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**ARIZONA DRUG RECOGNITION EXPERT PROGRAM**

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BEGINNING OF THE DRE PROGRAM

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

Is an individual is impaired? Are drugs involved?

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

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

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

**THE DRE PROGRAM IN ARIZONA**

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

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

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

**THE 7 DRUG CATEGORIES**

##### Central Nervous System (CNS) Depressants

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

##### CNS Stimulants

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

##### Hallucinogens

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

##### Dissociative Anesthetics

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

##### Narcotic Analgesics

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

##### Inhalants

Inhalants include a wide variety of breathable substances that produce mind-altering results and effects.

Examples of inhalants include Toluene, plastic cement, paint, gasoline, paint thinners, hair sprays and various anesthetic gases.

##### Cannabis

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

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

**THE 12-STEP DRE PROTOCOL**

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

1. ***Breath Alcohol Test***

The arresting officer reviews the subject's breath alcohol concentration ( BrAC) test results an d determines if the subject's apparent impairment is consistent with the subject's BrAC. If so, the officer will not nor mall y call

a D R E. If the impairment is notexplained by the Br AC, the officer requests a D R E evaluation.

1. ***Interview of the Arresting Officer***

The D R E begins the investigation by reviewing the Br AC test results an d discussing the circumstances of t he

arrest with the arresting officer. The D R E asks about the subject's behavior, appearance, and driving. The D R E also asks if the subject made any statements regarding drug use and if the arresting officer(s) found any other relevant evidence consistent with d r u g use.

1. ***Preliminary Examination and First Pulse***

The DR E conducts a preliminary exam nation, in large part, to ascertain whether the subject ma y be suffering from an injury or other condition u nr elated to d rugs. Accordingly, the D R E asks the subject a series of standard questions relating to the subject's health a n d recent ingestion of food, alcohol and d rugs, including prescribed medications. The D R E observes the subject's attitude, coordination, speech, breath and face. The D R E also

determines if the subject's pupils are of equal size a n d if the subject's eyes ca n follow a moving stimulus and track equally. The DR E also looks for horizontal gaze Nystagmus (HGN) and takes the subject's pulse for the first of three times. The DR E takes each subject's pulse three times to account for nervousness, check for

consistency and determine if the subject is getting worse or better. If the DR E believes that the subject *may* be suffering from a significant medical condition, the D R E will seek medical assistance immediately. If the D R E

believes that the subject's condition is drug-related, the evaluation continues.

1. ***Eye Examination***

The DR E examines the subject for HG N, vertical gaze Nystagmus (VGN) and for a lack of ocular convergence. A subject lacks convergence if his eyes are unable to converge toward the bridge of his nose when a stimulus is moved inward. Depressants, inhalants, and dissociative anesthetics, the so-called “DID drugs”, may cause

HGN. In addition, the DID drugs may cause VGN when ta ken in higher doses for that individual. The DID drugs, as well as cannabis (marijuana), may also ca use a lack of convergence.

1. ***Divided Attention Psychophysical Tests***

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

1. ***Vital Signs and Second Pulse***

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

1. ***Dark Room Examinations***

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

Finally, the DRE examines the subject's nasal and oral cavities for signs of drug ingestion.

### **Examination for Muscle Tone**

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

### **Check /or Injection Sites and Third Pulse**

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

### **Subject's Statements and Other Observations**

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

### **Analysis and Opinions of the Evaluator**

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

### **Toxicological Examination**

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

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



**ARIZONA DRUG RECOGNITION TRAINING PROGRAM**

**DRUG RECOGNITION EXPERT PROGRAM**

# TRAINING PROGRAM

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

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

The training relies heavily on the Standardized Field Sobriety Tests (SFST’s), which provide the foundation for the

DEC Program. Once trained and certified, DREs become highly effective officers skilled in the detection and identification of persons impaired by alcohol and/or drugs. DREs are trained to conduct a systematic and standardized

12-step evaluation consisting of physical, mental and medical components.” (excerpt taken from the website:

The International Drug Evaluation and Classification Program, page: Drug Recognition Experts DRE Certification and Training Section, <http://www.decp.org/training/)>