

**TOWN OF READING**

**ALCOHOL AND DRUG  
TESTING POLICY**

This policy was adopted by Peter Hechenbleikner, Town Manager, and is effective as of June 7, 2006.

## **Introduction**

The following is the policy of the Town of Reading regarding testing associated with alcohol misuse and drug use by those employees operating motor vehicles which require a Commercial Drivers' License. Any employee of the Town of Reading whose job requires a Commercial Drivers' License must be covered by this policy. A discussion of the physical effects of alcohol and certain drugs on the body is included as well. The terms alcohol misuse, drug use and substance abuse are used interchangeably in this document. The name and telephone number of the person who can answer any questions you may have about the alcohol and drug rules and assist you in substance abuse situations appears on the last page of this policy.

## **Terms and Abbreviations**

BAT	Breath Alcohol Technician
CDL	Commercial Drivers' License
CMV	Commercial Motor Vehicle
DHHS	Department of Health and Human Services
DOT	Department of Transportation
EAP	Employee Assistance Program
EBT	Evidential Breath Testing
MRO	Medical Review Officer
NIDA	National Institute on Drug Abuse
us	The Employer
you	The Driver/Employee

## **Definitions**

### **Alcohol**

The intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohol including methyl and isopropyl alcohol.

### **Alcohol Concentration**

Also called alcohol content, the alcohol in a volume of breath, (expressed as grams of alcohol per 210 liters of breath) as indicated by an evidential breath test, such as a breathalyzer.

### **Alcohol Use**

The consumption of any beverage, mixture of preparation, including medications, containing alcohol.

### **Breath Alcohol Technician (BAT)**

An individual who instructs and assists individuals in the alcohol testing process and operates an evidential breath testing (EBT) device.

**Certified Laboratory**

Laboratory certified under the Department of Health and Human Services "Mandatory Guidelines for Federal Workplace Drug Testing Programs."

**Chain of Custody**

Those procedures employed to account for the integrity of each specimen by tracking its handling and storage from point of specimen collection to final disposition. These procedures require that an appropriate drug testing chain of custody form from a DHHS/NIDA certified laboratory be used from the time of collection to receipt by the testing laboratory.

**Collection Site**

A clinic or other location (including a mobile unit) designated by the employer where the covered employee may present himself or herself for the purpose of providing a specimen of his or her urine to be analyzed for the presence of drugs or for providing a breath sample to be analyzed for the presence of alcohol.

**Collection Site Person or Collector**

A person who instructs and assists employees at a Collection Site and who receives and performs a screening test of the urine specimen provided by the employees.

**Commercial Motor Vehicle (CMV)**

Any self-propelled or towed vehicle used on public highways to transport passengers or property when:

- a. The vehicle has a gross vehicle weight or gross combination weight rating of 26,001 or more pounds; or
- b. The vehicle is designed to transport more than sixteen passengers including the driver; or
- c. The vehicle is used in the transportation of hazardous materials in a quantity requiring placarding under regulations issued by the Department of Transportation pursuant to the Hazardous Materials Transportation Act.

**Confirmation Test**

*In alcohol testing:* a second test, following a screening test with a result of 0.02 or greater, that provides quantitative measurement of alcohol concentration.

*In drug testing:* a second test to identify the presence of a specific drug or metabolite. In order to ensure reliability and accuracy, this test is separate from and uses a different technique and chemical principle from that of the alcohol screening test.

### **Controlled Substances**

In this booklet, the terms "drugs" and "controlled substances" are interchangeable and have the same meaning. Unless otherwise provided, these terms refer to:

- marijuana,
- cocaine,
- opiates,
- phencyclidine (PCP),
- amphetamines, including methamphetamines.

### **DHHS**

The Department of Health and Human Services or any designee of the Secretary of the Department of Health and Human Services.

### **DOT Agency**

An agency (or operating administration) of the United States Department of Transportation administering regulations requiring alcohol and/or drug testing.

### **Driver**

Any person who operates a commercial motor vehicle, (CMV) including:

- full-time, regularly employed drivers,
- casual, intermittent or occasional drivers,
- leased drivers,
- independent, owner-operator contractors who are either directly employed by or under contract to an employer or who operate a commercial motor vehicle (CMV) at the direction of or with the consent of an employer.

### **Evidential Breath Testing Device (EBT)**

A device used for alcohol breath testing that has been approved by the National Highway Safety Administration.

### **"Fail a Drug or Alcohol Test" or "Test Positive"**

In connection with drug testing, the confirmation test results providing evidence of the presence of a drug in the employee's system; or in connection with alcohol testing, a quantitative confirmation test result showing an alcohol concentration of 0.02 or greater.

### **Initial Test**

An immunoassay screen to eliminate "negative" urine specimens from further consideration or an EBT test used for screening tests.

### **Medical Review Officer (MRO)**

A licensed physician (medical doctor or doctor of osteopathy) responsible for receiving laboratory results generated by an employer's drug testing program. The MRO must have knowledge of substance abuse disorders and appropriate medical training to

interpret and evaluate an individual's confirmed positive test, medical history and other relevant biomedical information.

### **NIDA Certified Laboratory**

The National Institute on Drug Abuse (NIDA) was established by the Department of Health and Human Services (DHHS) in 1986 to regulate laboratories performing analytical tests (drug tests) on human body fluids for employment purposes in the public sector.

### **"Pass a Drug or Alcohol Test" or "Test Negative"**

In connection with drug testing, the initial testing does not show evidence of the presence of a drug in the employee's system; or in connection with alcohol testing, an initial test which shows an alcohol concentration below 0.02.

### **Screening Test**

*In alcohol testing:* the initial test to determine if a driver has a prohibited concentration of alcohol in his or her system.

*In drug testing:* a screen to eliminate "negative" urine specimens from further consideration.

### **Specimen**

A urine specimen, in the case of drug testing; or a breath sample, in the case of alcohol testing. A photo I.D. is required incident to both a urine sample and a breath sample.

### **Substance Abuse**

Refers to patterns of substance use that result in health consequences or impairment in social, psychological and occupational functioning.

### **Substance Abuse Professional (SAP)**

A licensed physician (medical doctor or doctor of osteopathy) or a licensed or certified psychologist, social worker, employee assistance professional, or certified addiction counselor with knowledge of and clinical experience in the diagnosis and treatment of alcohol and controlled substance-related disorders. The SAP decides how many follow up tests will be done after a violation of this policy but he/she does not benefit financially in any way from the follow-up testing that is performed by the Collection Site Person or Collector.

### **WHO IS COVERED BY THE ALCOHOL AND DRUG RULE?**

The Federal Highway Administration, Department of Transportation Alcohol and Drug ruling applies to every person who operates a commercial motor vehicle (CMV) in interstate or intrastate commerce, and is subject to the commercial driver's license (CDL) requirements of part 383.

## WHAT IS A SAFETY-SENSITIVE FUNCTION?

A safety-sensitive function is defined as including any of the following circumstances and/or activities:

- at a carrier plant or shipper plant, terminal or facility, or other property, or on any public property, waiting to be dispatched, unless the driver is relieved from duty by the employer;
- inspecting service brakes, including trailer brake connections, parking (hand) brakes, steering mechanism, lighting devices and reflectors, tires, horn, windshield wipers, rear vision mirrors, coupling devices, fire extinguisher, spare fuses, or warning devices for stopped vehicles;
- inspecting, servicing, or conditioning any CMV in operation;
- at the driving controls of a CMV in operation;
- while in or upon any CMV, except when resting in a sleeper berth;
- supervising or assisting in loading or unloading a vehicle;
- attending a vehicle being loaded or unloaded;
- while in readiness to operate the vehicle;
- when giving or receiving receipts for shipments loaded or unloaded;
- performing the driver requirements of Sections 392.40 and 392.41 of part 392, Driving Motor Vehicles, relating to accidents;
- repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle.

## WHAT ARE THE ALCOHOL AND DRUG PROHIBITIONS?

The DOT refers to the restrictions for the use of both alcohol and controlled substances as *prohibitions*.

**Alcohol prohibitions** are tied to the performance of safety-sensitive functions in the following ways:

1. A driver may not report for duty or stay on duty
  - a. with a blood alcohol concentration of 0.02 or greater;
  - b. if in possession of alcohol (unless it is being transported as cargo);

**NOTE:** *this includes any product (medication, food or other product) containing alcohol, regardless of the alcohol content.*

  - c. if using alcohol;
  - d. within four hours of using alcohol.
2. A driver who has an accident may not use alcohol until post-accident testing is done or for a period of eight hours, whichever comes first.
3. Drivers cannot refuse to submit to alcohol testing.
4. Employers who know about any of the above acts cannot permit the driver to perform a safety-sensitive function.
5. It is recommended that all employees inform their health care providers that they are subject to random alcohol and drug testing.

The Federal Highway Administration bans the use of **controlled substances** by drivers.

### **Drug Prohibitions:**

1. Drivers may not report for duty or stay on safety-sensitive duty while using any controlled substance. There may be an exception to this ruling if a physician has prescribed a controlled substance and has advised you that it does not interfere with your ability to operate a vehicle in a safe manner. The employee is required to notify the supervisor that he/she is using the prescribed controlled substance.
2. Drivers may not report for duty or stay on duty if they have tested positive for a controlled substance.
3. Employers who know about either of the above acts cannot permit the driver to perform a safety-sensitive function.

### **WHAT TESTS ARE REQUIRED AND WHEN WILL I BE TESTED?**

There are five situations where testing can be done to determine the presence of alcohol and/or drugs.

#### **1. Pre-employment**

**When:** Before a new hire can perform any safety-sensitive duties or when a person transfers into a safety-sensitive function from elsewhere in the municipality.

**Note:** *No person will be considered for a Driver's position who has had a positive drug and/or alcohol test within two years of his or her application.*

#### **2. Post-accident**

**When:** Following an accident where

- a life was lost;
- the driver was cited for a moving traffic violation

Post-accident alcohol testing should be done within two hours of the accident. If a test cannot be done within eight hours, it probably will not be done. Post-accident drug testing shall be done within 32 hours, or not done at all.

Employees required to be tested pursuant to this section who refuse to submit a specimen or who test positively will be immediately suspended without pay and subject to discipline.

#### **3. Random**

Unannounced **random testing** is required on a certain percentage of drivers each year.

**How:** The random selection process used shall ensure that each driver has an equal chance of being tested each time selections are made.

**When:** Drivers are randomly selected from the pool. Random testing for alcohol shall be completed just before, during or immediately after performing safety-sensitive work. Random testing for drugs may be done at any time you are at work. Once you are notified that you have been selected for random testing, you must report to the test site at the assigned time.

Random testing is done as follows:

- 25% of all drivers shall be randomly tested for alcohol during the first year of the testing program. The number to be randomly tested in following years depends on

the percentage of positive tests for the entire industry. In 2005, 10% of all drivers were randomly tested for alcohol.

- 50% of drivers shall be randomly tested for controlled substances during each year of the testing program.

#### **4. Reasonable suspicion:**

**When:** If your supervisor has reason to believe that your behavior or appearance may indicate alcohol or drug use.

Testing for reasonable suspicion is based on:

- the observances of a trained supervisor;
- specific, clearly stated observations concerning the driver's appearance, behavior, speech or body odor;
- observations made for alcohol testing shall be made just before, during, or just after the performance of a safety-sensitive function.

#### **Important points:**

- The supervisor who makes the observation and determines that reasonable suspicion testing should be done, may not conduct the alcohol test on the driver.
- Alcohol testing for reasonable suspicion must be done within two hours of the observation. Tests that cannot be done within eight hours of the observation shall not be done.
- You cannot report for duty or stay on the job while under the influence of alcohol or while impaired by alcohol as shown by behavior, speech or performance that indicates alcohol misuse. You will not be allowed to continue to perform safety-sensitive duties until:

Your alcohol concentration is less than 0.02

**or**

24 hours have passed from the time of the initial observation.

- Action regarding alcohol misuse cannot be taken against a driver unless an alcohol test was administered or was refused by the driver.

#### **5. Return to duty and follow-up**

##### **When:**

- Return to duty testing is required for drivers who violate prohibitions and are returning to work. In order to return to work, an alcohol concentration of less than 0.02 or a negative drug test is required.
- Follow-up testing is required when a driver returns to a safety-sensitive function. At least six tests shall be performed during the first year back in a safety-sensitive position. The substance abuse professional decides how many follow up tests shall be done. Follow-up testing may continue for up to five years.
- All return to duty testing and follow-up testing will be done at the employee's expense and by a vendor chosen by the Town of Reading. As of January 2006, the cost of an alcohol test is \$25.00 and a drug test is \$65.00.

## WHAT HAPPENS IF I REFUSE TO BE TESTED?

As part of the alcohol and drug rule, you must submit to alcohol and drug testing. If you refuse to be tested, you cannot continue on the job.

Refusal to test is considered to be any time you either fail to provide enough breath for alcohol testing or enough urine for controlled substances testing without a valid medical reason after being notified of the testing requirements, or if you clearly obstruct the testing process.

## HOW IS ALCOHOL TESTING DONE?

1. All alcohol testing is done by a certified Breath Alcohol Technician, or BAT, in a private setting where no one but you and the BAT can see or hear the test results. An evidential breath testing device (EBT) approved by the National Highway Safety Administration must be used.
2. The BAT will ask you for identification. You may ask for the BAT's identification as well.
3. To complete the test, you must blow forcefully into the mouthpiece of the testing device. The BAT must show you the test result on the testing device.
4. A screening test is done first. If the reading is less than 0.02, you will sign the certification and fill in the date on the form. The test will be reported as negative to the employer.
5. If the reading is 0.02 or greater, a confirmation test must be done (after 15 minutes but within 20 minutes of the first test). You will be asked not to eat, drink, belch or put anything in your mouth. These steps prevent the buildup of mouth alcohol, which could lead to an artificially high result.
6. If the screening and confirmation test results are not the same, the confirmation test result is used.

**If you refuse to be tested or to sign the testing form, the BAT will immediately notify your employer.**

## HOW IS DRUG TESTING DONE?

1. Drug testing is done by analyzing a urine sample, which is collected in a private location.
2. Urine specimens are divided into two containers by the collection site person - in your presence. These two samples, called "primary" and "split", are sent to a testing laboratory certified by the Department of Health and Human Services. (DHHS).
3. At the laboratory, a screening test is performed on the primary sample. If this test is positive for drugs, a confirmation test is required.
4. The confirmation test must use a specialized procedure called gas chromatography/mass spectrometry, to ensure that over-the-counter drugs are not reported as positive.
5. If the first test is positive, the Medical Review Officer (MRO) will notify you to find out if there is a medical reason for the drug use. If you can document why the substance

is being taken and the MRO finds it is a legitimate-medical use, the test may be reported as negative to the employer.

6. After being notified that the first test was positive, you have 72 hours to request a test of the split specimen. If you make this request, the split specimen is sent to another DHHS-certified lab for the test.

a. If you do not contact the MRO within 72 hours but can prove to the MRO that you had a legitimate reason for not doing so, the MRO can order the split specimen tested.

**Removal from safety-sensitive duty as required by the DOT following a positive drug test is not delayed to await the result of the split specimen test.**

7. If the analysis of the split sample does not confirm the presence of a drug, the MRO cancels the test and reports this to the DOT, to the employer, and to you.

8. If the analysis of the split sample does not confirm the presence of a drug, the Town will pay the cost of the test of the split sample; if the analysis of the split sample does confirm the presence of a drug, the employee will pay the cost of the test of the split sample.

9. If the analysis of the split sample does not confirm the presence of a drug, any loss of pay by the employee due to disciplinary action will be reimbursed by the Town; any loss of time by the employee, such as vacation, floating holiday or sick leave, due to disciplinary action will be reinstated by the Town.

**WHAT ARE THE CONSEQUENCES OF VIOLATING THE ALCOHOL OR DRUG PROHIBITIONS?**

1. The intent of this policy is to make discipline progressive. If there are multiple offenses, such as a positive drug test and then, in less than five (5) years, a positive alcohol test, the more stringent discipline will apply. For example, if an employee tests positive with an alcohol concentration of 0.04 or greater, and then at a later date, tests positive for drug use, the more stringent discipline of a 20 workday suspension would apply to the second offense. A third positive test will always result in termination. Employees who engage in prohibited alcohol or drug conduct (that is, who test positive for alcohol use 0.02 or greater or have a positive test result for drug use) must be immediately removed from safety-sensitive functions. In determining the level of discipline for alcohol tests which result in 0.02 or higher and for positive test results for drug use, the Town of Reading will not consider any similar offense committed by the employee which is more than five (5) years old. This means that a second offense under this policy will revert to a first offense status, when the original offense becomes five (5) years old.

2. Employees selected for alcohol or drug testing pursuant to this Policy's random selection provisions who refuse to submit a specimen or who test positive for alcohol or drug use shall be subject to discipline consistent with any applicable law, the provisions of any applicable collective bargaining agreement and the rules, policies and procedures of the Town of Reading.

3. An employee with an alcohol concentration of 0.02 or greater but less than 0.04 is not permitted to perform safety-sensitive functions for a minimum of 24-hours or until a retest shows that the employee's alcohol concentration has dropped below 0.02. In addition, the following levels of disciplinary action will be imposed:

First Offense: An employee will be sent home with pay and will be charged vacation, floating holiday, or sick leave, in that order, for the remainder of the shift. In addition, the employee shall receive a one (1) workday disciplinary suspension with pay and will be charged vacation, floating holiday or sick leave, in that order. In addition, the employee will receive a written warning for alcohol-related misconduct rendering him/her unavailable for duty, or more severe discipline based on the employee's prior disciplinary record.

Second Offense: An employee will be sent home without pay for the remainder of the employee's shift. In addition, the employee shall receive a three (3) workday disciplinary suspension without pay. The suspension shall begin at the start of the employee's next shift. Also the employee will receive a written warning for alcohol-related misconduct rendering him/her unavailable for duty, or more severe discipline based on the employee's prior disciplinary record.

Third Offense: A third offense will result in termination of employment.

4. An employee with an alcohol concentration of 0.04 or greater is prohibited from performing safety-sensitive functions until at a minimum (a) the employee undergoes evaluation, and where necessary, treatment; and (b) a substance abuse professional determines that the employee has successfully complied with any recommended course of treatment; and (c) the employee passes the requirements of a return to duty test. Employees who qualify for a return to safety-sensitive duties will be subject to unannounced follow-up testing. In addition, the following levels of disciplinary action will also be imposed:

First Offense: An employee will be sent home without pay for the remainder of the employee's shift. In addition, the employee will receive a five (5) workday disciplinary suspension without pay to begin at the start of the employee's next shift. Any other time for inpatient rehabilitation, excluding the suspension, may be charged to any available leave balances in accordance with existing benefit policies. An employee who refuses to fully participate in the treatment program recommended by the Substance Abuse Professional or who fails to report to duty following a negative return to duty test shall be placed on unauthorized leave. An unauthorized leave of absence of one (1) or more days shall be considered a resignation not in good standing. A failed return to duty or follow-up test shall be considered the same as a second offense.

Second Offense: An employee will be sent home without pay for the remainder of the employee's shift. In addition, the employee will receive a fifteen (15) workday disciplinary suspension without pay to begin at the start of the employee's next shift. Any

other time for inpatient rehabilitation, excluding the suspension, may be charged to any available leave balances in accordance with existing benefit policies. An employee who refuses to fully participate in the treatment program recommended by the Substance Abuse Professional or who fails to report to duty following a negative return to duty test shall be placed on unauthorized leave. An unauthorized leave of absence of one (1) or more days shall be considered a resignation not in good standing. A failed return to duty or follow-up test shall be considered the same as a third offense.

Third Offense: A third offense will result in termination of employment.

5. An employee with a confirmed positive test result for controlled substances is prohibited from performing safety-sensitive functions until at a minimum (a) the employee undergoes evaluation, and where necessary, treatment; and (b) a substance abuse professional determines that the employee has successfully complied with any recommended course of treatment; and (c) the employee passes the requirements of a return-to-duty test. Employees who qualify for a return to safety-sensitive duties will be subject to unannounced follow-up testing. In addition, the following levels of disciplinary action will also be imposed:

First Offense: An employee will be sent home without pay for the remainder of the employee's shift. In addition, the employee will receive a ten (10) workday disciplinary suspension without pay to begin at the start of the employee's next shift. Any other time for inpatient rehabilitation, excluding the suspension, may be charged to any available leave balances in accordance with existing benefit policies. An employee who refuses to fully participate in the treatment program recommended by the Substance Abuse Professional or who fails to report to duty following a negative return to duty test shall be placed on unauthorized leave. An unauthorized leave of absence of one (1) or more days shall be considered a resignation not in good standing. A failed return to duty or follow-up test shall be considered the same as a second offense.

Second Offense: An employee will be sent home without pay for the remainder of the employee's shift. In addition, the employee will receive a twenty (20) workday disciplinary suspension without pay to begin at the start of the employee's next shift. Any other time for inpatient rehabilitation, excluding the suspension, may be charged to any available leave balances in accordance with existing benefit policies. An employee who refuses to fully participate in the treatment program recommended by the Substance Abuse Professional or who fails to report to duty following a negative return to duty test shall be placed on unauthorized leave. An unauthorized leave of absence of one (1) or more days shall be considered a resignation not in good standing. A failed return to duty or follow-up test shall be considered the same as a third offense.

Third Offense: A third offense will result in termination of employment.

## **WHERE CAN I GO FOR HELP?**

The alcohol and drug rule requires us to provide you with an opportunity for treatment. The ruling does not, however, require us to hold a job open for you or to pay for rehabilitation. These issues are handled according to our alcohol and drug policy.

If you violate an alcohol or drug prohibition you must be evaluated by a substance abuse professional to determine what help is needed.

Before you can return to a safety-sensitive job, you must:

- a. have an alcohol concentration of less than 0.02, or a verified negative drug test (depending on the violation);
- b. complete recommended treatment;
- c. complete a minimum of 6 follow-up tests within the first year back to work (follow-up testing may be done for up to five years after return to work).

**If you have not violated alcohol or drug prohibitions but would like further information or assistance on alcohol or drug issues, you may do so on a confidential basis through your Employee Assistance Program.**

## **WHAT ARE THE EFFECTS OF ALCOHOL AND DRUGS ON THE BODY?**

**Alcohol**, a nervous system depressant, is the most widely abused drug. About half of all auto accident fatalities in this country are related to alcohol abuse. A 12-ounce can of beer, a 5-ounce glass of wine and a 1 1/2 ounce shot of hard liquor all contain the same amount of alcohol. Each 1/2 ounce of alcohol takes the average body about one hour to process and eliminate. Coffee, cold showers and exercise do not hasten sobriety.

Alcohol first acts on those parts of the brain that affect self-control and other learned behaviors. Low self-control often leads to the aggressive behavior associated with some people who drink. In large doses, alcohol can dull sensation and impair muscular coordination, memory, and judgment. Taken in larger quantities over a long period of time, alcohol can damage the liver and heart and can cause permanent brain damage. On the average, heavy drinkers shorten their life spans by about ten years.

### **Other Effects:**

- greatly impaired driving ability,
- reduced coordination and reflex action,
- impaired vision and judgment,
- inability to divide attention,
- lowering of inhibitions,
- hangover, which can be accompanied by headaches, nausea, dehydration, unclear thinking, unsettled digestion and aching muscles.

**Marijuana**, also known as "pot", "weed", "grass", and other street names, alters the user's sense of time and reduces the ability to perform tasks requiring concentration. The drug has a significant effect on judgment, caution, and sensory/motor function.

Marijuana stays in the body for 28 days, unlike alcohol, which dissipates in a few hours.

**Other Effects:**

- impaired driving for at least 4-6 hours after smoking 1 "joint",
- restlessness,
- inability to concentrate,
- increased pulse rate and blood pressure,
- rapidly changing emotions and erratic behavior,
- altered sense of identify,
- dulling of attention,
- hallucinations, fantasies and paranoia,
- reduction or temporary loss of fertility.

**Cocaine** is a stimulant drug which increases heart rate and blood pressure. As a powder, cocaine is inhaled, ingested, or injected. Cocaine is also used as free-base cocaine known as "crack" or "rock", which is smoked. The crack "high" is reached in 4-6 seconds and lasts for about 15 minutes.

Many people mistakenly believe that, because it is smoked, crack is safer than other forms of cocaine use. It is not. Crack cocaine is one of the most addictive drugs known today. The most dangerous effects of crack are that its use can cause vomiting, rapid heart beat, tremor and convulsions. All of this muscle activity increases the demand for oxygen, which can result in a cocaine-induced heart attack. Since the heat regulating center in the brain is also disrupted, dangerously high body temperatures can occur. With high doses, brain functioning, breathing, and heart beat are depressed, which can lead to death.

**Other Effects:**

- A rush of pleasurable sensations,
- a heightened, but momentary, feeling of confidence, strength and endurance,
- accelerated pulse, blood pressure and respiration,
- impaired driving ability,
- paranoia, which can trigger mental disorders in users prone to mental instability,
- irritation of the nostrils and nasal membrane,
- mood swings,
- anxiety,
- reduced sense of humor,
- compulsive behavior, such as teeth grinding or repeated hand washing.

**Amphetamines** are drugs that stimulate the central nervous system and promote a feeling of alertness and an increase in speech and general physical activity. Some common street names for amphetamines are "speed", "uppers", "blackbeauties", "bennies", "wake-ups", "footballs", and "dexies".

People with a history of sustained low-dose amphetamine use quite often become addicted, believing that they need the drug to get by. These users frequently keep taking amphetamines to avoid the "down" mood they experience when the drug wears off.

Even small, infrequent doses can produce toxic effects in some persons. Restlessness, anxiety, mood swings, panic, heart rhythm disturbances, paranoid thoughts, hallucinations, convulsions and coma have been reported. Long-term users often have acne resembling measles, trouble with their teeth, gums and nails, and dry, dull hair. Heavy, frequent use can produce brain damage resulting in speech disturbances.

**Other Effects:**

- Loss of appetite,
- irritability, anxiety, apprehension,
- increased heart rate and blood pressure,
- difficulty in focusing eyes,
- exaggerated reflexes,
- distorted thinking,
- perspiration, headaches, dizziness,
- short-term insomnia.

**Opiates** include heroin, morphine, codeine and narcotics used to relieve pain and induce sleep. Heroin, also called "junk" or "smack", accounts for 90% of the narcotic abuse in this country.

Sometimes narcotics found in medicines are abused. This includes pain relievers containing opium and cough syrups containing codeine. Heroin is illegal and cannot even be obtained with a physician's prescription.

Most medical problems are caused by the uncertain dosage level, the use of unsterile needles, contamination of the drug, or the combination of a narcotic with other drugs. These dangers depend on the specific drug, its source and the way it is used.

**Other Effects:**

- short lived euphoria,
- impaired driving ability,
- drowsiness, followed by sleep,
- constipation,
- decreased physical activity,
- reduced vision,
- change in sleeping habits,
- possible death.

**Phencyclidine or PCP**, also call "angel dust", was developed as a surgical anesthetic in the late 1950s. Later, due to its unusual side effects in humans, it was restricted to use

as a veterinary anesthetic and tranquilizer. Today, it has no lawful use and is no longer legally manufactured.

PCP is a very dangerous drug. It can produce violent and bizarre behavior even in people otherwise not prone to such behavior. More people die from accidents caused by erratic and unpredictable behavior produced by the drug than from the drug's direct effect on the body.

PCP scrambles the brain's internal stimuli and alters how users see and deal with their environment. Routine activities such as driving and walking become very difficult.

Low doses produce a rush, sometimes associated with a feeling of numbness. Increased doses produce an excited, confused state including any of the following: Muscle rigidity, loss of concentration and memory, visual disturbances, delirium, feelings of isolation and convulsions.

**Other Effects:**

- impaired driving ability,
- drowsiness,
- perspiration,
- repetitive speech patterns,
- incomplete verbal responses,
- blank stare,
- thick, slurred speech,
- involuntary eye movement.

**The following person should be contacted for assistance with drug and/or alcohol problems:**

Jeffrey Zager

(617) 942-6660

\_\_\_\_\_  
Name

\_\_\_\_\_  
Phone

Notes: