger	Result of danger
chemicals	extremely toxic and may be highly volatile
fire	may produce extremely toxic and carcinogenic fumes
inhalation	can cause immediate poisoning or cancer in future years
inadvertent chemical mixture or spark	can cause an explosion or fire
suspect's actions	can be life threatening

NOTE: Unless an emergency exists, there is no valid reason for peace officers to enter a clandestine laboratory.

Location of clandestine laboratories

Clandestine laboratories can be found anywhere. The locations are frequently determined by the convenience of chemical sources and access to wholesale drug distribution points.

- open areas,
 - homes,
 - automobile trailers, motor homes, rental moving trucks,
 - motel rooms, and
 - rental storage.
-

Continued on next page

Identifying Characteristics of Clandestine Laboratories,

Continued

Initiating an investigation into clandestine laboratories

An investigation involving a clandestine laboratory can be initiated by a call from the public in the area.

If the sources are...	their reasons for calling may be because they...
the public,	noticed an unusual chemical odor in the neighborhood and noticed unusual car/foot traffic.
criminals,	wanted to provide information on chemical suppliers, drug dealers, and laboratory operators.
peace officers,	noticed an unusual odor, saw an unusual structure, or obtained information from routine contacts.
fire department	responded to an explosion or fire.

Types of and Detecting Clandestine Laboratories

[12.04.E04]

Introduction

Peace officers need to be aware of the different types of clandestine laboratories.

Types of clandestine laboratories

Clandestine laboratories (labs) may be categorized into three general types:

Type of Laboratory	Description
operational	These labs actively produce drugs.
nonoperational	These labs are set up to produce drugs, but are not operating; all of the necessary chemicals or vital pieces of apparatus may/may not be present.
boxed labs	These labs are “boxed”; they are not set up to produce drugs because the chemicals and apparatus are packed away.

NOTE: No matter what type of lab, they are all dangerous. Peace officers need to be aware of the possibility of explosion, atmospheric contamination, exposure to toxic chemicals or wastes, booby traps, and armed subjects.

Continued on next page

Types of and Detecting Clandestine Laboratories, Continued

Laboratory configurations

There is a variety of laboratory configurations. The following chart describes the two most common types.

For...	the equipment may include...
Sophisticated ,	<ul style="list-style-type: none"> • beakers, funnels, flasks, condenser tubes, • heating mantles, vacuum pumps, rubber tubing, and filter papers.
Rudimentary ,	<ul style="list-style-type: none"> • various pots, pans, jars, • a simple kitchen stove, hot plates, and microwaves.

Common indicators of possible existence of a lab

There are several indicators as evidence of a clandestine laboratory in the vicinity. The following chart lists these indicators and items to be observed.

If the indicator is...	the peace officer should...
strong or unusual odors,	note any unusual chemical odors not common to that particular area.
chemical cans or drums,	check if the cans/drums are marked with chemical names or are painted out.
lab waste (i.e., used coffee filters, Red Devil lye cans, blister packs,	note unusually large amounts of empty containers and packages.
ice,	look for frequent deliveries of ice in unusually large quantities.

Hazards of Clandestine Laboratories

[12.04.EO3]

Introduction

Responsibility for the safety of our communities demand that peace officers have a thorough understanding of the dangers associated with clandestine laboratories.

Qualified safety personnel

Only *qualified personnel* should enter the laboratory. They are responsible for the detection of possible dangerous chemicals as well as the safe dismantling of the laboratory. Curiosity of unauthorized persons can result in contamination of the scene or possible personal/public injury.

- **DO NOT TOUCH ANYTHING**
 - If officers have inadvertently entered a clandestine laboratory, they must immediately consider the dangers inherent in such a situation, including that the lab may be protected by booby traps.
 - If it is determined that a clandestine laboratory exists, officers should immediately withdraw and notify the appropriate response team.
 - Officers should establish a safe perimeter and limit access.
 - Personnel/officers who have entered the scene may be subject to decontamination. (e.g., removal of uniform, showering, etc.)
 - It is crucial that officers do not tamper with or move lab equipment or chemicals.
-

Chapter Synopsis

Learning need Peace officers need to recognize the existence of an illegal manufacturing site for controlled substances based on observations, and upon discovery, take the appropriate actions. They need to know how to protect themselves and the public from the potential problems associated with a clandestine laboratory.

Characteristics of clandestine laboratories [12.04.EO2] Clandestine laboratories are mostly small-time operations which process an unsophisticated product; the operator usually does not have a chemistry background and is often a controlled substance abuser.

Identifying types of clandestine laboratories [12.04.EO4] Officers need to be aware of the different types of clandestine laboratories that may be categorized into three general types.

Required safety precautions when securing a clandestine laboratory [12.04.EO3] It is the peace officers' responsibility to protect the scene and preserve evidence.

Workbook Learning Activities

Introduction

To help you review and apply the material covered in this chapter, a selection of learning activities has been included. No answers are provided. However, by referring to the appropriate text, you should be able to prepare a response.

Activity questions

1. A peace officer on patrol is flagged down by an approximately 40-year-old woman. She explains that she has seen strange people behind her apartment building at all hours of the night, and she is worried. She also said that she has noticed some strange smells that she thinks may be giving her daughter headaches. What actions should the officer take, based on this neighbor's information? What precautions should the officer take while conducting any investigation?

Continued on next page

Chapter 5

Report Writing

Report Writing

Introduction

Like any other report, a controlled substance report, documents the facts. However, the facts in this type of report can be subject to interpretation by a peace officer who has the proper **training, experience and education**. Additionally, this interpretative process requires that a peace officer have **intellectual integrity**. Let's look at these concepts individually.

A peace officer's **training, experience, and education** is founded in California Evidence Code 720, which says:

- a) A person is qualified to testify as an expert if he has special knowledge, skill, experience, training, or education sufficient to qualify him as an expert on the subject to which his testimony elates. Against the objection of a party, such special knowledge, skill, experience, training, or education must be shown before the witness may testify as an expert.

- (b) A witness' special knowledge, skill, experience, training, or education may be shown by any otherwise admissible evidence, including his own testimony.

This means that if you have the knowledge and the skill that sufficiently sets you apart from an average person's knowledge - in a particular subject matter - you can make judgments about behaviors or evidence to form an opinion and conclusion that makes sense about what happened within a particular situational context.

Continued on next page

Report Writing, Continued

Intellectual integrity

Ethics refers to your responsibility when making these interpretations. This means that when you examine the information you receive (facts, data, and evidence) you use it accurately and relevantly within the situation's context. In other words, not only do you need to accurately record all the facts pertinent to the incident to support your case, but also information that doesn't connect to the behaviors of evidence that is known to you. As peace officers, we have the responsibility not to leave out, distort or fabricate any information. We must weigh every piece of information relevantly within our training, experience and education to support an opinion and conclusion.

The ability to accurately and ethically make interpretations begins in the academy and is ongoing throughout your career. Any training, experiences or education you receive, that provides you with the knowledge and ability to perform skillfully, in regards to controlled substances or any other particular subject matter - qualifies you to make opinions and conclusions.

Interpreting information is only half the process. Coupled with subject matter expertise, a peace officer must be able to effectively write about what was investigated and how an opinion and conclusion was formed. If the report does not clearly articulate this - the case may be dismissed.

Continued on next page

Report Writing, Continued

Three levels of training, experience and education

When writing a controlled substance report, there are three internal levels that connect to your experience, training and education. The first level is the language that is unique to controlled substances. You must be proficient in this language - it's part of your "special knowledge" that can establish credibility. Know how to use terminology or concepts related to:

- Current "Street Slang"
- Controlled Substances
- Usable Quantity
- Possession For Sale, Transporting, or Furnishing
- Objective Symptoms (Effect and Affect)
- Methods of Ingesting
- Drugs/Narcotics

The second level is the ability to convey that you investigated within legal authority such as:

- Probable Cause
- Contact, Detention and Arrest
- Reasonable Suspicion
- Possession (Control or Constructive Control)
- Search and Seizure
- Consent
- Plain Smell
- Plain View
- Intent

The third level is validating that your training and experience has provided you with a system to assess facts, make sense of those facts (judgment), and support your opinions and conclusions.

Continued on next page

Report Writing, Continued

Writing the report

When a peace officer comes into contact with a violation of controlled substances, it will most likely happen in one of three ways:

1. Dispatch will provide you with information reported to them anonymously or by an identified reporting party;
2. You will observe directly (on-view) the incident while in the performance of your duties;
3. Someone will report the information to you

When you become aware of a possible controlled substance violation always accurately record the initial information given to you or observed by you, either mentally or by writing it down. This is critical because it contains specific information, at the awareness level, which engages your investigative frame of mind. Reasonable suspicion and probable cause can be built from this point as you continue to gather more information.

As you consider the following scenario, pay close attention to how the facts, data, and evidence connect behaviors together and integrate training, experience, and education for the purpose of establishing that “criminal activity may be afoot,” otherwise known as opinions and conclusions.

Continued on next page

Report Writing, Continued

Scenario

You are on duty and in uniform. Dispatch gives you the following information.

Respond to Bill's Liquors - 247 Monument Street - an anonymous report of a person possibly selling marijuana in front of the store. The RP - a female - was leaving the Liquor store after buying cigarettes. The RP said she was approached by a WMA who asked if she wanted to buy some "bud." The WMA showed her a sandwich-size baggie with "dried green leaves." The RP ignored the WMA, got in her car and called the PD from her cell phone while driving home. The time of occurrence was approximately 2035 hours. The RP described the WMA as 6' - 210lbs - shaved head - wearing a black leather jacket - white t-shirt with a sports team logo - blue jeans - white tennis shoes - time of dispatch 2040 hours. No further information - no other units available.

You arrive at Bill's Liquors at 2050 hours. You make a tactical approach to an area where you can view the liquor store undetected. You see a WMA about 5-10, 190, with a shaved head, wearing a white t-shirt with a Los Angeles Lakers logo on the front. The suspect is holding a black leather jacket in his right hand and is wearing blue jeans and white running shoes with black parallel strips on the sides.

You watch the suspect for a few minutes. A WMJ, who is skateboarding on the sidewalk, approaches the suspect and talks with him. The suspect walks over to a nearby tree where a crumpled grocery sack is laying on the ground. He reaches into the bag and removes a plastic baggie and shows it to the WMJ. The suspect talks with the WMJ. The WMJ shakes his head left and right as if to indicate "no." The WMJ then skates away on his skateboard. The suspect shrugs his shoulders and puts the plastic baggie back in to the grocery sack. The suspect walks back to the front of the Liquor store.

You continue watching the suspect. Two people go in and out of the liquor store, but the suspect does not approach or talk to them. You approach the suspect to investigate.

Continued on next page

Report Writing, Continued

Scenario (continued)

As you get close to the suspect, he starts to walk away. You tell him to “stop” and he complies. He asks why you stopped him. You tell him you are investigating him for possible sales of a controlled substance. He turns and starts to walk away again. You grab his left arm and tell him to stop. He complies and you handcuff him.

You seize the paper bag you saw earlier and open it. It contains four sandwich-size baggies with a substance that you believe may be marijuana. You arrest the suspect for sales of a controlled substance and read the Miranda rights. You book the suspect and the evidence.

The narrative

I was dispatched at 2040 hours to Bill’s Liquors at 247 Monument Street regarding a report of a WMA possibly selling a controlled substance. I was in an authorized department uniform and driving a marked department patrol vehicle. According to dispatch, an anonymous female RP, who had just purchased some cigarettes at the liquor store, was approached by a WMA on the sidewalk in front of the liquor store. The WMA asked the RP if she wanted to buy some “bud” (I know “bud” is a common “street” term for marijuana). According to the RP the WMA showed her a “sandwich-size baggie” (I know this is how marijuana is commonly packaged for “street” sales), and said the baggie contained “dried green leaves” (I know “dried green leaves” is consistent with the color and texture of marijuana). The RP described the WMA as 6’, 210 lbs, shaved head, wearing a black leather jacket with a white tee shirt with a sports team insignia (unknown team), blue jeans and white tennis shoes.

I arrived in the area of Bill’s Liquors at 2050 hours. I parked in the rear alley behind 251 Monument Street which is two buildings west of Bill’s Liquors. I took a position at the southwest corner of 251 Monument Street where I could be undetected and gain a full unobstructed view of the front of Bill’s Liquors.

Continued on next page

Report Writing, Continued

**The
narrative**
(continued)

I saw a WMA, later identified as John Miller, standing about 40 yards west of where I was standing. Miller closely matched the description given by the RP. Miller was approximately 5-10, 190 lbs, with a shaved head, wearing a white t-shirt with a Los Angeles Lakers Logo, holding a black leather jacket in his right hand, wearing blue jeans and white running shoes with black parallel strips on the sides. Miller was standing in front of Bill's Liquors on the sidewalk about ten feet west of the front entrance. I watched Miller for approximately five minutes with the purpose of looking for behaviors indicative of controlled substance sales, such as money and product exchanges.

At about 2055 hours I saw a WMJ skateboarding westbound on the sidewalk about 30 yards east of the suspect. The WMJ skateboarded to the suspect, stopped, and talked with him. After about 30 seconds of conversation, Miller placed the black leather jacket he was holding on the ground next to him, and walked over to a tree approximately twenty feet west of where he was standing. The tree was in a raised cement planter on the sidewalk. Beneath the tree, laying on the dirt inside the planter was a crumpled paper bag about the size of a standard grocery sack. I saw Miller open the bag and remove a sandwich-size plastic baggie with his right hand.

Miller waked back over to the WMJ and showed him the baggie that he retrieved from the paper bag. I saw the WMJ look at the baggie in Miller's right hand and exchange conversation with him for about 20 seconds. The WMJ shook his head back and forth as if to indicate "no." The WMJ then turned his skateboard around and skateboarded eastbound on the sidewalk. Miller shrugged his shoulders as if he was disappointed or confused.

Continued on next page

Report Writing, Continued

**The
narrative**
(continued)

Miller walked back over to the same tree as noted above and placed the plastic baggie back in the paper bag with his right hand and rolled down the top of the bag to close it. Based on these behaviors, I believed Miller was attempting to conduct an illegal controlled substance sale. I know it is common for a person selling a controlled substance not to have possession of it on their person, but rather in a different location to be deceptive. Additionally, the sandwich sized baggie is consistent with the packaging of marijuana.

I watched Miller for approximately another four minutes. He stood at the front of the liquor store in the same location as before. I saw two people (both were WMA's) enter and exit the liquor store during this four-minute time period. However, Miller did not approach or speak to either of them.

I approached Miller by walking directly east on the sidewalk from point of observation. Miller did not see me until I was about twenty-five feet west of him. When he saw me, he immediately turned from me and started to slowly walk eastbound on the sidewalk. I said, "Hey, stop, I need to talk to you." Miller replied, "What did I do?" I continued to walk toward Miller and stopped about four feet from him. I told Miller he was being detained for possible sales of a controlled substance (marijuana). He replied, "I don't sell drugs man," then turned and started to walk away eastbound again. I reached out with my right hand and grabbed Miller's left arm and told him to, "stop." Miller immediately complied and I handcuffed him for my safety, realizing that it is common for persons who sell controlled substances to carry concealed weapons, and because Miller tried to walk away from me twice.

Continued on next page

Report Writing, Continued

**The
narrative**
(continued)

I patted down Miller's outer clothing, specifically looking for weapons, and found none. I escorted Miller over to the tree that was twenty feet west from where Miller had been standing earlier. I asked Miller to sit on the sidewalk, handcuffed, with his legs crossed, and he complied. I recovered the crumpled paper bag located under the tree from which Miller had retrieved a plastic baggie earlier. I opened the bag and saw four sandwich-size baggies inside. I examined one of the baggies. It was three quarters full of dried green leaves. I saw marijuana seeds in the bottom of the baggie. I could smell the odor of marijuana as I examined the other baggies in the paper bag.

Based on the training and education I received in the academy and advanced officer training - the packaging (plastic sandwich-size baggie) - the appearance, shape and green color of the dried leaves - the seeds - the smell - and my experience making prior arrests for possession and sales of marijuana, I determined the substance in the four baggies was marijuana.

I also determined that Miller possessed the marijuana for sale. This was based on the original dispatch information received from the RP and its consistency with possible drugs sale activity, plus my observation of Miller interacting with the WMJ on the skateboard and retrieving a baggie of marijuana from the crumpled paper sack under the tree as noted above.

I told Miller that he was under arrest for possession of marijuana for sale. I read Miller of his Miranda rights from a department approved card. Miller invoked his rights by stating, "I got nothing to say, get me a lawyer."

Continued on next page

Report Writing, Continued

The narrative (continued)

I searched Miller's person and found \$220.00 (in a combination of five, ten and twenty dollar bills) rolled up in his right pants pocket. See the property report for details. Having this sum of money in these various denominations is also consistent with marijuana sales.

During my search of Miller, I also found a valid California Driver's License identifying the suspect as John R. Miller, D.O.B. 08-15-75.

We'll stop here. The report would continue with where the suspect was booked, and by whom, the evidence documentation, the disposition of the WMJ on the skateboard, lab analysis, etc. What's important is to notice how the incident was documented - up to this point - and how the officer coupled and interjected his training and experience to form opinions and conclusions. Once on the witness stand the officer will be asked more specific questions.

Remember, not only do you thoroughly document the facts, but you must also thoroughly document the necessary interpretations that justify your decisions and actions, that are consistent with controlled substance behaviors that would otherwise appear innocent to a layman. This is your professional expertise in action.

Documenting objective symptoms

When you come into contact with people whom you suspect of being under the influence of a controlled substance, their objective symptoms can indicate the type of controlled substance they have ingested. So what is an objective symptom? An objective symptom is any sensation or change in a physiological function associated with a particular controlled substance.

As a trained peace officer, you should thoroughly describe and interpret the objective symptoms to articulate the type of controlled substance(s) being used. Through a systematic (deductive) approach, similar to field sobriety tests, you can clarify the specific facts related to these symptoms to support your opinion, conclusions, to make decisions and actions.

Continued on next pager

Report Writing, Continued

Document objective symptoms (continued)

When you document objective symptoms:

- Use language that is descriptive, precise and accurate. Stay away from language that is subject to the reader’s interpretation. Don’t just simply write that a suspect was “nervous” or “had a dry mouth” or “was disoriented,” state the origin of your observations and use language that is specific. Create a clear picture of what happened so the reader can use their own senses to visualize the symptoms. (see the examples below)
 - Explain how each symptom works synergistically. In other words, consider each symptom as one “part” of a group of symptoms that cooperates with the other symptoms to produce or enhance each fact toward a logical conclusion or inference.
 - Only use language you can understand and explain in court. If you can’t explain it, don’t use it. Otherwise, your credibility may be at stake.
-

Documentation Examples

Each controlled substance causes objective symptoms that are general (physiological or behavioral) indicators of its influence. Below are a few report writing documentation examples of specific symptoms and behaviors. These examples are not exclusively written. They can be written in a variety of different writing styles. Check with your LD 12 instructor for other writing techniques regarding this type of documentation.

Injection site (track marks)

I looked at the subject’s arms for any indication of injection sites. I found a slightly raised area on the subject’s upper left forearm near the inside elbow area. I saw clear fluid coming out of the skin and a red dot that appeared to be from a fresh injection site. I also saw three small scabs along the visible vein under the skin near this injection site. Based on my training and experience from the basic academy, I recognized this as an injection site. I have seen photographs of such injection sites and know that it is a common practice to inject narcotics, such as heroin, in an intravenous fashion.

Continued on next page

Report Writing, Continued

Use of a pupilometer (reaction to light)

When I arrived at the County Jail, I took the subject into a separate room and explained to him, I was going to conduct an eye examination in several different lighting conditions. I used a Pupilometer that is a series of measured black dots with 0.5 millimeter (mm) increments between 1.0mm and 9.0mm on a card and a small penlight.

With the room light on, I held the Pupilometer alongside the front of the subjects face on both the right and left side near his eye. I found the following measurement estimates in both eyes: Room light: 8.0mm

I turned off the lights and had the subject close his eyes and keep them closed for one minute. I used my watch and penlight to check the time and insure that the subject kept his eyes closed. I covered my penlight with my thumb emitting only a small amount of light through my skin to measure the subject's pupil reaction along with the Pupilometer card. I recorded the following pupil measurements: Near total darkness: 9.0mm

I took a measurement in the dark room with the direct lighting of my penlight and Pupilometer card. This involved placing the Pupilometer card alongside the head, as previously described, and then filling the eye socket with direct light from the penlight held about six inches away from the eye being measured. In each eye, I saw the pupil react slightly and reducing to the following measurement: Direct light: 7.5mm

Based upon my training, experience and education, I knew that pupil measurements found above 6.5mm are dilated and consistent with Central Nervous System (CNS) stimulant influence such as methamphetamine, cocaine, etc.

NOTE: Another example would be for constricted pupils which might be below 3.0mm in all lighting conditions.

Continued on next page

Report Writing, Continued

Pulse rate

During my contact with the subject, I took his pulse rate three different times. First, I measured the subject's pulse rate at the scene of my stop at 1915 hrs. I measured the pulse from his wrist area and timed this pulse rate for one minute. I found his pulse rate to be 140 per minute. I know that normal pulse is 60 to 90 per minute.

My second measurement of the subject's pulse rate was at the County Jail just before conducting my pupil dark room examination at 1935 hrs. I found the pulse rate to be 145 per minute.

The third pulse measurement was taken just after the conclusion of the dark room examination and the ingestion and injection site inspection at 1945 hrs. I found the pulse rate to be 125 per minute.

My conclusion was that the subject's pulse rate was elevated at all times. This is consistent with CNS Stimulant influence

Disorientation

During my contact and conversation with the subject I found him to be disoriented. The subject was unable to tell me where he was, how he got where he was, or where he was going. At times, the subject was non-communicative and did not answer simple questions I asked, such as what is your name, when were you born, and where were you born? At one point, the subject answered the question: "What is your name?" after I asked the question: "When were you born?" The subject continued to answer the questions in this manner for about three to four minutes. The subject then began to answer other simple questions in a lucid manner. A few minutes later the subject became non-communicative again and had a blank stare. After about 30 seconds of a blank stare, the subject asked me: "What is the problem?" and "Where am I?"

Based on my experience, training and education, the behaviors and mannerisms demonstrated by the subject was consistent with PCP influence.

Continued on next page

Report Writing, Continued

Dry mouth

During my contact with the subject, he kept trying to swallow and had white crust in the corners of his mouth. His voice seemed “hoarse” while speaking with me and he kept asking for a drink of water.

Standardized field sobriety testing

During my contact with the subject, I saw that his eyes were bloodshot and his speech was slurred. I could smell the odor of an alcoholic beverage coming from his person while standing approximately five feet from him. I decided to perform a series of standardized field sobriety tests that measure the subject’s ability to follow simple instructions that are measured in two phases, the instruction phase and performance phase. These tests included the following:

Horizontal Gaze Nystagmus (HGN)

I asked the subject to stand with his feet and toes together and face me with his hands by his side while listening to my directions. I asked him if he understood. He said, “Yes.”

I explained that he needed to follow, with his eyes, the tip of my two-colored pen while I passed it in front of his face, and to concentrate on the tip of the pen. I asked the subject if he understood. He said, “Yes.” During the instruction phase the subject separated his feet and I had to tell him to put his feet back in the position of heels and toes together.

I conducted the HGN test. I found that the subject had equal tracking in both eyes, but a lack of smooth pursuit. The subject displayed HGN at the extreme in both eyes and I measured HGN to be present at an angle of onset of 35 degrees in both eyes. These signs during the HGN examination are consistent with alcohol and CNS Depressant influence.

Continued on next page

Report Writing, Continued

**Standardized
field sobriety
testing**
(continued)

Romberg Balance and Time Estimate

I asked the subject to stay in the heel and toe together position during the instruction phase. I asked him if he understood. He said, “Yes.” The subject separated his feet once during the instruction phase and was told to get back into the instruction position. I told the subject that he was to close his eyes and tilt his head back slightly staying heels and toes together with his hands by his sides while estimating 30 seconds. The subject was told to bring his head forward and open his eyes when he thought 30 seconds had passed. I asked the subject if he understood and he said, “Yes.”

I had him begin as I checked my watch. I saw the subject sway slowly about one inch side-to-side, and forward and back. The subject did not open his eyes until 60 seconds. I found this observation to be consistent with alcohol and CNS Depressant influence.

One Leg Stand

I asked the subject to stand in the instruction position while I gave him the instructions. I asked him if he understood. He said, “Yes.” Again, the subject separated his feet and I instructed him to get back into the instruction position.

I explained to the subject that he was to raise his right foot straight with his toe pointed up about four to six inches off the ground and to count from one thousand one to one thousand thirty, while keeping his arms by his sides. He was to then perform the same while raising his left foot. I asked the subject if he understood. He said, “Yes.” I had the subject begin. I saw the subject raise his arms about 12 inches to maintain his balance and he dropped his right foot at 14 and 25 during the count.

I then asked the subject to perform the same raising his left foot. Again he raised his arms about 12 inches for balance and dropped his foot during the count of 22.

I found his performance to be consistent with alcohol and CNS Depressant influence.

Continued on next page

Report Writing, Continued

**Standardized
field sobriety
testing
(continued)**

Finger to Nose

I asked the subject to stand in the instruction position while I gave him the instructions. I asked him if he understood. He said, “Yes.” Again the subject separated his feet and I instructed him to get back into the instruction position.

I explained to the subject that he was to extend his index finger on each hand, bring his arms in front of him about 18 inches away from his body, and turn his hands and arms palms up. I then told the subject to stay in the position while I explained the rest of the instructions. I told the subject that I would have him close his eyes and tilt his head back slightly. I told the subject that I would call out either his left or right hand and that he was to touch the tip of his index finger to the tip of his nose and then put his hand back in the starting position. I asked the subject if he understood. He said, “Yes.”

I asked the subject to tilt his head back and close his eyes. I called out the following for each finger to nose to be performed: Left - right - left - right - left.

During the performance of this test, I saw the subject sway slowly about one inch side to side and forward and back. The subject slightly missed each tip to tip touch and he did not return his hand back to the starting position until I told him to. He performed the test with each hand as follows: Left - right - left - right - left - right which was incorrect. I had him come back into the instruction position.

I found his performance to be consistent with alcohol and CNS Depressant influence.

Walk and Turn

I asked the subject to stand in the following instruction position. I had the subject stand on an imaginary straight line by placing his right foot in front of his left foot heel to toe and stay in that position with his hands by his sides while I gave him the rest of the instructions. I asked him if he understood. He said, “Yes.”

Continued on next page

Report Writing, Continued

**Standardized
field sobriety
testing**
(continued)

During the instruction phase the subject stepped out of the instruction position two times. I had him get back into the instruction position.

I explained, and demonstrated to the subject, that he was to walk heel to toe, nine steps out and make a slow turn with small steps and take nine steps heel to toe back while announcing the number of his steps out loud and keeping his arms by his side. I asked the subject if he understood. He said, "Yes."

I then asked the subject to begin. During the performance the subject raised his arms 12 to 18 inches from his side for balance, had about two-inch gaps between his heel to toe, did not call out loud the steps, took eight steps out, and spun and stumbled on the turn taking seven steps back.

I found his performance to be consistent with alcohol and CNS Depressant influence.

The link

When the facts and their patterns, coupled with your interpretive process, are effectively documented, the readers of your reports should be able to draw informed conclusions as to what happened and feel as though they were at the scene experiencing what you experienced.

This chapter has only covered the basics of writing an effective controlled substance report. There is more you will need to know. Check with your LD12 instructor for additional information you can obtain, and training you can attend, to enhance your report writing within this subject matter.

Continued on next page

Report Writing, Continued

Student notes

Supplementary Materials

Controlled Substances Weight Conversions

Weight conversions

The following chart lists the metric, Standard American Equivalents (S.A.E.), and the street names for different weights of controlled substances.

Metric weight	S.A.E.	Street names
.25 grams	1/114 oz	quarter
.50 grams	1/57 oz	half
.85 grams	1/32 oz	half tenth
1.0 grams	1/28.5 oz	gram
1.75 grams	1/16 oz	sixteenth/tenth/teeners
3.5 grams	1/8 oz	8-ball
7 grams	1/4 oz	Q-oz
14 grams	½ oz	Half oz
28 grams	ounce	ozer
114 grams	1/4 pound	Q-lb
227 grams	half pound	½-lb
454 grams	one pound	1 lb

Principal Narcotic & Drug Enforcement Sections

H.S. = Health and Safety Code B.P. = Bus. & Prof. Code P.C. = Penal Code F = Felony M = Misdemeanor F/M = Wobbler DRUG TRADE NAME and Generic	Possession	For Sale	Transport for Sale	Adult inducing a minor	Forgery	Sales in lieu of
AMPHETAMINES Biphedamine Dexedrine Dexamyl Eskatrol	H.S.11377 F/M	H.S.11378 F	H.S.11379 F	H.S.11380 F	B.P.4324 F/M	H.S.11382 F/M
BARBITURATES Amytal Nembutal Seconal Tuinal Phenobarb	H.S.11377 F/M	H.S.11378 F	H.S.11379 F	H.S.11380 F	B.P. 4324 F/M	H.S.11382 F/M
CODEINE 1. Codeine - Pure 2. Codeine Compounds a. Tylenol w/ codeine b. Empirin w/ codeine c. Phenaphen w/ codeine 3. Cough Syrups w/ Codeine a. Robutussin A.C. b. Terpin Hydrates	H.S.11350 F H.S.11350 F H.S. 11350 F	H.S.11351 F H.S.11351 F H.S. 11351 F	H.S.11352 F H.S.11352 F H.S. 11352 F	H.S.11353 F H.S.11353 F H.S. 11353 F	H.S.11368 F/M H.S.11368 F/M H.S. 11368 F/M	H.S.11355 F H.S.11355 F H.S. 11355 F

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Principal Narcotic & Drug Enforcement Sections, Continued

H.S. = Health and Safety Code B.P. = Bus. & Prof. Code P.C. = Penal Code F = Felony M = Misdemeanor F/M = Wobbler DRUG TRADE NAME and Generic	Possession	For Sale	Transport for Sale	Adult inducing a minor	Forgery	Sales in lieu of
COCAINE 1. HCL 2. Base	H.S.11350 F	H.S.11351 F H.S. 11351.5 F	H.S.11352 F	H.S.11353 F	H.S.11368 F/M	H.S.11355 F
DARVON	H.S. 11350 F	H.S. 11351 F	H.S. 11352 F	H.S. 11353 F	H.S. 11368 F/M	H.S. 11355 F
DEMEROL	H.S. 11350 F	H.S. 11351 F	H.S. 11352 F	H.S. 11353 F	H.S. 11368 F/M	H.S. 11355 F
DILAUDID	H.S. 11350 F	H.S. 11351 F	H.S. 11352 F	H.S. 11353 F	H.S. 11368 F/M	H.S. 11355 F
GHB	H.S.11377 F	H.S.11378 F	H.S.11379 F	H.S.11380 F	N/A	H.S.11382 F
HEROIN	H.S.11350 F	H.S. 11351 F	H.S.11352 F	H.S.11353 F	N/A	H.S.11355 F
L.S.D.	H.S.11377 F	H.S.11378 F	H.S.11379 F	H.S.11380 F	N/A	H.S.11382 F/M
MESCALINE	H.S.11350 F	H.S.11351 F	H.S.11352 F	H.S.11353 F	N/A	H.S.11355 F
METHAMPHET-AMINE	H.S.11377 F/M	H.S.11378 F	H.S.11378 F	H.S.11380 F	B.P.4324 F/M	H.S.11382 F/M
MORPHINE	H.S.11350 F	H.S.11351 F	H.S.11352 F	H.S.11353 F	H.S.11368 F/M	H.S.11355 F

Continued on next page

Principal Narcotic & Drug Enforcement Sections, Continued

H.S. = Health and Safety Code B.P. = Bus. & Prof. Code P.C. = Penal Code F = Felony M = Misdemeanor F/M = Wobbler DRUG TRADE NAME and Generic	Possession	For Sale	Transport for Sale	Adult inducing a minor	Forgery	Sales in lieu of
MARIJUANA Concentrated a. Hashish b. Hashish Oil 1 ounce or less More than 1 ounce	H.S. 11357a F/M	H.S.11359 F	H.S.11360 a F Give away H.S.11360 b M	H.S.11361 F	N/A	H.S.11355 F
	H.S. 11357b M cite rel.	H.S.11359 F	H.S.11360 a F	H.S.11361 F	N/A	H.S.11355 F
	H.S. 11357c M	H.S.11359 F	H.S.11360 a F Give away H.S.11360 b M	H.S.11361 F	N/A	N/A
MARIJUANA Cultivation of	H.S.11358 F	N/A	N/A	N/A	N/A	N/A
PHENCYCLIDINE "PCP"	H.S.11377 F/M	H.S. 11378.5 F	H.S. 11379.5 F	H.S. 11380.F F	N/A	H.S.11382 F/M

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Principal Narcotic & Drug Enforcement Sections, Continued

H.S. = Health and Safety Code B.P. = Bus. & Prof. Code P.C. = Penal Code F = Felony M = Misdemeanor F/M = Wobbler DRUG TRADE NAME and Generic	Possession	For Sale	Transport for Sale	Adult inducing a minor	Forgery	Sales in lieu of
PERCODAN	H.S.11350 F	H.S.11351 F	H.S.11352 F	H.S.11353 F	H.S.11368 F/M	H.S.11355 F
PEYOTE	H.S.11350 F	H.S.11351 F	H.S.11352 F	H.S.11353 F	N/A	H.S.11355 F
PRELUDIN	H.S.11377 F/M	H.S.11378 F	H.S.11379 F	H.S.11380 F	B.P.4324 F/M	H.S.11382 F/M
PSILOCYBIN	H.S.11377 F/M	H.S.11378 F	H.S.11379 F	H.S.11380 F	N/A	H.S.11382 F/M
PSILOCYBIN Cultivation of	H.S.11390 F	N/A	N/A	N/A	N/A	N/A
ROHYPNOL	H.S.11377 F	H.S.11378 F	H.S.11379 F	H.S.11380 F	N/A	H.S.11382 F/M
RITALIN	H.S.11377 F/M	H.S.11378 F	H.S.11379 F	H.S.11380 F	B.P.4324 F/M	H.S.11382 F/M
TALWIN	H.S.11350 F	H.S.11351 F	H.S.11352 F	H.S.11353 F	H.S.11368 F/M	H.S.11355 F
TRANQUILIZERS i.e., LIBRIUM VALIUM	H.S. 11377(b) B.P.4060 M	H.S. 11375(b) F/M	Sales only H.S. 11375(b)	N/A	B.P.4324 F/M	H.S.11382 F/M

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Principal Narcotic & Drug Enforcement Sections, Continued

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Glossary

Introduction **The following glossary terms apply only to Learning Domain 12:
Controlled Substances.**

addiction The physical/psychological dependence on a drug

analogs Drugs that are chemically similar

cannabis The dried leaves or buds of the cannabis plant

central nervous system (CNS) Central nervous system is the system of nerves which make up the brain and spinal cord

clandestine laboratory A secretive, illegal operation that produces a controlled substance through a chemical process

constricted pupil The narrowing of the pupil diameter to a width less than 2.9 mm

control or constructive control An indication of ownership of a controlled substance or an object

constructive possession Control that does not require *actual possession*, but does require that a person knowingly exercises control, or the right to control an object, either directly or through another person or persons

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Glossary, Continued

controlled substances	Drugs whose general availability is restricted; any one of a number of drugs or other substances which are strictly regulated or unlawful because of their potential for abuse or addiction
dependence	The psychological or physiological state resulting from the interaction between the body and a drug that may alter, over time, the production of certain hormones or neurotransmitters
depressants	A category of drugs that suppresses nervous system activity
dilated pupil	The widening of the pupil diameter to a width greater than about 6.5 mm
dissociative anesthetics	A category of analgesic drugs that affect changes in sensory perceptions and visual hallucinations (like hallucinogens)
drugs	Any substance which can impair a person's ability to function normally or operate a motor vehicle safely
drug abuse	The illegal use of a controlled substances or excessive use of any other drug
hallucinogen	A category of drugs that induces intense emotional states characterized by distortions of sensory perceptions
homeostasis	The dynamic balance or steady state involving levels of salt, water, sugars, and other materials in the body fluids

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Glossary, Continued

**horizontal
gaze
nystagmus**

The involuntary jerking of the eyes horizontally (side-to-side)

inhalants

A category of drugs that, introduced into the body via the respiratory system, can produce a feeling of excitement and intoxication

**intent to
transport**

An intent to transport a controlled substance using a vehicle, vessel, or aircraft

**lack of
convergence**

The eyes do not converge or cross in order to focus on an object as it moves toward the subject's face

**narcotics
(analgesics)**

A category of drugs including either opiates or opioids. Their major medicinal function is to be used as an analgesics (pain suppressant); "illicit use" may produce a sense of euphoria

**nervous
system**

The (central) nervous system (CNS) is the system of nerves which make up the brain and spinal cord; they send messages to and from the brain

**neuro-
transmitters**

Chemicals which transmit nerve messages across synaptic gaps (gap between two neurons)

nystagmus

The involuntary jerking motion (i.e., changing directions) of the eyeballs

**overdose
(OD)**

The excessive consumption of a drug; many times this can be fatal

Continued on next page

Glossary, Continued

possession for sale	A large quantity of controlled substances or a useable amount with a set of circumstances which indicate an intent to sell
paraphernalia	An opium pipe or any device, contrivance, instrument, or paraphernalia used for unlawfully injecting or smoking specific controlled substances (<i>Health and Safety Code 11364</i>)
possession	The act of having or taking into control
precursor chemical	A substance from which another substance is formed
pulse rate	The speed at which one's heart beats
pupil reaction	The speed, if any, at which one's pupils react to light stimulus
pupil size	The size to which one's pupils change in response to light stimulus
Romberg test	A field sobriety test that uses an individual's estimate of elapsed time to determine whether the body clock is normal, too slow, or too fast
stimulants	A category of drugs that enhances or stimulates the central nervous system
synergism effect	The effect when two or more substances are used which result in an effect that each substance could not reach on its own

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Glossary, Continued

synesthesia

The transposing (crossing) of the senses (e.g., hearing colors and seeing sounds)

THC

The active ingredient in cannabis. Marinol and dronabinol are synthetic forms of THC

Tolerance

The body's resistance to a drug

**vertical
gaze
nystagmus**

The involuntary jerking of the eyes vertically (up and down)
