

Participant Manual

DWI Detection and Standardized Field Sobriety Testing (SFST)

Revised: 10/2015



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DWI Detection and Standardized Field Sobriety Testing (SFST)
Participant Manual
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10/2015 Curriculum

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Preface

The Standardized Field Sobriety Testing (SFST) training curriculum collectively, prepares police officers and other qualified persons to conduct the SFST's for use in DWI investigations. This training, developed under the auspices and direction of the National Highway Traffic Safety Administration (NHTSA), and the International Association of Chiefs of Police (IACP), has experienced remarkable success since its inception in the early 1980s.

As in any educational training program, an instruction manual or guide is considered a "living document" that is subject to updates and changes based on advances in technology and science. A thorough review is made of information by the IACP Technical Advisory Panel (TAP) of the Highway Safety Committee of the IACP with contributions from many sources in health care science, toxicology, jurisprudence, and law enforcement. Based on this information, any appropriate revisions and modifications in background theory, facts, examination and decision making methods are made to improve the quality of the instruction as well as the standardization of guidelines for the implementation of the SFST curriculum. The reorganized manuals are then prepared and disseminated, both domestically and internationally, to the states. Changes will normally take effect 90 days after approval by the TAP, unless otherwise specified or when so designated.

The procedures outlined in this manual describe how the Standardized Field Sobriety Tests (SFSTs) are to be administered under ideal conditions. We recognize that the SFST's will not always be administered under ideal conditions in the field, because such conditions do not always exist. Even when administered under less than ideal conditions, they will generally serve as valid and useful indicators of impairment. Slight variations from the ideal, i.e., the inability to find a perfectly smooth surface at roadside, may have some effect on the evidentiary weight given to the results. However, this does not necessarily make the SFSTs invalid.

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Participant Manual

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 1 - Introduction

30 Minutes

Session 1

Introduction and Overview



DWI Detection and Standardized Field Sobriety Testing

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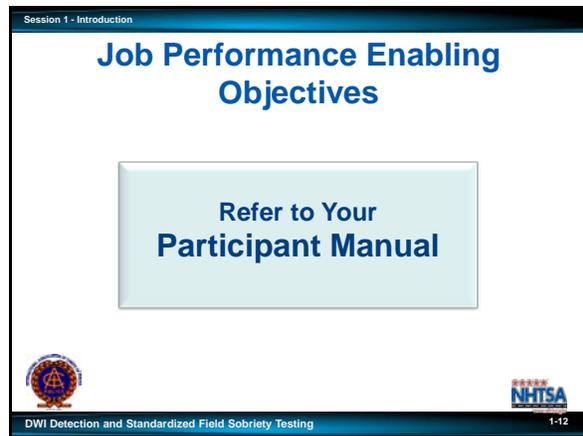
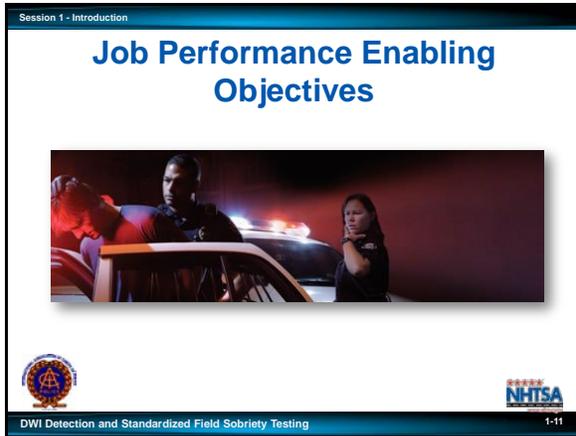
Job Performance Objectives

- Recognize and interpret evidence of DWI violations
- Administer and interpret Standardized Field Sobriety Tests (SFSTs)
- Describe DWI evidence clearly and convincingly
- Ensure video and/or audio evidence if available is consistent with other evidence



At the conclusion of this training, participants will demonstrate the ability to:

- Recognize and interpret evidence of DWI violations
- Administer and interpret Standardized Field Sobriety Tests
- Describe DWI evidence clearly and convincingly in written reports and verbal testimony
- Ensure video and/or audio evidence, if available, is consistent with other evidence



Job Performance Enabling Objectives

- Understand the tasks and decisions of DWI detection
 - Recognize the magnitude and scope of DWI-related crashes, deaths, injuries, property loss and other social aspects of the DWI problem
 - Understand the deterrent effects of DWI enforcement
 - Understand the DWI enforcement legal environment
 - Know and recognize typical vehicle maneuvers and human indicators symptomatic of DWI that are associated with initial observation of vehicles in operation
 - Know and recognize typical reinforcing maneuvers and indicators that come to light during the stopping sequence
 - Know and recognize typical sensory and other clues of alcohol and/or other drug impairment that may be seen during face to face contact with DWI subjects
 - Know and recognize typical behavioral clues of alcohol and/or other drug impairment that may be seen during the subject's exit from the vehicle
 - Understand the role and relevance of psychophysical testing in pre-arrest screening of DWI subjects
 - Understand the role and relevance of preliminary breath testing in pre-arrest screening of DWI subjects
 - Know and carry out appropriate administrative procedures for the Horizontal Gaze Nystagmus test
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DWI DETECTION AND STANDARDIZED FIELD SOBRIETY TESTING (SFST)

GLOSSARY OF TERMS

ADDICTION

Habitual, psychological, and physiological dependence on a substance beyond one's voluntary control.

ALVEOLAR BREATH

Breath from the deepest part of the lung.

BLOOD ALCOHOL CONCENTRATION (BAC)

The percentage of alcohol in a person's blood.

BREATH ALCOHOL CONCENTRATION (BrAC)

The percentage of alcohol in a person's breath, as measured by a breath testing device.

CLUE

Something that leads to the solution of a problem.

CUE

A reminder or prompting as a signal to do something. A suggestion or a hint.

DIVIDED ATTENTION

Concentrating on more than one thing at a time.

DIVIDED ATTENTION TEST

A test which requires the subject to concentrate on both mental and physical tasks at the same time. The two psychophysical tests Walk and Turn (WAT) and One Leg Stand (OLS) require the suspect to their divide attention.

DWI/DUI

The acronym "DWI" means driving while impaired and is synonymous with the acronym "DUI", driving under the influence or other acronyms used to denote impaired driving. These terms refer to any and all offenses involving the operation of vehicles by persons under the influence of alcohol and/or other drugs.

DWI DETECTION PROCESS

The entire process of identifying and gathering evidence to determine whether or not a suspect should be arrested for a DWI violation. The DWI detection process has three phases:

Phase One – Vehicle In Motion

Phase Two – Personal Contact

Phase Three – Pre -arrest Screening

EVIDENCE

Any means by which some alleged fact that has been submitted to investigation may either be established or disproved. Evidence of a DWI violation may be of various types:

- a. Physical (or real) evidence: something tangible, visible, or audible.
- b. Well established facts (judicial notice).
- c. Demonstrative evidence: demonstrations performed in the courtroom.
- d. Written matter or documentation.
- e. Testimony.

EXPERT WITNESS

A person skilled in some art, trade, science or profession, having knowledge of matters not within the knowledge of persons of average education, learning and experience, who may assist a jury in arriving at a verdict by expressing an opinion on a state of facts shown by the evidence and based upon his or her special knowledge. (NOTE: Only the court can determine whether a witness is qualified to testify as an expert.)

FIELD SOBRIETY TEST

Any one of several roadside tests that can be used to determine whether a subject is impaired.

GAIT ATAXIA

An unsteady, staggering gait (walk) in which walking is uncoordinated and appears to be "not ordered."

HORIZONTAL GAZE NYSTAGMUS (HGN)

Involuntary jerking of the eyes occurring as the eyes gaze to the side. The first test administered in the SFST battery.

NYSTAGMUS

An involuntary jerking of the eyes.

ONE LEG STAND (OLS)

A divided attention field sobriety test. One of the tests administered in the SFST battery.

PER SE

Used to describe a law which makes it illegal to drive while having a certain percentage of alcohol in the blood or breath.

PERSONAL CONTACT

The second phase in the DWI detection process. In this phase the officer observes and interviews the driver face to face; determines whether to ask the driver to step from the vehicle; and observes the driver's exit and walk from the vehicle.

PRE-ARREST SCREENING

The third phase in the DWI detection process. In this phase the officer administers field sobriety tests to determine whether there is probable cause to arrest the driver for DWI. Depending on agency policy, the officer may administer or could arrange to have a preliminary breath test conducted.

PRELIMINARY BREATH TEST (PBT)

A pre-arrest breath test administered during investigation of a possible DWI violator to obtain an indication of the person's blood alcohol concentration.

PROBABLE CAUSE

It is more than mere suspicion; facts and circumstances within the officer's knowledge, and of which he or she has reasonably trustworthy information, are sufficient to warrant a person of reasonable caution to believe that an offense has been or is being committed.

PSYCHOPHYSICAL

"Mind/Body." Used to describe field sobriety tests that measure a person's ability to perform both mental and physical tasks.

PSYCHOPHYSICAL TESTS

Methods of investigating the mental (psycho-) and physical characteristics of a person suspected of alcohol or drug impairment. Most psychophysical tests employ the concept of divided attention to assess a suspect's impairment.

REASONABLE SUSPICION

Less than probable cause but more than mere suspicion; exists when an officer, in light of his or her training and experience, reasonably believes and can articulate that criminal activity is taking, has taken or is about to take place.

RESTING NYSTAGMUS

Jerking of the eyes as they look straight ahead.

STANDARDIZED FIELD SOBRIETY TEST BATTERY

Standardized Field Sobriety Testing. There are three SFSTs, namely Horizontal Gaze Nystagmus (HGN), Walk and Turn, and One Leg Stand. Based on a series of controlled laboratory studies, scientifically validated clues of alcohol impairment have been identified for each of these three tests. They are the only Standardized Field Sobriety Tests for which validated clues have been identified

TIDAL BREATH

Breath from the upper part of the lungs and mouth.

TRAFFIC SAFETY RESOURCE PROSECUTOR (TSRP)

Is usually a current or former prosecutor who provides training, education and technical support to traffic crimes prosecutors and law enforcement agencies throughout their state. (For the contact information of your TSRP, contact your Highway Safety Office).

VALID

Conforming to accepted principles. Producing accurate and reliable results.

VALIDATED

A documented act of demonstrating that a procedure, process, and/or activity will consistently lead to accurate and reliable results.

VEHICLE IN MOTION

The first phase in the DWI detection process. In this phase the officer observes the vehicle in operation, determines whether to stop the vehicle, and observes the stopping sequence.

VERTICAL GAZE NYSTAGMUS

An involuntary jerking of the eyes (up and down) which occurs when the eyes gaze upward at maximum elevation. The jerking should be distinct and sustained.

WALK AND TURN (WAT)

A divided attention field sobriety test. One of the tests administered in SFST battery.

Instructor Guide

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 2 - Detection and General Deterrence

50 Minutes

Session 2

Detection and General Deterrence



DWI Detection and Standardized Field Sobriety Testing

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Session 2 – Detection and General Deterrence

Learning Objectives

- Describe frequency of DWI violations and crashes
- Define general deterrence
- Describe relationship between detection and general deterrence
- Describe a brief history of alcohol
- Identify common types of alcohol
- Describe physiological processes of alcohol absorption, distribution, and elimination




DWI Detection and Standardized Field Sobriety Testing 2-2

Learning Objectives

At the conclusion of this session, participants will be able to:

- Describe the frequency of DWI violations and crashes
- Define general deterrence
- Describe the relationship between detection and general deterrence
- Describe a brief history of alcohol
- Identify common types of alcohol
- Describe the physiological processes of absorption, distribution, and elimination of alcohol in the body

<u>CONTENT SEGMENTS</u>	<u>LEARNING ACTIVITIES</u>
A. A. The DWI Problem.....	Instructor-Led Presentations
B. B. The Concept of General Deterrence	Video Presentation
C. C. Relating Detection to Deterrence Potential	Reading Assignments
D. Evidence of Effective Detection and Effective Deterrence	
E. Physiology of Alcohol	

Session 2 – Detection and General Deterrence

National Statistics

What number of drivers commit this violation?



Weekend Nights – 10% or More



DWI Detection and Standardized Field Sobriety Testing 2-6

A frequently quoted, and often misinterpreted, statistic places the average incidence of DWI at one driver in fifty. Averaged across all hours of the day and all days of the week, two percent of the drivers on the road are DWI. The 1 in 50 figure is offered as evidence that a relatively small segment of America's drivers, the so called "problem" group, account for the majority of traffic deaths. There's nothing wrong with that figure as a statistical average, but police officers know that at certain times and places many more than two percent of drivers are impaired. NHTSA research suggests that during the late night, weekend hours, as many as 10% of drivers on the roads may be DWI. On certain holiday weekends, and other critical times, the figure may go even higher.

How Many? How Often?

The issue of how many DWIs are on the road at any given time is an important factor in measuring the magnitude of the problem. However, from an overall traffic safety perspective, the more important issue may be the number of drivers who ever commit DWI. Just how widespread is this violation?

Session 2 – Detection and General Deterrence

General Deterrence



The fear of arrest



DWI Detection and Standardized Field Sobriety Testing 2-14

B. Concept of General Deterrence

The fear of arrest is the leading deterrent.

One approach to reducing the number of drinking drivers is general deterrence of DWI. General deterrence of DWI is based in the driving public's fear of being arrested. If enough violators come to believe that there is a good chance that they will get caught, at least some of them will stop committing DWI at least some of the time. However, unless there is a real risk of arrest, there will not be much fear of arrest.

Law enforcement officers must arrest enough violators enough of the time to convince the general public that they will get caught, sooner or later, if they continue to drive while impaired.

How many DWI violators must be arrested in order to convince the public that there is a real risk of arrest for DWI?

Several programs have demonstrated that significant deterrence can be achieved by arresting one DWI violator for every 400 DWI violations committed. Currently, however, for every DWI violator arrested, there are between 500 and 2,000 DWI violations committed.

General Deterrence

There is no reason to fear arrest



When the chances of being arrested are one in two thousand, the average DWI violator really has little to fear.

There are three noteworthy reasons.

- DWI violators vastly outnumber police officers. It is not possible to arrest every drinking driver each time they commit DWI.
- Some officers are not highly skilled at DWI detection. They fail to recognize and arrest many DWI violators.
- Some officers are not motivated to detect and arrest DWI violators.

Session 2 – Detection and General Deterrence

The Ultimate Goal: Changing Behavior

The goal is to encourage more Americans to:

- Avoid committing DWI
- Control drinking prior to driving
- Select alternative transportation
- Avoid riding with impaired drivers
- Recognize impaired driving is unacceptable behavior at all levels



DWI Detection and Standardized Field Sobriety Testing 2-18

The Solutions

The Ultimate Goal: Changing Behavior

What must the comprehensive community based DWI programs seek to accomplish?

Ultimately, nothing less than fundamental behavioral change, on a widespread basis. The goal is to encourage more Americans to:

- Avoid committing DWI, either by avoiding or controlling drinking prior to driving or by selecting alternative transportation.
- Intervene actively to prevent others from committing DWI (for example, putting into practice the theme "friends don't let friends drive drunk")
- Avoid riding with drivers who are impaired.

The final test of the value of DWI countermeasures on the national, state and local levels is whether they succeed in getting significantly more people to modify their behavior. The programs also pursue other more immediate objectives that support or reinforce the ultimate goal. However, the ultimate goal is to change driving while impaired to an unacceptable form of behavior at all levels.

Session 2 – Detection and General Deterrence

Prevention

- Promote positive attitudes
- DWI is wrong
- No one has the right to endanger others
- DWI cannot be tolerated or condoned



DWI Detection and Standardized Field Sobriety Testing 2-20

Prevention: the Ultimate Solution

DWI countermeasures that strive for the ultimate achievement of drinking and driving behavioral changes have been grouped under the label "Prevention." There are many kinds of DWI preventive activities. Some are carried out by and in our schools, some through the mass media, some through concerned civic groups, and so forth. The various preventive efforts focus on different specific behaviors and address different target groups.

However, they seek to change drinking and driving behavior by promoting more positive attitudes and by fostering a set of values that reflects individual responsibilities toward drinking and driving.

Preventive countermeasures seek society's acceptance of the fact that DWI is wrong. Some people believe that drinking and driving is strictly an individual's personal business; that it is up to each person to decide whether or not to accept the risk of driving after drinking. Preventive activities try to dispel that outmoded and irresponsible belief. Instead, they promote the idea that no one has the right to endanger others by drinking and driving, or to risk becoming a burden (economically and otherwise) to others as a result of injuries suffered while drinking and driving. Realistically, everyone has an obligation not only to control their own drinking and driving, but also to speak up when others are about to commit the violation. Only when all of society views DWI as a negative behavior that cannot be tolerated or condoned, will the public's behavior begin to change. That is the long term solution.

Session 2 – Detection and General Deterrence

Deterrence

- Driving public's fear of being arrested
- Enough violators must be arrested to convince public they will get caught




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Session 2 – Detection and General Deterrence

Deterrence

- Deterrence is negative reinforcement
- Strives to change DWI behavior.




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General deterrence of DWI is based on the driving public's fear of being arrested. If enough violators come to believe that there is a good chance that they will get caught, some of them (at least) will stop committing DWI at least some of the time.

Unless there is a real risk of being arrested, there will not be much fear of arrest.

Law enforcement must arrest enough violators to convince the public that they will get caught, if they continue to drive while impaired.

C. Relating Detection to Deterrence Potential

Deterrence: the Interim Solution

DWI countermeasures that seek a short cut to the ultimate goal of behavioral change usually are labeled "Deterrence." Deterrence can be described as negative reinforcement. Some deterrence countermeasures focus primarily on changing individual drinking and driving behavior while others seek to influence people to intervene into others' drinking and driving decisions.

The key feature of deterrence is that it strives to change DWI behavior without dealing directly with the prevailing attitudes about the rightness or wrongness of DWI. Deterrence uses a mechanism quite distinct from attitudinal change: fear of apprehension and application of sanctions.

Session 2 – Detection and General Deterrence

The Fear of Being Caught and Punished

- Fear long term costs and inconvenience



DWI Detection and Standardized Field Sobriety Testing 2-23

The Fear of Being Caught and Punished

Large scale DWI deterrence programs try to control the DWI behavior of the driving public by appealing to the public's presumed fear of being caught. Most actual or potential DWI violators view the prospect of being arrested with extreme distaste. For some, the arrest, with its attendant handcuffing, booking, publicity and other stigmatizing and traumatizing features, is the thing most to be feared. For others, it is the prospective punishment (jail, stiff fine, etc.) that causes most of the concern. Still others fear most the long term costs and inconvenience of a DWI arrest: the license suspension and increased premiums for automobile insurance. For many violators the fear probably is a combination of all of these. Regardless, if enough violators are sufficiently fearful of DWI arrest, some of them will avoid committing the violation at least some of the time. Fear by itself will not change their attitudes; if they do not see anything inherently wrong with drinking and driving in the first place, the prospect of arrest and punishment will not help them come to this realization. However, fear sometimes can be enough to keep them from putting their anti-social attitudes into practice.

This type of DWI deterrence, based on the fear of being caught, is commonly called general deterrence. It applies to the driving public generally and presumably affects the behavior of those who have never been caught. There is an element of fear of the unknown at work here.

Session 2 – Detection and General Deterrence

Specific Deterrence

- Those who have been caught and arrested
- Public must perceive that there is an appreciable risk of being caught and convicted
- Enforcement creates and sustains fear of being caught




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Session 2 – Detection and General Deterrence

Specific Deterrence

- Supportive roles: Legislators, Prosecutors, Judiciary, and Media




DWI Detection and Standardized Field Sobriety Testing 2-25

Another type of DWI deterrence, called specific deterrence, applies to those who have been caught and arrested. The typical specific deterrent involves some type of punishment, perhaps a fine, involuntary community service, a jail term or action against the driver's license. The punishment is imposed in the hope that it will convince the specific violator that there is indeed something to fear as a result of being caught, and to emphasize that if there is a next time, the punishment will be even more severe. It is the fear of the known that comes into play in this case.

The concept of DWI deterrence through fear of apprehension or punishment seems sound. But will it work in actual practice? The crux of the problem is this: If the motoring public is to fear arrest and punishment for DWI, they must perceive that there is an appreciable risk of being caught and convicted if they commit the crime. If actual and potential DWI violators come to believe that the chance of being arrested is minimal, they will quickly lose whatever fear of arrest they may have felt.

Enforcement is the mechanism for creating and sustaining a fear of being caught for DWI. No specific deterrence program can amount to much, unless police officers arrest large numbers of violators; no punishment or rehabilitation program can affect behavior on a large scale unless it is applied to many people. General deterrence depends on enforcement -- the fear of being caught is a direct function of the number of people who are caught.

Obviously, the police alone cannot do the job. Legislators must supply laws that the police can enforce. Prosecutors must vigorously prosecute DWI violators, and the judiciary must adjudicate fairly and deliver the punishments prescribed by law. The media must publicize the enforcement effort and communicate the fact that the risk is not worth the probable outcome. Each of these elements plays a supportive role in DWI deterrence.

Session 2 – Detection and General Deterrence

How Much Deterrence is Enough?

For every DWI violator arrested, there are approximately 600 undetected DWI violations




DWI Detection and Standardized Field Sobriety Testing 2-26

Session 2 – Detection and General Deterrence

How Great is the Risk?

- Does the average DWI violator fear arrest?
- Should they be afraid?
- Intense publicity may enhance the perceived risk




DWI Detection and Standardized Field Sobriety Testing 2-27

How much deterrence is enough?

Estimates from around the country vary. For every DWI violator arrested, there are approximately 600 undetected DWI violations.

According to the National Survey on Drug Use and Health (2013), more than 28 million people drove under the influence of alcohol. According to the CDC (2011), the average person who reported driving under the influence also reported doing so an average of 28 times per year. This results in approximately 784 million DWIs per year. According to the FBI UCR, 1.28 million DWI arrests were made in 2012, which means law enforcement arrested approximately one out of every 612 DWI episodes.

How Great is the Risk?

The question now is, are violators afraid of being caught? More importantly, should they be afraid? Is there really an appreciable risk of being arrested if one commits DWI?

The answer to all of these questions unfortunately is: probably not. In most jurisdictions, the number of DWI arrests appears to fall short of what would be required to sustain a public perception that there is a significant risk of being caught.

Sometimes, it is possible to enhance the perceived risk, at least for a while, through intensive publicity. However, media "hype" without intensified enforcement has never been enough to maintain the fear of arrest for very long.

Session 2 – Detection and General Deterrence

Stockton, California

3 Year Intensive Weekend DWI Enforcement

- **Before:** Arrest/violation ratio of 1 in 2000 or less, 9% of weekend drivers were operating with BAC of 0.10 or higher
- **During:** Intensive DWI enforcement on weekends nights
- **Officers intensively trained, enforcement publicized, justice community coordinated**




DWI Detection and Standardized Field Sobriety Testing 2-30

Session 2 – Detection and General Deterrence

Stockton, California

- **Arrests increased 500%**
- **Weekend nighttime crashes decreased 34%**
- **Proportion of nighttime, weekend drivers legally under the influence dropped from 9% to 6%**




DWI Detection and Standardized Field Sobriety Testing 2-31

Several enforcement programs have succeeded in achieving significant DWI deterrence. Consider, for example, the three year intensive weekend DWI enforcement program in Stockton, California.

As early as 1975, a study showed that the city's total number of DWI arrests (700) were considerably less than one percent of the areas licensed number of drivers (130,000). The implication here was that Stockton police were only maintaining the arrest/violation ration of 1:2,000, or less. In addition, roadside surveys on Friday and Saturday nights disclosed that nine percent of the drivers were operating with BAC's of 0.10 or higher.

Then things changed.

Beginning in 1976 and continuing at planned intervals through the first half of 1979, Stockton police conducted intensive DWI enforcement on weekend nights. The officers involved were extensively trained. The enforcement effort was heavily publicized and additional equipment (PBTs and cassette recorders) was made available. The police effort was closely coordinated with the District Attorney's office, the County Probation office, and other allied criminal justice and safety organizations.

All this paid off. By the time the project came to a close (in 1979) DWI arrests had increased by over 500%, and weekend nighttime collisions had decreased by 34%, and the number of operators committing DWI dropped one third.

The implication of this study, and of other similar studies, is that for every DWI violator actually arrested for DWI, three others are contacted by police officers, but are not arrested for DWI. It is clear that significant improvement in the arrest rate could be achieved if officers were more skilled at DWI detection.

Session 2 – Detection and General Deterrence

Improve DWI Detection

Keys to success:

- Officers skilled at DWI detection
- Willing to arrest all violators detected
- Policies and application supported by agency

In each state where the number of DWI arrests increased, alcohol related crash fatalities decreased




DWI Detection and Standardized Field Sobriety Testing 2-32

Session 2 – Detection and General Deterrence

Detection: Key to Deterrence

- Deterrence can vastly exceed the level of enforcement officers achieve
- In Stockton, increased enforcement effort convinced at least one third of the violators to change their behavior substantially




DWI Detection and Standardized Field Sobriety Testing 2-33

Improved DWI detection can be achieved in virtually every jurisdiction in the country.

The keys to success are police officers who are:

- Skilled at DWI detection
- Willing to arrest every DWI violator who is detected
- Supported by their agencies in all aspects of this program, from policy through practical application

Since the historical Stockton study numerous states have conducted similar studies to determine the degree of effect that DWI arrests would have on alcohol related fatalities in general, and total fatalities in particular. Most of these studies were conducted between 1978 and 1986.

The results of these studies graphically illustrated in each state that when the number of arrests for DWI increased, the percentage of alcohol related fatalities decreased. Further, the results of a study conducted in Florida from 1981-1983, showed that when DWI arrests per licensed driver increased, total fatalities decreased (12 month moving average).

Detection: The Key to Deterrence

It is important to understand how increased DWI enforcement can affect deterrence. Deterrence can vastly exceed the level of enforcement officers achieve on any given night. True, weekend DWI arrests can increase by as much as 500 %, as in the Stockton study.

Session 2 – Detection and General Deterrence

Example of General Deterrence

When arrest/violation ratio is 1 in 400:

- Many violators **WILL** be caught
- General perception level of being caught increases
- Behavior changes




DWI Detection and Standardized Field Sobriety Testing 2-34

Session 2 – Detection and General Deterrence

Increased DWI Detection Skills

- Community benefits
- Officers recognize cues and clues
- Gained confidence in field sobriety tests
- Fewer violators stopped avoided arrest




DWI Detection and Standardized Field Sobriety Testing 2-35

The law of averages quickly starts to catch up with DWI drivers. Unless violators change their behavior, many of them will be caught, or at least will have known someone who has been arrested. Coupled with the heavy publicity given to the enforcement effort, those experiences were enough to raise the perception level of apprehension among DWI operators that sooner or later they would be caught. As a result, many of them changed their behavior. This is the best example of general deterrence.

In addition, during the same time that DWI arrests went up over 500% in Stockton, citations for other traffic violations increased by a comparatively modest 99%. The implication is that Stockton's officers were stopping and contacting only twice as many possible violators as they had before, but they were coming up with more than five times as many arrests.

What have the results of these studies shown? Basically, they have shown that a community will benefit from their officers' increased skills at DWI detection. Principally because of their special training, the officers were better able to recognize "cues" of impairment when they observed vehicles in motion, and they were more familiar with the "clues" or human indicators of impairment exhibited by violators during personal contact. The officers also had more confidence in the field sobriety tests they used to investigate their suspects. The most important factor was that far fewer of the violators being stopped now avoided detection and arrest.

The difficulty in detecting DWI among operators personally contacted by officers has been well documented. Analysis of roadside survey and arrest data suggest that for every DWI violator arrested, three others actually have face to face contact with police officers but are allowed to go without arrest. Direct support of that inference was found in the Fort Lauderdale BAC study, where researchers demonstrated that police officers arrested only 22% of the DWI operators they contacted, whose BAC levels were subsequently shown to be between 0.10 and 0.20.

Session 2 – Detection and General Deterrence

Alcohol

A family of closely related chemicals whose molecules are made up of hydrogen, carbon, and oxygen.



DWI Detection and Standardized Field Sobriety Testing 2-37

Session 2 – Detection and General Deterrence

Some Types of Alcohol

- Methyl Alcohol (Methanol)
- Ethyl Alcohol (Ethanol)
- Isopropyl Alcohol (Isopropanol)



DWI Detection and Standardized Field Sobriety Testing 2-38

E. Physiology of Alcohol

A brief overview of alcohol:

Alcohol is the most abused drug in the United States.

"Alcohol" is the name given to a family of closely related and naturally occurring chemicals. Each of the chemicals that is called an "alcohol" contains a molecule chemists refer to as a "hydroxy radical." This radical contains one oxygen atom and one hydrogen atom bonded together. The simplest alcohol has only one carbon atom, three hydrogen atoms, and one hydroxy radical. The next alcohol has two carbon atoms, five hydrogen atoms and one hydroxy radical. The third alcohol has three carbon atoms, seven hydrogen atoms and one hydroxy radical. That is how the alcohols differ from one another.

Alcohols are molecularly very similar and produce similar effects. They produce intoxicating effects when ingested into the human body. Only one of them is meant for human consumption. However, when ingested in substantial quantities it can cause death.

Three of the more commonly known alcohols are Methyl, Ethyl, and Isopropyl.

- Methyl alcohol also known as Methanol or wood alcohol
- Ethyl alcohol also known as Ethanol or beverage alcohol
- Isopropyl Alcohol (Isopropanol) also known as rubbing alcohol

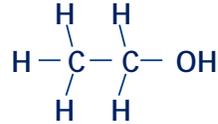
Ethanol

Ethyl Alcohol
(Intended for human consumption)

Chemical Symbols

ETOH

C₂H₅OH



The ingestible alcohol is known as ethyl alcohol, or ethanol. Its chemical abbreviation is ETOH. The "ET" stands for "ethyl" and the "OH" represents the single oxygen atom bonded to one of the hydrogen atoms, ("hydroxy radical"). Ethanol is the variety of alcohol that has two carbon atoms. Two of ethanol's best known analogs are methyl alcohol (or methanol), commonly called "wood alcohol", and isopropyl alcohol (or isopropanol), also known as "rubbing alcohol".

Session 2 – Detection and General Deterrence

Ethanol Production - Fermentation

Yeast combines with sugars from fruit or grains in a chemical reaction that results in ETOH



DWI Detection and Standardized Field Sobriety Testing 2-40

Session 2 – Detection and General Deterrence

Ethanol Production - Distillation

Fermented beverage is boiled at a controlled temperature to extract and concentrate the ethanol fumes



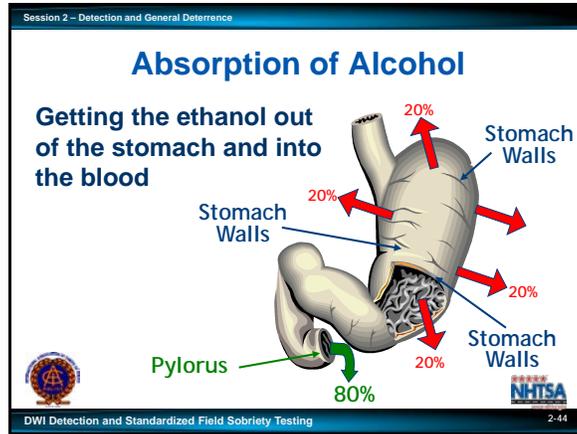
DWI Detection and Standardized Field Sobriety Testing 2-41

Ethanol is what interests us because it is the kind of alcohol that features prominently in impaired driving. Ethanol is beverage alcohol, the active ingredient in beer, wine, whiskey, liquors, etc. Ethanol production starts with fermentation. That is a kind of decomposition in which the sugars in fruit, grains and other organic materials combine with yeast to produce the chemical we call ethanol. This can occur naturally, as yeast spores in the air come into contact with decomposing fruit and grains. However, most of the ethanol in the world didn't ferment naturally, but was produced under human supervision.

When an alcoholic beverage is produced by fermentation, the maximum ethanol content that can be reached is about 14%. At that concentration, the yeast dies, so the fermentation stops. Obtaining a higher ethanol content requires a process called distillation. This involves heating the beverage until the ethanol "boils off", then collecting the ethanol vapor. It is possible to do this because ethanol boils at a lower temperature than does water.

Distilled spirits is the name we give to high ethanol concentration beverages produced by distillation. These include rum, whiskey, gin, vodka, etc. The ethanol concentration of distilled spirits usually is expressed in terms of proof, which is a number corresponding to twice the ethanol percentage.

For example, an 80 proof beverage has an ethanol concentration of 40%.



Once the ethanol gets into the stomach, it has to move into the blood. The process by which this happens is known as absorption. One very important fact that pertains to alcohol absorption is that it doesn't have to be digested in order to move from the stomach to the blood.

Another very important fact is that alcohol can pass directly through the walls of the stomach. These two facts, taken together, mean that, under the right circumstances, absorption of alcohol can be accomplished fairly quickly. The ideal circumstance for rapid absorption is to drink on an empty stomach.

When the alcohol enters the empty stomach, about 20% of it will make its way directly through the stomach walls. The remaining 80% will pass through the stomach and enter the small intestine, from which it is readily absorbed into the blood. Because the body doesn't need to digest the alcohol before admitting it into the bloodstream, the small intestine will be open to the alcohol as soon as it hits the stomach.

But what if there is food in the stomach? Suppose the person has had something to eat shortly before drinking, or eats food while drinking; will that affect the absorption of alcohol?

Yes it will. Food has to be at least partially digested in the stomach before it can pass to the small intestine. When the brain senses that food is in the stomach, it commands a muscle at the base of the stomach to constrict, and cut off the passage to the small intestine. The muscle is called the pylorus, or pyloric valve. As long as it remains constricted, little or nothing will move out of the stomach and into the small intestine. If alcohol is in the stomach along with the food, the alcohol will also remain trapped behind the pylorus. Some of the alcohol trapped in the stomach will begin to break down chemically before it ever gets into the blood. In time, as the digestive process continues, the pylorus will begin to relax, and some of the alcohol and food will pass through. But the overall effect will be to slow the absorption significantly. Because the alcohol only slowly gets into the blood, and because the body will continue to process and eliminate the alcohol that does manage to get in there, the drinker's BAC will not climb as high as it would have if he or she had drunk on an empty stomach.

Session 2 – Detection and General Deterrence

Test Your Knowledge

- Name three different chemicals that are alcohols.
- Which of these is beverage alcohol, intended for human consumption?
- What is the chemical symbol for beverage alcohol?
- What is the name of the chemical process by which beverage alcohol is produced naturally?
- What is the name of the process used to produce high concentration beverage alcohol?



DWI Detection and Standardized Field Sobriety Testing

Session 2 – Detection and General Deterrence

Test Your Knowledge

- Blood alcohol concentration is the number of _____ of alcohol in every 100 milliliters of blood.
 - Grams
 - Milligrams
 - Nanograms.



DWI Detection and Standardized Field Sobriety Testing

3. Name three different chemicals that are alcohols.

4. Which of these is beverage alcohol, intended for human consumption?

5. What is the chemical symbol for beverage alcohol?

6. What is the name of the chemical process by which beverage alcohol is produced naturally?

7. What is the name of the process used to produce high concentration beverage alcohol?

8. Multiple choice: Blood alcohol concentration is the number of of alcohol in every 100 milliliters of blood.

- Grams
- Milligrams
- Nanograms

Session 2 – Detection and General Deterrence

Test Your Knowledge

9. True or false: Pound for pound, the average woman contains more water than does the average man

10. What do we mean by the “proof” of an alcoholic beverage?

11. Every chemical that is an “alcohol” contains what three elements?



DWI Detection and Standardized Field Sobriety Testing

Session 2 – Detection and General Deterrence

Test Your Knowledge

12. True or false: Most of the alcohol that a person drinks is absorbed into the blood via the small intestine

13. What is the name of the muscle that controls the passage from the stomach to the lower gastrointestinal track?

14. True or false: Alcohol can pass directly through the stomach walls and enter the bloodstream.



DWI Detection and Standardized Field Sobriety Testing

9. True or false: Pound for pound, the average woman contains more water than does the average man.

10. What do we mean by the "proof" of an alcoholic beverage?

11. Every chemical that is an "alcohol" contains what three elements?

12. True or false: Most of the alcohol that a person drinks is absorbed into the blood via the small intestine.

13. What is the name of the muscle that controls the passage from the stomach to the lower gastrointestinal tract?

14. True or false: Alcohol can pass directly through the stomach walls and enter the bloodstream.

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Participant Manual

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 3 - The Legal Environment

1 Hour 10 Minutes

Session 3

The Legal Environment



DWI Detection and Standardized Field Sobriety Testing

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Learning Objectives

Become familiar with:

- Elements of DWI offenses
- Implied consent
- Chemical test evidence
- Case law



An understanding of impaired driving laws that apply in your jurisdiction is critical to successful DWI enforcement.

All states (and many local jurisdictions) have their own impaired driving laws. While the specific language of these laws may vary significantly, most include the following provisions:

- DWI Law
- Per Se law
- Implied Consent
- Preliminary Breath Testing

At the conclusion of this session, participants will be familiar with:

- Elements of DWI offenses
- Provisions of implied consent
- The relevance of chemical test evidence
- Precedents established through case law

In this session impaired driving laws are discussed in detail. The illustrations provided are drawn from the Uniform Vehicle Code. You are responsible for learning whether and how each law applies in your jurisdiction.

Per Se and DWI

Each defines a separate offense:

- **DWI – driving while under influence**
 - Chemical test is some evidence
- **Per Se – operate while having more than legal percent of alcohol in blood or breath**
 - Chemical test is conclusive evidence



The Per Se law does not replace every other DWI statute. Rather, the two can be prosecuted at the same time. Each defines a separate offense:

- The DWI law makes it an offense to drive while under the influence of alcohol and/or any drug.
- The Per Se law makes it an offense to drive while having more than a certain percentage of alcohol in the blood or breath.

For the DWI offense, the chemical test result is some evidence. For the Per Se offense, the chemical test result is conclusive evidence.

The principal purpose of the Per Se law is to aid in prosecution of DWI offenders. It is not necessary for the prosecutor to show that the driver was "under the influence." It is sufficient for the state to show that the driver's BAC was at or above the state's level.

Important to remember, an officer must still have probable cause to believe that the driver is impaired before making an arrest. Implied consent usually requires that the driver be arrested before the request of a chemical test. The law also requires that the arrest be made for "acts alleged to have been committed while operating a vehicle while under the influence." Therefore, the officer usually must establish probable cause that the offense has been committed and make a valid arrest before the chemical test can be requested.

Elements of Implied Consent

- Operates or controls motor vehicle
- Operator shall be deemed to have given consent to chemical test to determine blood alcohol and/or drug content
- When arrested for DWI
- Drivers who refuse may be subject to license sanctions



Implied consent states drivers must submit to a chemical test(s). The law provides penalties for refusal to submit to the test. The law may also provide that the individual's driver's license may be suspended or revoked if the refusal is found to be unreasonable. The purpose of implied consent is to encourage those arrested for DWI to submit to a chemical test so that valuable evidence may be obtained.

Session 3 – The Legal Environment

Test Your Knowledge

1. If DWI is a criminal offense, the standard of proof is _____.
2. The purpose of implied consent is _____.




DWI Detection and Standardized Field Sobriety Testing 3-20

Session 3 – The Legal Environment

Test Your Knowledge

3. For the Per se offense, chemical test result is _____ evidence.
4. The Per Se law makes it unlawful to _____.




DWI Detection and Standardized Field Sobriety Testing 3-21

Session 3 – The Legal Environment

Test Your Knowledge

5. The PBT law permits a police officer to request a driver suspected of DWI to _____.
6. PBT results are used to help determine _____.




DWI Detection and Standardized Field Sobriety Testing 3-22

INSTRUCTIONS: Complete the following sentences.

1. If DWI is a criminal offense, the standard of proof is _____.

2. The purpose of implied consent is _____.

3. For the Per se offense, chemical test result is _____ evidence.

4. The Per Se law makes it unlawful to _____.

5. The PBT law permits a police officer to request a driver suspected of DWI to _____.

6. PBT results are used to assist in determining _____.

Instructor Guide

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 4 - Overview of Detection, Note Taking, and Testimony

50 Minutes

Session 4

Overview of
Detection,
Note Taking,
and Testimony



DWI Detection and Standardized Field Sobriety Testing

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Learning Objectives

- Three phases of detection
- Tasks and key decision of each phase
- Uses of a standard note taking guide
- Guidelines for effective testimony
 - Conduct a thorough pre-trial review of all evidence and prepare for testimony
 - Provide clear, accurate and descriptive direct testimony concerning DWI Investigations



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

- Describe the three phases of detection.
- Describe the tasks and key decision of each phase.
- Discuss the uses of a standard note taking guide.
- Discuss guidelines for effective testimony.

Detection is both the most important and difficult task in the DWI enforcement effort. If officers fail to detect DWI offenders, the DWI countermeasures program will ultimately fail. If officers do not detect and arrest DWI offenders, then prosecutors cannot prosecute them, the courts and driver licensing officials cannot impose sanctions on them, and treatment and rehabilitation programs will go unused.

<u>CONTENT SEGMENTS</u>	<u>LEARNING ACTIVITIES</u>
A. Three Phases of Detection.....	Instructor-Led Presentation
B. DWI Investigation Field Notes	Reading Assignments
C. Courtroom Testimony	

DWI Detection

The entire process of identifying and gathering evidence to determine if a subject should be arrested for a DWI violation.

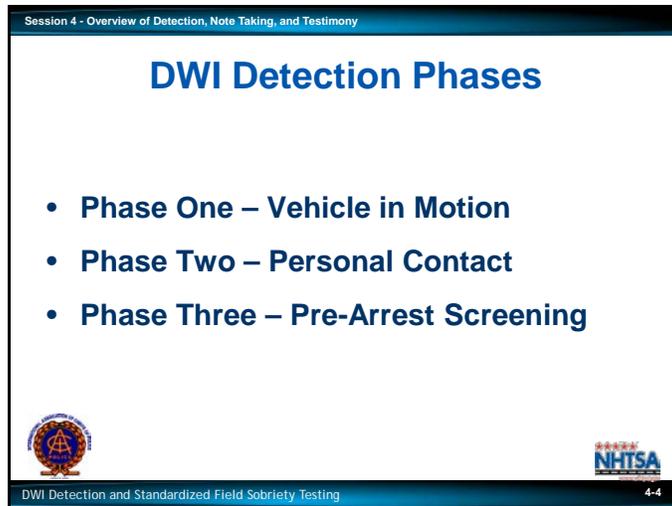


The term DWI detection has been used in many different ways. Consequently it does not mean the same thing to all law enforcement officers. For the purposes of this training, DWI detection is defined as: The entire process of identifying and gathering evidence to determine if a subject should be arrested for a DWI violation.

Detection begins when the officer develops the first suspicion of a DWI violation.

Detection ends when the officer decides whether or not there is sufficient probable cause to arrest the driver for DWI. Your attention may be called to a particular vehicle or individual for a variety of reasons. The precipitating event may be a loud noise, an obvious equipment or moving violation, behavior that is unusual, but not necessarily illegal, or almost anything else. Initial detection may carry with it an immediate suspicion that the driver is impaired; or a slight suspicion; or even no suspicion at all. In any case, it sets in motion a process wherein you focus on a particular vehicle or individual and have the opportunity to observe that vehicle or individual and to gather additional evidence.

The detection process ends when you decide either to arrest or not to arrest the individual for DWI. That decision is based on all of the evidence that has come to light since your attention was first drawn to the vehicle or individual. Effective DWI enforcers do not leap to the arrest/no arrest decision. Rather, they proceed carefully through a series of intermediate steps, each of which helps to identify the collective evidence.



A. Three Phases of Detection

The typical DWI contact involves three separate and distinct phases:

- Phase One: Vehicle in motion
- Phase Two: Personal contact
- Phase Three: Pre-arrest screening

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

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

In Phase Three, you usually have an opportunity to administer Standardized Field Sobriety Tests to the driver to determine impairment.

In addition to SFSTs, some jurisdictions may allow you to administer other field sobriety tests, and/or a preliminary breath test (PBT) to verify that alcohol is the cause of the impairment. PBTs can be used to assist in making an arrest decision and should rarely be the only factor in deciding to arrest. PBTs should be used after administering SFSTs.

The DWI detection process does not always include all three phases. Sometimes there are DWI detection contacts in which Phase One is absent. These are cases in which you have no opportunity to observe the vehicle in motion. This may occur at the crash scene, at a roadblock or checkpoint, or when you have responded to a request for motorist assistance. Sometimes there are DWI contacts in which Phase Three is absent. There are cases in which you would not administer formal tests to the driver. This may occur when the driver is grossly impaired, badly injured, or refuses to submit to tests.

Decisions

- **Phase One: Vehicle in Motion - Should I stop the vehicle?**
- **Phase Two - Personal Contact - Should the driver exit?**
- **Phase Three - Pre-arrest Screening - Is there probable cause to arrest the suspect for DWI?**



In Phase One: Your first task is to observe the vehicle in operation. Based on this observation, you must decide whether there is sufficient cause to command the driver to stop. Your second task is to observe the stopping sequence. You may want to take a picture of the vehicle or scene, especially if the vehicle was involved in a crash.

In Phase Two: Your first task is to observe and interview the driver face to face. Based on this observation, you must decide whether there is sufficient cause to instruct the driver to step from the vehicle for further investigation. Your second task is to observe the driver's exit and walk from the vehicle. You may want to take a photo of the defendant.

In Phase Three: Your first task is to administer structured, formal psychophysical tests. Based on these tests, you must decide whether there is sufficient probable cause to arrest the driver for DWI. Your second task is then to arrange for (or administer) a Preliminary Breath Test.

Session 4 - Overview of Detection, Note Taking, and Testimony

Possible Outcomes

Yes - Do It Now

- Phase One: Yes, there are reasonable grounds to stop the vehicle
- Phase Two: Yes, there is enough reason to suspect impairment to justify getting the driver out of the vehicle for further investigation
- Phase Three: Yes, there is probable cause to arrest driver for DWI right now




DWI Detection and Standardized Field Sobriety Testing 4-7

Session 4 - Overview of Detection, Note Taking, and Testimony

Possible Outcomes

Wait - Look for Additional Evidence

- Phase One: Don't stop the vehicle yet; keep following and observing it longer
- Phase Two: Don't get the driver out of the car yet; keep talking to and observing the driver longer
- Phase Three: Don't arrest the driver yet; administer another field sobriety test before deciding




DWI Detection and Standardized Field Sobriety Testing 4-8

Each of the major decisions can have any one of three different outcomes:

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

Consider the following examples.

Yes - Do It Now

Phase One: Yes, there are reasonable grounds to stop the vehicle.

Phase Two: Yes, there is enough reason to suspect impairment to justify getting the driver out of the vehicle for further investigation.

Phase Three: Yes, there is probable cause to arrest the driver for DWI right now.

Wait - Look for Additional Evidence

Phase One: Don't stop the vehicle yet; keep following and observing it a bit longer.

Phase Two: Don't get the driver out of the car yet; keep talking to and observing the driver a bit longer. (This option may be limited if the officer's personal safety is at risk.)

Phase Three: Don't arrest the driver yet; administer another field sobriety test before deciding.

Session 4 - Overview of Detection, Note Taking, and Testimony

Note Taking and Testimony

- Graphically describe your observations
- Convey evidence clearly and convincingly
- Field notes are only as good as the information they contain




DWI Detection and Standardized Field Sobriety Testing 4-15

Session 4 - Overview of Detection, Note Taking, and Testimony

Use Clear Convincing Language

What is Vague Versus Clear?




DWI Detection and Standardized Field Sobriety Testing 4-16

Note Taking and Testimony

A basic skill needed for DWI enforcement is the ability to graphically describe your observations. Just as detection is the process of collecting evidence, description largely is the process of conveying or articulating evidence.

Successful description demands the ability to convey evidence clearly and convincingly. Your challenge is to communicate evidence to people who weren't there to see, hear and smell the evidence themselves. Your tools are the words that make up your written report and verbal testimony. You must communicate with the supervisor, the prosecutor, the judge, the jury and even with the defense attorney. You are trying to "paint a word picture" for those people, to develop a sharp mental image that allows them to "see" what you saw; "hear" what you heard; and "smell" what you smelled.

Officers with the knowledge, skills and motivation to select the most appropriate words for both written reports and courtroom testimony will communicate clearly and convincingly, making them more successful in DWI prosecution.

Use Clear and Convincing Language

Field notes are only as good as the information they contain. Reports must be clearly written and events accurately described if the reports are to have evidentiary value. One persistent problem with DWI incident reports is the use of vague language to describe conditions, events and statements. When vague language is used, reports provide an inaccurate picture of what happened. Clear and complete field notes help in preparation for your testimony.

Chronology of Testimony

- **Phase One: Vehicle in Motion**
 - ✓ Initial observations of vehicle
 - ✓ Observations during stopping sequence
- **Phase Two: Personal Contact**
 - ✓ Face to face observations
 - ✓ Statements
- **Phase Three Pre-arrest screening**
 - ✓ SFST's
 - ✓ PBT



Chronology of Testimony

In court, your testimony should be organized chronologically and should cover each phase of the DWI incident:

Phase One: Vehicle in Motion – initial observation of vehicle, the driver or both including what first attracted your attention to the vehicle/driver and details about the driving before you initiated the traffic stop

Reinforcing cues, maneuvers or actions, observed after signaling the driver to stop, but before driver's vehicle came to a complete stop.

A “cue” is defined as a reminder or prompting as a signal to do something.

Phase Two: Personal Contact – face to face observations including personal appearance, statements and other evidence obtained during your initial contact with driver.

A “clue” is defined as something that leads to the solution of a problem.

Phase Three: Pre-arrest Screening – sobriety tests administered to the driver and the results of any preliminary breath tests.

Session 4 - Overview of Detection, Note Taking, and Testimony

Test Your Knowledge

DWI detection is defined as _____
 The three phases in a typical DWI contact are:

- Phase One _____
- Phase Two _____
- Phase Three _____

In Phase One, the officer usually has an opportunity to _____




DWI Detection and Standardized Field Sobriety Testing 4-30

Session 4 - Overview of Detection, Note Taking, and Testimony

Test Your Knowledge

Phase Three may not occur if _____
 In Phase Two, the officer must decide _____

Each major decision can have any one of _____ different outcomes.
 These are _____.




DWI Detection and Standardized Field Sobriety Testing 4-31

TEST YOUR KNOWLEDGE

INSTRUCTIONS: Complete the following sentences.

1. DWI detection is defined as _____

2. The three phases in a typical DWI contact are:

Phase One _____
 Phase Two _____
 Phase Three _____

3. In Phase One, the officer usually has an opportunity to _____

4. Phase Three may not occur if _____

5. In Phase Two, the officer must decide _____

6. Each major decision can have any one of 3 different outcomes. These are: _____

Participant Manual

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 5 – Phase One: Vehicle in Motion

1 Hour 30 Minutes

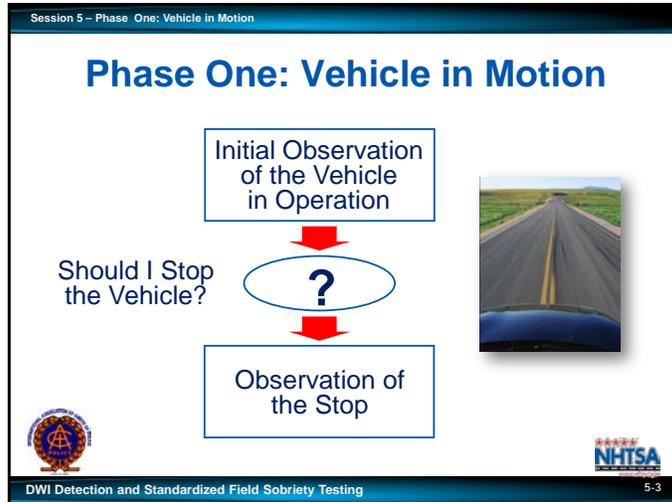
Session 5

Phase One: Vehicle in Motion



DWI Detection and Standardized Field Sobriety Testing

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A. Overview: Tasks and Decision

Your first task in Phase One: Vehicle in Motion is to observe the vehicle in operation to note any initial cues of a possible DWI violation. At this point you must decide whether there is reasonable suspicion to stop the vehicle, either to conduct further investigation to determine if the driver may be impaired, or for another traffic violation. You are not committed to arresting the driver for DWI based on this initial observation, but rather should concentrate on gathering all relevant evidence that may suggest impairment. Your second task during phase one is to observe the manner in which the driver responds to your signal to stop, and to note any additional evidence of a DWI violation.

The first task, observing the vehicle in motion, begins when you first notice the vehicle, driver or both. Your attention may be drawn to the vehicle by such things as:

- A moving traffic violation
- An equipment violation
- An expired registration or inspection sticker
- Unusual driving actions, such as weaving within a lane or moving at a slower than normal speed
- Evidence of drinking or drugs in vehicle

If this initial observation discloses vehicle maneuvers or human behaviors that may be associated with impairment, you may develop an initial suspicion of DWI.

Based upon this initial observation of the vehicle in motion, you must decide whether there is reasonable suspicion to stop the vehicle. At this point you have three choices:

- Stop the vehicle.
- Continue to observe the vehicle.
- Disregard the vehicle.

Session 5 – Phase One: Vehicle in Motion

Motorcycle DUI Detection Guide

Excellent Cues (50% or Greater Probability)

- Drifting during turn or curve
- Trouble with dismount
- Trouble with balance at a stop
- Turning problems
- Inattentive to surroundings
- Inappropriate or unusual behavior
- Weaving




DWI Detection and Standardized Field Sobriety Testing 5-13

Session 5 – Phase One: Vehicle in Motion

Motorcycle DUI Detection Guide

Good cues (30 to 50% probability)

- Erratic movements while going straight
- Operating without lights at night
- Recklessness
- Following too closely
- Running stop light or sign
- Evasion
- Traveling wrong way




DWI Detection and Standardized Field Sobriety Testing 5-14

Research has identified driving impairment cues for motorcyclists.

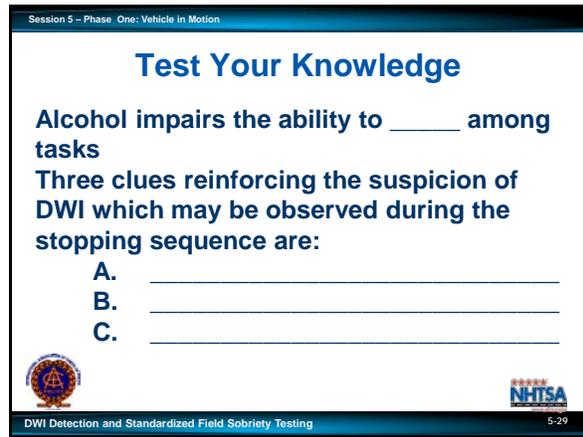
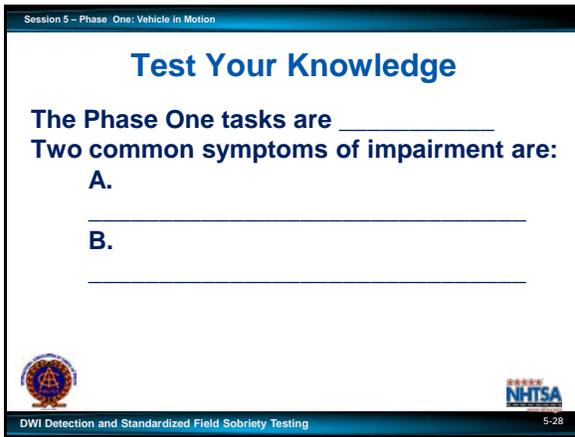
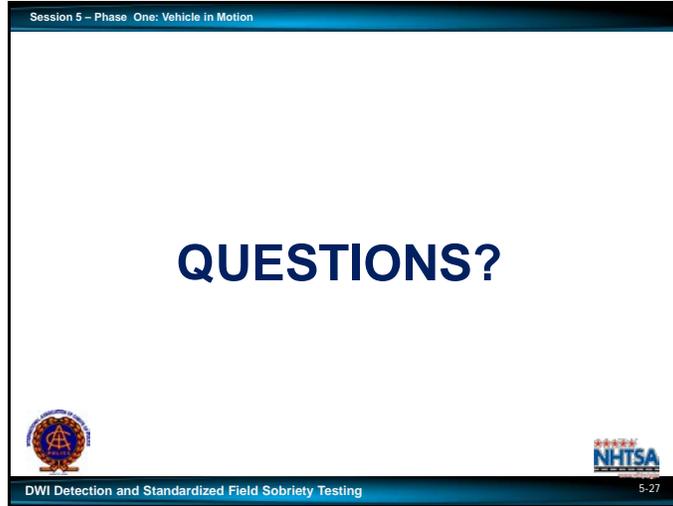
(ANACAPA Sciences, DOT HS 807 839, 1993.)

Excellent cues (50% or greater probability).

- Drifting during turn or curve
- Trouble with dismount
- Trouble with balance at a stop
- Turning problems (e.g., unsteady, sudden corrections, late braking, improper lean angle)
- Inattentive to surroundings
- Inappropriate or unusual behavior (e.g., carrying or dropping object, urinating at roadside, disorderly conduct, etc.)
- Weaving

Good Cues (30 to 50% probability)

- Erratic movements while going straight
- Operating without lights at night
- Recklessness
- Following too closely
- Running stop light or sign
- Evasion
- Traveling wrong way



TEST YOUR KNOWLEDGE

INSTRUCTIONS: Complete the following sentences.

1. The Phase One tasks are _____

2. Two common symptoms of impairment are:

3. Alcohol impairs the ability to _____ among tasks.

4. Three clues reinforcing the suspicion of DWI which may be observed during the stopping sequence are:

Participant Manual

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 6-Phase Two: Personal Contact

1 Hour 30 Minutes

Session 6

Phase Two: Personal Contact



DWI Detection and Standardized Field Sobriety Testing

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Session 6-Phase Two: Personal Contact

Learning Objectives

- Identify typical clues of Detection Phase Two
- Describe observed clues clearly and convincingly




DWI Detection and Standardized Field Sobriety Testing 6-2

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

- Identify typical clues of Detection Phase Two.
- Describe the observed clues clearly and convincingly.

<u>CONTENT SEGMENTS</u>	<u>LEARNING ACTIVITIES</u>
A. Overview: Tasks and Decision.....	Instructor-Led Presentations
B. Typical Investigation Clues of the Driver Interview	Video Presentation
C. Recognition and Description of Investigation Clues	Instructor-Led Demonstrations
D. Interview/Questioning Techniques	Participant Presentations
E. Recognition and Description of Clues Associated with the Exit Sequence	

Session 6-Phase Two: Personal Contact

Phase Two: Personal Contact

**Interview and
Observation
of the Driver**

↓

?

↓

**Observation of
the Exit**



**Should
Driver
Exit?**



DWI Detection and Standardized Field Sobriety Testing 6-3

A. Overview Tasks and Decisions

DWI Detection Phase Two: Personal Contact, like Phases One and Three, comprise two major evidence gathering tasks and one major decision. Your first task is to approach, observe, and interview the driver while they are still in the vehicle to Note any face to face evidence of impairment. During this face to face contact you may administer some simple pre-exit sobriety tests to gain additional information to evaluate whether or not the driver is impaired. After this evaluation, you must decide whether to request the driver to exit the vehicle for further field sobriety testing. In some jurisdictions, departmental policy may dictate that all drivers stopped on suspicion of DWI be instructed to exit. It is important to Note that by instructing the driver to exit the vehicle, you are not committed to an arrest; this is simply another step in the DWI detection process. Once you have requested the driver to exit the vehicle, your second task is to observe the manner in which the driver exits and to Note any additional evidence of impairment.

You may initiate Phase Two without Phase One. This may occur, for example, at a checkpoint, or when you have responded to the scene of a crash.

Task One

The first task of Phase Two, interview and observation of the driver, begins as soon as the driver vehicle and the patrol vehicle have come to complete stops. It continues through your approach to the driver vehicle and involves all conversation between you and the driver prior to the driver's exit from the vehicle.

You may have developed a strong suspicion that the driver is impaired prior to the face to face observation and interview. You may have developed this suspicion by observing something unusual while the vehicle was in motion, or during the stopping sequence. You may have developed no suspicion of DWI prior to the face to face contact. The vehicle operation and the stop may have been normal; you may have seen no actions suggesting DWI.

Session 6: Phase Two: Personal Contact

Interview/Questioning Techniques

- Asking for two things simultaneously
- Asking interrupting or distracting questions
- Asking unusual questions




DWI Detection and Standardized Field Sobriety Testing 6-13

D. Interview/Questioning Techniques

There are a number of techniques you can use to assess impairment while the driver is still behind the wheel. Most of these techniques apply the concept of divided attention. They require the driver to concentrate on two or more things at the same time. They include both questioning techniques and psychophysical (mind/body) tasks.

These techniques are not as reliable as the Standardized Field Sobriety Tests but they can still be useful for obtaining evidence of impairment. **THESE TECHNIQUES DO NOT REPLACE THE SFSTs.**

Questioning Techniques

The questions you ask and the way in which you ask them can constitute simple divided attention tasks. Three techniques are particularly pertinent:

- Asking for two things simultaneously
- Asking interrupting or distracting questions
- Asking unusual questions.

An example of the first technique, asking for two things simultaneously, is requesting the driver to produce both the driver's license and the vehicle registration. Possible evidence of impairment may be observed as the driver responds to this dual request. Be alert for the driver who:

Session 6-Phase Two: Personal Contact

Test Your Knowledge

The two major evidence gathering tasks of Phase Two are _____

The major decision of Phase Two is _____

Among the describable clues an officer might see during the Phase Two interview are: A.
B.
C.



DWI Detection and Standardized Field Sobriety Testing 6-22

Session 6-Phase Two: Personal Contact

Test Your Knowledge

Among the describable clues an officer might hear during the Phase Two interview are:



DWI Detection and Standardized Field Sobriety Testing 6-23

TEST YOUR KNOWLEDGE

INSTRUCTIONS: Complete the following sentences.

1. The two major evidence gathering tasks of Phase Two are

2. The major decision of Phase Two is

3. Among the describable clues an officer might see during the Phase Two interview are:

4. Among the describable clues an officer might hear during the interview are:

Session 6-Phase Two: Personal Contact

Test Your Knowledge

Among the describable clues an officer might *smell* during the Phase Two interview are:




DWI Detection and Standardized Field Sobriety Testing 6-24

Session 6-Phase Two: Personal Contact

Test Your Knowledge

Three techniques an officer might use in asking questions that constitute simple divided attention tasks.

The Countdown Technique requires the subject to:




DWI Detection and Standardized Field Sobriety Testing 6-25

Session 6-Phase Two: Personal Contact

Test Your Knowledge

Leaning against the vehicle is a clue to DWI which may be observed during _____




DWI Detection and Standardized Field Sobriety Testing 6-26

5. Among the describable clues an officer might smell during the interview are:

6. There are three techniques an officer might use in asking questions that constitute simple divided attention tasks. These techniques are:

7. The Count Down Technique requires the driver to _____.

8. Leaning against the vehicle is a clue to DWI which may be observed during the _____.

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Participant Manual

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 7 - Phase Three: Pre-Arrest Screening

40 Minutes

Session 7

Phase Three: Pre-Arrest Screening



DWI Detection and Standardized Field Sobriety Testing

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Nystagmus Indications

- Six maximum clues
- Maximum three clues per eye
- 77% accurate detecting subjects ≥ 0.10 BAC based on original research



-
- When the HGN test is administered always begin with subject's left eye. Each eye is examined for three specific clues.
 - As the eye moves from side to side, does it move smoothly or does it jerk noticeably? (As people become impaired by alcohol, their eyes exhibit a lack of smooth pursuit as they move from side to side.)
 - When the eye moves as far to the side as possible and is kept at that position for four seconds, does it jerk distinctly? (Distinct and sustained nystagmus at maximum deviation is another clue of impairment.)
 - As the eye moves toward the side, does it start to jerk prior to a 45 degree angle? (Onset of nystagmus prior to 45 degrees is another clue of impairment.)
 - As a person's blood alcohol concentration increases it is more likely these clues will appear.
 - The maximum total number of clues is six. The maximum number of clues that may appear in one eye is three.
 - The original research was conducted by the Southern California Research Institute (SCRI) and used to develop the initial curriculum showing this test was 77% accurate at detecting subjects at or above a 0.10 BAC.
-
-
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Session 7 - Phase Three: Pre-Arrest Screening

Divided Attention

Concentrating on more than one thing at a time (mental tasks and physical tasks)



DWI Detection and Standardized Field Sobriety Testing 7-12

E. Divided Attention Tests: Concepts, Examples, Demonstration

Many of the most reliable and useful psychophysical tests employ the concept of divided attention: they require the subject to concentrate on more than one thing at a time (mental tasks and physical tasks). Driving is a complex divided attention task. In order to operate a vehicle safely, subjects must simultaneously control steering, acceleration and braking; react appropriately to a constantly changing environment; and perform many other tasks.

Alcohol and many other drugs reduce a person's ability to divide attention. Impaired subjects often ignore the less critical tasks of driving in order to focus their impaired attention on the more critical tasks. For example, a subject may ignore a traffic signal and focus instead on speed control.

Even when impaired, many people can handle a single, focused attention task fairly well. For example, a subject may be able to keep the vehicle well within the proper traffic lane as long as the road remains fairly straight. However, most people, when impaired, cannot satisfactorily divide their attention to handle multiple tasks at the same time.

The concept of divided attention has been applied to psychophysical testing. Field sobriety tests that simulate the divided attention characteristics of driving have been developed and are being used by law enforcement agencies nationwide. The best of these tests exercise the same mental and physical capabilities that a person needs to drive safely.

PBT Advantages

- Corroborate other evidence
- Confirm officer's judgment
- Confirm alcohol as cause of impairment
- Help establish probable cause for DWI arrest



PBT Advantages

A PBT offers several important advantages for DWI detection. It may:

- Corroborate other evidence by demonstrating that the suspicion of alcohol impairment is consistent with the officer's observations of the subject's mental and physical impairment.
- Confirm the officer's own judgment and help gain confidence in evaluating alcohol impairment accurately, based on observations and psychophysical tests. (Many officers experienced in DWI enforcement find that they rely less and less on the PBT as their confidence in their own powers of detection increases).
- Disclose the possibility of medical complications or impairment due to drugs other than alcohol. (The PBT can confirm or deny that alcohol is the cause of the observed impairment. For example, observed psychophysical impairment coupled with a PBT result showing a very low BAC indicates an immediate need to investigate the possibility that the subject has ingested a drug other than alcohol or suffers from a medical problem).
- Help to establish probable cause for a DWI arrest. (The role of the PBT in establishing probable cause may be affected by the evidentiary value of PBT results in your state. Consult your specific PBT law, your supervisor, or the local prosecutor for clarification, if necessary).

Session 7 - Phase Three: Pre-Arrest Screening

Possible Factors Affecting High PBT

- Residual mouth alcohol
- Breath contaminants



DWI Detection and Standardized Field Sobriety Testing 7-31

Session 7 - Phase Three: Pre-Arrest Screening

Possible Factors Affecting Low PBT

- Breath sample cooling
- Breath sample composition



DWI Detection and Standardized Field Sobriety Testing 7-32

There are two common factors that tend to produce high results on a PBT.

Residual mouth alcohol. After a person takes a drink, some of the alcohol will remain in the mouth. If the person exhales soon after drinking, the breath sample will pick up some of this left over mouth alcohol. In this case, the breath sample will contain an additional amount of alcohol and the test result will be higher than the true BAC.

It takes approximately 15 minutes for the residual alcohol to be eliminated from the mouth.

The only sure way to eliminate this factor is to make sure the subject does not consume any alcohol for at least 15 to 20 minutes before conducting a breath test. Remember, too, most mouthwashes, breath sprays, cough syrups, etc., contain alcohol and may produce residual mouth alcohol. Therefore, do not permit the subject to put anything in their mouth for at least 15 to 20 minutes prior to testing.

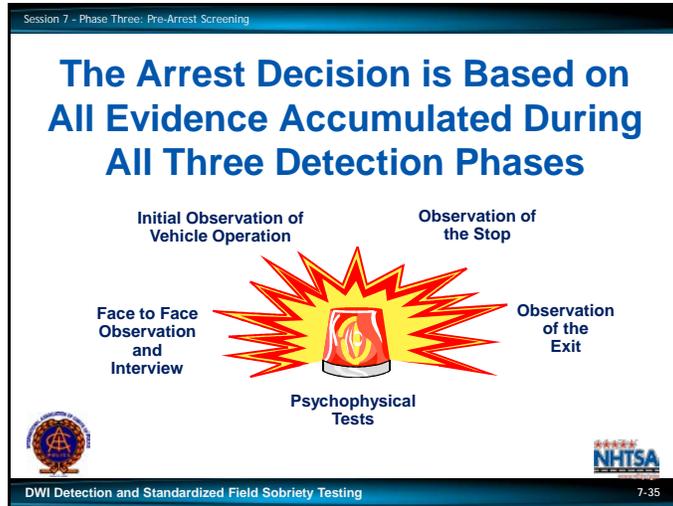
Breath Contaminants. Some types of preliminary breath tests might react to certain substances other than alcohol. For example, substances such as ether, chloroform, acetone, acetaldehyde and cigarette smoke may produce a positive reaction on certain devices. If so, the test would be contaminated and its result would be higher than the true BAC. Normal characteristics of breath samples, such as halitosis (bad breath), food odors, etc., do not affect accuracy.

PBT instruments have accuracy limitations. Although all PBT instruments currently used by law enforcement are reasonably accurate, they are subject to the possibility of error, especially if they are not used properly. There are factors that can affect the accuracy of preliminary breath testing devices. Some of these factors tend to produce "high" test results; others tend to produce "low" results.

There are two common factors that tend to produce low PBT results.

Breath sample cooling. If the captured breath sample is allowed to cool before it is analyzed, some of the alcohol vapor in the breath may turn to liquid and precipitate out of the sample. If that happens, the subsequent analysis of the breath sample will produce a low BAC result.

Breath sample composition. Breath composition means the mixture of the tidal breath and alveolar breath. Tidal breath is breath from the upper part of the lungs and the mouth. Alveolar breath is deep lung breath. Breath testing should be conducted on a sample of alveolar breath, obtained by having the subject blow into the PBT instrument until all air is expelled from the lungs.



G. The Arrest Decision

Your arrest/no arrest decision is the culmination of the DWI detection process. That decision is based on all of the evidence that has come to light since your attention was first drawn to the vehicle or individual.

PHASE ONE:

- Initial observation of vehicle in motion
- Observation of the stop.

PHASE TWO:

- Face to face observation and interview
- Observation of the exit.

PHASE THREE:

- SFSTs
- Preliminary breath tests.

Your decision involves a careful review of each of the observations you have made. Conduct a "mental summary" of the evidence collected during vehicle in motion, personal contact and pre-arrest screening. If all of the evidence, taken together, establishes probable cause to believe that a DWI offense has been committed, you should arrest the subject.

Session 7 - Phase Three: Pre-Arrest Screening

Test Your Knowledge

1. The two major evidence gathering tasks of Phase Three are _____ and _____
2. The major decision in Phase Three is _____
3. The entire DWI detection process culminates in _____
4. Divided attention tests require the subject to _____




DWI Detection and Standardized Field Sobriety Testing 7-36

Session 7 - Phase Three: Pre-Arrest Screening

Test Your Knowledge

5. Among the mental and physical capabilities a person needs to drive safely are these four:
 - A. _____
 - B. _____
 - C. _____
 - D. _____
6. The two stages of the Walk and Turn are:
 - A. _____
 - B. _____




DWI Detection and Standardized Field Sobriety Testing 7-37

TEST YOUR KNOWLEDGE

INSTRUCTIONS: Complete the following sentences.

1. The two major evidence gathering tasks of Phase Three are:

2. The major decision in Phase Three is _____

3. The entire DWI detection process culminates in _____.

4. Divided attention tests require the subject to _____.

5. Among the mental and physical capabilities a person needs to drive safely are these four:

6. The two stages of the Walk and Turn are:

Session 7 - Phase Three: Pre-Arrest Screening

Test Your Knowledge

7. The two stages of the One Leg Stand are:
A.
B.

8. The purpose of PBT is _____

9. Two factors that produce high results on a PBT are:
A.
B.



DWI Detection and Standardized Field Sobriety Testing 7-38

Session 7 - Phase Three: Pre-Arrest Screening

Test Your Knowledge

10. Two factors that produce low results on a PBT are:
A.
B.



DWI Detection and Standardized Field Sobriety Testing 7-39

7. The two stages of the One Leg Stand are:

8. The purpose of PBT is

9. Two factors that produce high results on a PBT are:

10. Two factors that produce low results on a PBT are:

Session 7 - Phase Three: Pre-Arrest Screening

QUESTIONS?



DWI Detection and Standardized Field Sobriety Testing 7-40

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Instructor Guide

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 8 - Concepts and Principles of the Standardized Field Sobriety Tests (SFST)

3 Hours 20 Minutes

Session 8

Concepts and Principles of the Standardized Field Sobriety Tests (SFST)



DWI Detection and Standardized Field Sobriety Testing

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Session 8 - Concepts and Principles of the Standardized Field Sobriety Tests (SFST)

Learning Objectives

- Discuss the development and validity of the research and the standardized elements, clues and interpretation of the three Standardized Field Sobriety Tests
- Discuss types of nystagmus and their effects on the Horizontal Gaze Nystagmus test




DWI Detection and Standardized Field Sobriety Testing 8-2

Session 8 - Concepts and Principles of the Standardized Field Sobriety Tests (SFST)

Learning Objectives

- Proper administration of the three Standardized Field Sobriety Tests
- Recognize clues of the three SFST Tests
- Describe and record results of the three SFSTs on a standard note taking guide
- Identify the limitations of the three SFSTs




DWI Detection and Standardized Field Sobriety Testing 8-3

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

- Discuss the development and validity of the research and the standardized elements, clues and interpretation of the three Standardized Field Sobriety Tests.
- Discuss the different types of nystagmus and their effects on the Horizontal Gaze Nystagmus test.
- Discuss and properly administer the three Standardized Field Sobriety Tests.
- Discuss and properly recognize the clues of the three Standardized Field Sobriety Tests.
- Describe in a clear and convincing manner and properly record the results of the three Standardized Field Sobriety Tests on a standard note taking guide.
- Identify the limitations of the three SFSTs.

CONTENT SEGMENTS..... LEARNING ACTIVITIES

- A. Overview: Development and Validation Instructor-Led Demonstration
- B. SFST Field Validation Studies Participant Practice Session and
- C. Horizontal Gaze Nystagmus Demonstration
- D. Vertical Gaze Nystagmus
- E. Walk and Turn
- F. One Leg Stand
- G. Taking Field Notes on the Standardized Field Sobriety Tests

Original Research Objectives

- Evaluate currently used physical coordination tests to determine their relationship to intoxication and driving impairment
- Develop more sensitive tests that would provide more reliable evidence of impairment
- Standardize the tests and observations



The original research objectives were to:

- Evaluate currently used physical coordination tests to determine their relationship to intoxication and driving impairment
- Develop more sensitive tests that would provide more reliable evidence of impairment
- Standardize the tests and observations.

Beginning in late 1975, extensive scientific research studies were sponsored by NHTSA through a contract with the Southern California Research Institute (SCRI) to determine which roadside field sobriety tests were the most accurate. SCRI published the following three reports:

- California: 1977 (Lab)
- California: 1981 (Lab and Field)
- Maryland, District of Columbia, Virginia, North Carolina: 1983 (Field)

Volunteers Were Subjected to Six Tests

- One Leg Stand
- Finger to Nose
- Finger Count
- Walk and Turn
- Tracing (a paper and pencil exercise)
- Nystagmus (called alcohol gaze nystagmus in final report)



SCRI traveled to law enforcement agencies throughout the United States to select the most commonly used field sobriety tests. Six tests were used in the initial stages of this study.

1. One Leg Stand
2. Finger to Nose
3. Finger Count
4. Walk and Turn
5. Tracing (a paper and pencil exercise)
6. Nystagmus (called alcohol gaze nystagmus in final report).

Laboratory research indicated that three of these tests, when administered in a standardized manner, were a highly accurate and reliable battery of tests for distinguishing BACs at or above 0.10; Horizontal Gaze Nystagmus (HGN), Walk and Turn (WAT), and One Leg Stand (OLS).

The research showed that these three tests were the most accurate and the remaining tests were merely reassessing the same skills.

While many field sobriety tests are valid tests, the Standardized Field Sobriety Tests have been validated through numerous research studies.

Original SCRI Test Data Results

- HGN by itself was 77% accurate
- Walk and Turn was 68% accurate
- One Leg Stand was 65% accurate



NHTSA analyzed the original SCRI research laboratory test data and found:

- HGN, by itself, was 77% accurate
- WAT, by itself, was 68% accurate
- OLS, by itself, was 65% accurate

Third Phase: Field Validation and Standardization Objectives

- Develop standardized, practical and effective procedures for police officers to use in reaching arrest/no arrest decisions
- Test the feasibility of the procedures in enforcement conditions
- Determine if tests discriminate in the field, as well as in the laboratory



B. SFST Field Validation Studies

The final phase of this study was conducted as a field validation.

- Standardized, practical and effective procedures were developed
- Determine the feasibility of the procedures for these tests in actual enforcement conditions
- The tests were determined to discriminate in the field, as well as in the laboratory.

Standardized Elements

- Standardized Administrative Procedures
- Standardized Clues
- Standardized Criteria



The three standardized tests were found to be highly reliable in identifying subjects whose BACs were at or above 0.10. The results of the study unmistakably validated the SFSTs.

The “Standardized” elements included:

- Standardized Administrative Procedures
- Standardized Clues
- Standardized Criteria

Session 8 - Concepts and Principles of the Standardized Field Sobriety Tests (SFST)

Correct Decision

	Arrested Subject	Did Not Arrest Subject
Above Illegal Per Se Limit	I Officer decided to arrest the subject <u>and</u> their BAC was <u>above</u> the illegal per se limit	II Officer decided <u>not</u> to arrest the subject and their BAC was <u>above</u> the illegal per se limit
Below Illegal Per Se Limit	III Officer decided to arrest the subject <u>but</u> their BAC was <u>below</u> the illegal per se limit	IV Officer decided <u>not</u> to arrest the subject and their BAC was <u>below</u> the illegal per se limit




DWI Detection and Standardized Field Sobriety Testing 8-13

Figure 1: Matrix of possible arrest decisions illustrates the four different decisions which are present in all the validation studies. There are four quadrants, each representing a different decision. The quadrants (I and IV) represent a correct arrest decision.

The remaining subjects, incorrect arrest decisions, fall into two other categories. Members of the first group were not arrested, but tested above the illegal per se limit for BAC (quadrant II). The Colorado Study noted that a number (approximately 33%) of these individuals were considered alcohol tolerant and performed well on the SFSTs even though their BACs were above the illegal per se limit. Although these release decisions were recorded as errors based on the procedures outlined in the study, this non arrest decision ultimately benefited the driver.

The subjects in quadrant III were arrested, but their BAC was below the illegal per se limit. Many states stipulate in their statute that a driver is considered DWI if they are either above the illegal per se limit for BAC or have lost the normal use of their mental or physical faculties. Even though the arrests in quadrant III are legally justifiable according to an individual state's statute, these decisions are recorded as errors in the research based on the procedures outlined in the study.

Each of these studies have shown that the SFST three test battery is a scientifically validated and reliable method for distinguishing between impaired and unimpaired drivers.

Colorado Field Validation Study of SFST

- **First full field validation study using SFST experienced law enforcement personnel**
- **86% correct arrest/release decision based on three test battery (HGN, WAT, OLS)**
- **93% of those arrested had a BAC of 0.05 or higher**



“A Colorado Validation Study of Standardized Field Sobriety Test Battery”

- The Colorado SFST validation study was the first full field study that utilized law enforcement personnel experienced in the use of SFSTs.
- The initial 1977 study utilized only a few experienced officers in DWI enforcement in both a laboratory setting and field setting. These officers received approximately four hours of training in field sobriety testing prior to the laboratory study.
- In the Colorado study, correct arrest/release decisions at a 0.05 BAC were 86% accurate based on the three test battery (HGN, WAT, OLS). 93% of arrested drivers had a BAC of 0.05 or higher. These results, by officers who were trained in the Standardized Field Sobriety Testing curriculum, were substantially higher than the initial 1977 study results.

San Diego Field Validation Study of SFST

Based on this study:

- HGN was 88% accurate
- WAT was 79% accurate
- OLS was 83% accurate



- HGN was 88% accurate
- WAT was 79% accurate
- OLS was 83% accurate

The results of this study provide clear evidence of the validity of the three test battery to support arrest decisions at above or below 0.08. It strongly suggests that the SFSTs also identify BACs at 0.04 and above.

Results: Three SFST 1990's Field Studies

Study..... % Correct

Colorado 86% Arrest / Release Decisions

Florida..... 95% Arrest Decisions

San Diego 91% Arrest Decisions

It is necessary to emphasize this validation applies only when:

- The tests are administered in the prescribed, standardized manner,
- The standardization clues are used to assess the suspect's performance,
- The standardization criteria are employed to interpret that performance.

If any one of the SFST elements is changed, the validity may be compromised.

Horizontal Gaze Nystagmus

Involuntary jerking of the eyes,
occurring as the eyes gaze to the side



C. Horizontal Gaze Nystagmus

Definition Review: Involuntary jerking of the eyes, occurring as the eyes gaze to the side.

In addition to being involuntary:

- Person is usually unaware that it is happening.
- Person is powerless to stop it or control it.

Key Summary Point: Alcohol and certain other drugs cause Horizontal Gaze Nystagmus.

Categories of Nystagmus

- Vestibular
- Neural
- Pathological Disorders and Diseases



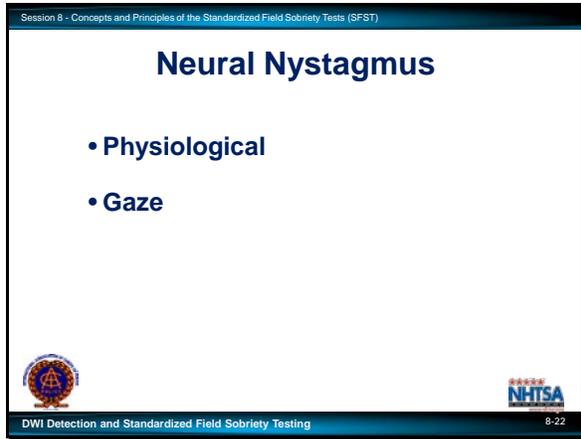
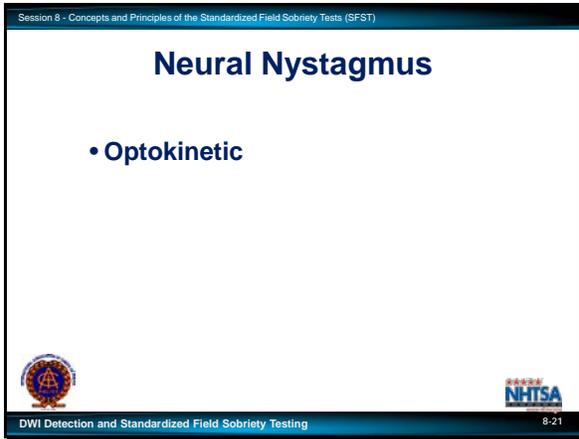
Categories of Nystagmus

Horizontal Gaze Nystagmus is not the only kind of nystagmus. There are other circumstances under which the eyes will jerk involuntarily.

It is important to know some of the other common types of nystagmus, to be aware of their potential impact on our field sobriety tests.

Nystagmus of several different origins may be seen. The three general categories of nystagmus are:

- Vestibular
- Neural
- Pathological Disorders and Diseases



Nystagmus can also result directly from neural activity:

Optokinetic Nystagmus occurs when the eyes fixate on an object that suddenly moves out of sight, or when the eyes watch sharply contrasting moving images.

Examples of optokinetic nystagmus include watching strobe lights, rotating lights, or rapidly moving traffic in close proximity. The Horizontal Gaze Nystagmus test will not be influenced by optokinetic nystagmus when administered properly. During the Horizontal Gaze Nystagmus test, the suspect is required to fixate the eyes on a penlight, pencil or similar object that moves in accordance with the HGN testing procedures, thus optokinetic nystagmus will not occur. The movement of the stimulus and the fixation on the stimulus by the subject precludes this form of nystagmus from being observed by the officer.

Physiological Nystagmus is a natural nystagmus that keeps the sensory cells of the eye from tiring. It is the most common type of nystagmus. It happens to all of us, all the time. This type of nystagmus produces extremely minor tremors or jerks of the eyes. These tremors are usually too small to be seen with the naked eye. Physiological nystagmus will have no impact on our Standardized Field Sobriety Tests, because it's tremors are usually invisible.

Gaze Nystagmus is a form of nystagmus that occurs when the eyes attempt to maintain visual fixation on a stimulus.

Gaze Nystagmus

- Horizontal
- Vertical
- Resting



For our purposes, gaze nystagmus is separated into three types:

- Horizontal
- Vertical
- Resting

Pathological Disorders and Diseases

Pathological Nystagmus - Caused by the presence of specific pathological disorder, which include brain tumors, other brain damage, or some diseases of the inner ear.



Pathological Nystagmus. Caused by the presence of specific pathological disorder, which include brain tumors, other brain damage, or some diseases of the inner ear.

Medical Impairment

- Equal pupil size
- Resting nystagmus
- Equal tracking



Medical Impairment

The examinations that you conduct to assess possible medical impairment include:

- Equal pupil size
- Resting nystagmus
- Equal tracking

Pupil size will be affected by some medical conditions or injuries. If the two pupils are distinctly different in size, it is possible that the subject:

- Has a prosthetic eye
- Is suffering from a head injury
- Has a neurological disorder

Resting nystagmus is referred to as jerking as the eyes look straight ahead. This condition is not frequently seen. Its presence usually indicates a pathology or high doses of a drug such as a Dissociative Anesthetic like PCP.

Resting nystagmus may also be a medical problem.

Tracking ability will be affected by certain medical conditions or injuries involving the brain.

This observation is a medical assessment. If the two eyes do not track together, the possibility of a serious medical condition or injury is present.

HGN Testing: Three Clues

- Lack of smooth pursuit
- Distinct and sustained Nystagmus at maximum deviation
- Onset of Nystagmus prior to 45 degrees



Procedures of Horizontal Gaze Nystagmus Testing: The Three Clues

The test you will use at roadside is "Horizontal Gaze Nystagmus" -- an involuntary jerking of the eyes occurring as the eyes gaze to the side. When a person is impaired by alcohol or certain drugs, some jerking will be seen if the eyes are moved far enough to the side.

- The Lack of Smooth Pursuit (Clue Number One) - The eyes can be observed to jerk or "bounce" as they follow a smoothly moving stimulus, such as a pencil or penlight. The eyes of an impaired person will not follow smoothly, i.e., a marble rolling across sand paper, or windshield wipers moving across a dry windshield.
- Distinct and Sustained Nystagmus At Maximum Deviation (Clue Number Two) - Distinct and sustained nystagmus is evident when the eye is held at maximum deviation for a minimum of four seconds and continues to jerk toward the side.
- Onset of Nystagmus Prior To 45 Degrees (Clue Number Three) - The point at which the eye is first seen jerking. If the jerking begins prior to 45 degrees it is evident that the person has a BAC above 0.08, as shown by recent research.

The higher the degree of impairment, the sooner the nystagmus will be observable.

Administrative Procedures

- Check for eyeglasses
- Verbal instructions
- Position stimulus (12-15 inches and slightly above eye level)
- Check for equal pupil size and resting nystagmus
- Check for equal tracking
- Lack of smooth pursuit
- Distinct and sustained nystagmus at maximum deviation
- Onset of nystagmus prior to 45 degrees
- Total the clues
- Check for vertical nystagmus



Horizontal and Vertical Gaze Nystagmus can be observed directly and does not require special equipment. You will need a contrasting stimulus for the subject to follow with their eyes. This can be a penlight or pen. The stimulus used should be held slightly above eye level, so that the eyes are wide open when they look directly at it. It should be held approximately 12 - 15 inches in front of the nose. Remain aware of your position in relation to the subject at all times.

OFFICER SAFETY IS THE NUMBER ONE PRIORITY ON ANY TRAFFIC STOP.

Administrative Procedures

- Check for eyeglasses
 - Verbal instructions
 - Position stimulus (12-15 inches and slightly above eye level)
 - Check for equal pupil size and resting nystagmus
 - Check for equal tracking
 - Lack of smooth pursuit
 - Distinct and sustained nystagmus at maximum deviation
 - Onset of nystagmus prior to 45 degrees
 - Total the clues
 - Check for vertical nystagmus
-
-
-
-
-
-

Session 8 - Concepts and Principles of the Standardized Field Sobriety Tests (SFST)

HGN Procedures

1. Check for eyeglasses
2. Verbal instructions
3. Position stimulus




DWI Detection and Standardized Field Sobriety Testing 8-34

Session 8 - Concepts and Principles of the Standardized Field Sobriety Tests (SFST)

HGN Procedures

4. Pupil size and resting nystagmus
5. Equal tracking




DWI Detection and Standardized Field Sobriety Testing 8-35

Administrative Procedures for Horizontal Gaze Nystagmus

It is important to administer the Horizontal Gaze Nystagmus test systematically using the following steps, to ensure that nothing is overlooked.

There are 10 steps in the systematic administration of the Horizontal Gaze Nystagmus test.

Step 1: Check for Eyeglasses. (Note if subject wears contacts, especially colored contacts because some colored contacts may affect the ability to compare pupil size)

Begin by instructing the subject to remove eyeglasses, if worn.

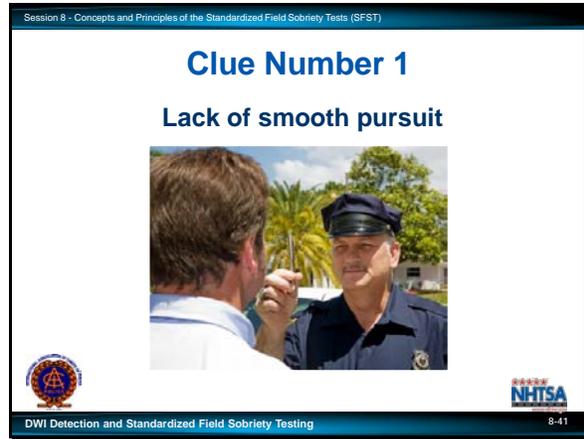
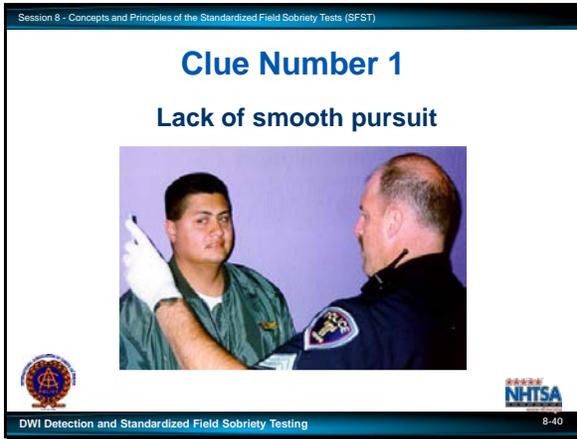
It does not matter whether the subject can see the stimulus with perfect clarity. The subject just needs to see it and be able to follow it.

Step 2: Verbal Instructions.

Give the subject the appropriate verbal instructions:

Point out that officers' should note whether subject sways, wobbles, etc. while trying to balance.

- Put feet together, hands at the side
- Keep head still
- Look at the stimulus
- Follow movement of the stimulus with the eyes only
- Keep looking at the stimulus until told the test is over



Clue No. 1: Lack of Smooth Pursuit

The first clue requires that the subject move the eye to follow the motion of a smoothly moving stimulus.

The stimulus may be the eraser on a pencil, the tip of a penlight, the tip of your finger, or any similar small object.

Begin by holding the stimulus vertically approximately 12 - 15 inches (30 - 38 cm) in front of the subject's nose, and slightly above eye level.

Move the stimulus smoothly all the way out to the right (checking subject's left eye first) then move the stimulus smoothly all the way across the subject's face to the left side (checking the subject's right eye), then back to center. Carefully watch the subject's left eye and determine if it is able to pursue smoothly.

Make at least two complete passes with the stimulus

If a person is not impaired by alcohol (or drugs that cause HGN), the eyes should move smoothly as the object is moved back and forth.

Analogy: movement of the eyes of a person not impaired by alcohol (or drugs that cause HGN) will be similar to the movement of windshield wipers across a wet windshield versus an impaired person and windshield wipers moving across a dry windshield.

Mechanics of Clue Number 3



The Mechanics of Clue No. 3

The stimulus is positioned approximately 12 - 15 inches from (30 - 38 cm) subject's nose and slightly above eye level. It is necessary to move the stimulus slowly to identify the point at which the eye begins to jerk.

Start moving the stimulus towards the right side (left eye) at the speed that would take approximately 4 seconds for the stimulus to reach a 45 degree angle.

As you are slowly moving the stimulus, watch the eye carefully for any sign of jerking.

When you see the jerking begin, immediately stop moving the stimulus and hold it steady at that position.

With the stimulus held steady, look at the eye and verify that the jerking is continuing.

If the jerking is not evident with the stimulus held steady, you have not located the point of onset. Therefore, resume moving the stimulus slowly toward the side until you notice the jerking again.

When you locate the point of onset of nystagmus, you must determine whether it is prior to 45 degrees.

Mechanics of Clue Number 3



Verify that some white is still showing in the corner of the eye.

Examine the alignment between the stimulus and the edge of the subject's shoulder.

Start moving the stimulus towards the left side (right eye) at the speed that would take approximately 4 seconds for the stimulus to reach a 45 degree angle.

As you are slowly moving the stimulus, watch the eye carefully for any sign of jerking.

When you see the jerking begin, immediately stop moving the stimulus and hold it steady at that position.

With the stimulus held steady, look at the eye and verify that the jerking is continuing.

If the jerking is not evident with the stimulus held steady, you have not located the point of onset. Therefore, resume moving the stimulus slowly toward the side until you notice the jerking again.

When you locate the point of onset of nystagmus, you must determine whether it is prior to 45 degrees.

Verify that some white is still showing in the corner of the eye.

Vertical Gaze Nystagmus



D. Vertical Gaze Nystagmus (VGN)

The Vertical Gaze Nystagmus test is simple to administer. During the Vertical Gaze Nystagmus test, look for jerking as the eyes move up and are held for a minimum of four seconds at maximum elevation.

- Position the stimulus horizontally, about 12 - 15 inches in front of the subject's nose.
- Instruct the subject to hold the head still, and follow the object with the eyes only.
- Raise the object until the subject's eyes are elevated as far as possible.
- Hold for a minimum of four seconds.
- Watch closely for evidence of the eyes jerking upward.

Walk and Turn Test Clues

- **Starts too soon**
- **Stops while walking**
- **Does not touch heel-to-toe**



Starts too soon. The impaired person may also keep balance, but not listen to the instructions. Since you specifically instructed the subject not to start walking "until I tell you to begin," record this clue if the subject does not wait.

Stops while walking. The subject stops while walking. Do not record this clue if the subject is merely walking slowly.

Does not touch heel-to-toe. The subject leaves a space of more than one half inch between the heel and toe on any step.

Walk and Turn Test Clues

- Steps off line
- Uses arms to balance
- Improper turn
- Incorrect number of steps



Steps off the line. The subject steps so that one foot is entirely off the line.

Uses arms to balance. The subject raises one or both arms more than 6 inches from the sides in order to maintain balance.

Improper turn. The subject removes the front foot from the line while turning. Also record this clue if the subject has not followed directions as instructed, i.e., spins or pivots around or loses balance while turning.

Incorrect number of steps. Record this clue if the subject takes more or fewer than nine steps in either direction.

Walk and Turn Test Criterion

**2 or more clues indicates BAC
at or above 0.08 (79% accurate)**



Based on recent research, if the subject exhibits two or more clues on this test or fails to complete it, classify the subject's BAC as at or above 0.08. Using this criterion, you will be able to accurately classify 79% of your subjects.

Review of Divided Attention Definition

Walk and Turn is a field sobriety test based on the important concept of divided attention.

The test requires the subject to divide attention among mental tasks and physical tasks.

The mental tasks include comprehension of verbal instructions; processing of information; and, recall of memory.

The physical tasks include balance and coordination; the subject is required to maintain balance and coordination while standing still, walking, and turning.

Administrative Procedures

Balance and counting stage:

- Raise either leg
- Keep raised foot approximately six inches (15 cm) off ground, parallel to the ground
- Keep both legs straight and arms at your side
- Keep eyes on raised foot
- Count out loud in the following manner: “one thousand one, one thousand two, one thousand three and so on”, until told to stop



Demonstrations and Instructions for the Balance and Counting Stage

Explain the test requirements, using the following verbal instructions, accompanied by demonstrations:

When I tell you to start, raise either leg with the foot approximately six inches off the ground, keeping your foot parallel to the ground.

Keep both legs straight and your arms at your side.

While holding that position, count out loud in the following manner: “one thousand one, one thousand two, one thousand three,” and so on until told to stop.

Keep your arms at your sides at all times and keep watching the raised foot.

Do you understand?

Go ahead and perform the test. (Officer should always time the 30 seconds. Test should be discontinued after 30 seconds.)

Observe the subject from a safe distance.

One Leg Stand Test Clues

- **Sways while balancing**
- **Uses arms to balance**
- **Hopping**
- **Puts foot down**



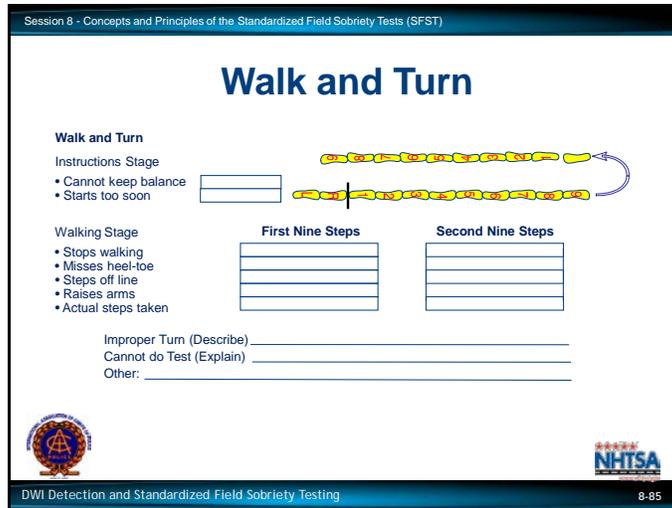
Test Interpretation

You may observe a number of different behaviors when a subject performs this test. The original research found the behaviors listed below are the most likely to be observed in someone with a BAC at or above 0.08. When administering the One Leg Stand test, we look for certain specific behaviors. Each behavior or action is considered one clue. There is a maximum number of 4 clues on this test. Look for the following clues each time the One Leg Stand test is administered.

The subject sways while balancing. This refers to side to side or back and forth motion while the subject maintains the One Leg Stand position.

Slight tremors of the foot or body should not be interpreted as swaying.

Uses arms to balance. Subject moves arms 6 or more inches from the side of the body in order to keep balance.



The section on the Walk and Turn test appears at the top of the guide's back side.

First two clues are checked only during the instructions stage.

In the boxes provided check (√) the number of times the clue appears during the instructions stage.

Example: if subject loses balance twice during the instructions stage, Place two (√) check marks in the box.

Example: If the subject does not start too soon, write "0" in that box.

Record the next four clues separately for each nine steps.

If subject stops walking, record it by drawing a vertical line from the toe at the step at which the stop occurred and place a letter "S" at bottom of vertical line to indicate "stops walking". Do this for each of the nine steps.

How many times during first nine steps?

How many times during second nine steps

If subject fails to touch heel-to-toe, record how many times this happens and place a letter "M" at bottom of vertical line to indicate missed heel-to-toe.

If subject steps off the line while walking, record it by drawing a line from the appropriate footprint at the angle in the direction in which the foot stepped. Do this for each nine steps.

If subject uses arms to balance, give some indication of how often or how long this happens.

Example: subject raised arms from sides three times

Place three (√) check marks in the box.

Record the actual number of steps taken by subject, in each direction.

Session 8 - Concepts and Principles of the Standardized Field Sobriety Tests (SFST)

One Leg Stand Field Notes

One Leg Stand:



L	R	
<input type="checkbox"/>	<input type="checkbox"/>	Sways while balancing
<input type="checkbox"/>	<input type="checkbox"/>	Uses arms to balance
<input type="checkbox"/>	<input type="checkbox"/>	Hopping
<input type="checkbox"/>	<input type="checkbox"/>	Puts foot down

Type of Footwear: _____
 Other: _____

DWI Detection and Standardized Field Sobriety Testing 8-07

Type of Footwear _____

Record the subject's performance separately.

For each clue, record how often it appears with a (√) check mark.

If subject sways, indicate how often with a (√) check mark.

Indicate above the feet the number they were counting when they put their foot down.

Check marks should be made to indicate the number of times the subject swayed, used arms, hopped or put foot down.

Place (√) check marks in or near the small boxes to indicate how many times you observed each of the clues.

In addition, if the subject puts the foot down during the test, record when it happened. To do this, write the count number at which the foot came down.

For example, suppose that, when standing on the left leg, the subject lowered the right foot at a count of "one thousand thirteen," and again at "one thousand twenty."

If subject uses arms to balance, indicate how often arms were raised.

If subject is hopping, indicate how many hops were taken.

If subject puts foot down, indicate how many times the foot came down.

If the subject is unable to safely complete the test, you may stop the test early. Document the reasons the test was stopped.

Session 8 - Concepts and Principles of the Standardized Field Sobriety Tests (SFST)

Test Your Knowledge

1. Walk and Turn is an example of _____ field sobriety test.
2. The Walk and Turn requires a real or imaginary line and _____
3. During the _____ stage of the Walk and Turn, the suspect is required to count out loud.




DWI Detection and Standardized Field Sobriety Testing 8-88

Session 8 - Concepts and Principles of the Standardized Field Sobriety Tests (SFST)

Test Your Knowledge

4. Based upon the San Diego study, the Walk and Turn test can determine whether a subject's BAC is above or below 0.08, _____ % of the time
5. In the Walk and Turn test, a subject who steps off the line during the first 9 steps and once again during the second 9 steps and who raises arms for balance twice during the second 9 steps has produced _____ distinct clue(s).




DWI Detection and Standardized Field Sobriety Testing 8-89

TEST YOUR KNOWLEDGE

INSTRUCTIONS: Complete the following sentences.

1. Walk and Turn is an example of _____ field sobriety test.

2. The Walk and Turn requires a real or imaginary line and _____

3. During the _____ stage of the Walk and Turn, the subject is required to count out loud.

4. Based upon the San Diego study, the Walk and Turn test can determine whether a subject's BAC is above or below 0.08, _____ % of the time.

5. In the Walk and Turn test, a subject who steps off the line during the first 9 steps and once again during the second 9 steps and who raises arms for balance twice during the second nine steps has produced _____ distinct clue(s).

Session 8 - Concepts and Principles of the Standardized Field Sobriety Tests (SFST)

Test Your Knowledge

- The Walk and Turn test has _____ possible clues.
- During the _____ stage of the One Leg Stand test the subject must maintain balance while standing on one foot
- The One Leg Stand test requires that the subject keep the foot raised for _____ seconds.




DWI Detection and Standardized Field Sobriety Testing 8-90

Session 8 - Concepts and Principles of the Standardized Field Sobriety Tests (SFST)

Test Your Knowledge

- Based upon the San Diego study, the One Leg Stand test can determine whether a subject's BAC is above or below 0.08, _____ % of the time
- In the One Leg Stand test, a subject who sways has produced _____ clue(s)
- In the One Leg Stand test, a subject who raises arms, is hopping, and puts foot down has produced _____ clue(s).




DWI Detection and Standardized Field Sobriety Testing 8-91

6. The Walk and Turn test has _____ possible clues.

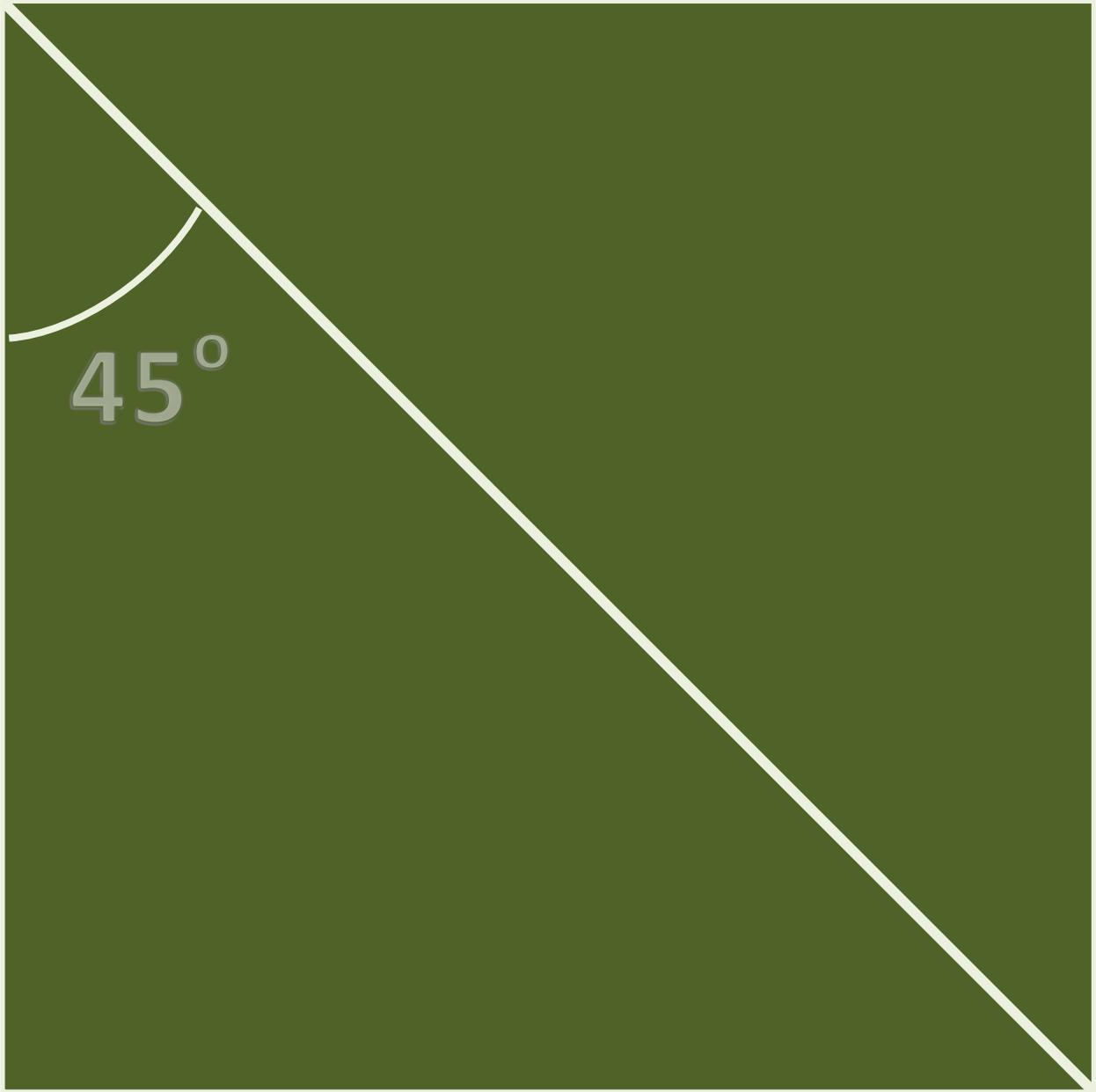
7. During the _____ stage of the One Leg Stand test the subject must maintain balance for 30 seconds.

8. The One Leg Stand requires that the subject keep the foot elevated for _____ seconds.

9. Based upon the San Diego study, the One Leg Stand test can determine whether a subject's BAC is above or below 0.08, _____ % of the time.

10. In the One Leg Stand test, a subject who sways has produced _____ clue(s).

11. In the One Leg Stand test, a subject who raises arms, is hopping, and puts foot down has produced _____ clue(s).



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Participant Manual

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 9 - Test Battery Demonstrations

40 Minutes

Session 9

Test Battery Demonstrations



DWI Detection and Standardized Field Sobriety Testing

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Participant Manual

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 10 - "Dry Run" Practice Session

50 Minutes

Session 10

"Dry Run" Practice Session



DWI Detection and Standardized Field Sobriety Testing

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**PARTICIPANT PROFICIENCY EXAMINATION
STANDARDIZED FIELD SOBRIETY TEST BATTERY**

Name _____ Date _____ / _____ / _____

Agency _____

I. HORIZONTAL GAZE NYSTAGMUS

1. ___ Have subject remove glasses if worn.
2. ___ Stimulus held in proper position (approximately 12"-15" from nose, just slightly above eye level).
3. ___ Check for equal pupil size and resting nystagmus.
4. ___ Check for equal tracking.
5. ___ Smooth movement from center of nose to maximum deviation in approximately 2 seconds and then back across subject's face to maximum deviation in right eye, then back to center. Check left eye, then right eye. (Repeat)
6. ___ Eye held at maximum deviation for a minimum of 4 seconds (no white showing). Check left eye, then right eye. (Repeat)
7. ___ Eye moved slowly (approximately 4 seconds) from center to 45 angle. Check left eye, then right eye. (Repeat)
8. ___ Check for Vertical Gaze Nystagmus. (Repeat)

II. WALK AND TURN

1. ___ Instructions given from a safe position.
2. ___ Tells subject to place feet on a line in heel-to-toe manner (left foot behind right foot) with arms at sides and gives demonstration.
3. ___ Tells subject not to begin test until instructed to do so and asks if subject understands.
4. ___ Tells subject to take nine heel-to-toe steps on the line and demonstrates.
5. ___ Explains and demonstrates turning procedure.
6. ___ Tells subject to return on the line taking nine heel-to-toe steps.
7. ___ Tells subject to count steps out loud.
8. ___ Tells subject to look at feet while walking.
9. ___ Tells subject not to raise arms from sides.
10. ___ Tells subject not to stop once they begin.
11. ___ Asks subject if all instructions are understood.

III. ONE LEG STAND

1. ____ Instructions given from a safe position.
2. ____ Tells subject to stand straight, place feet together, and hold arms at sides.
3. ____ Tells subject not to begin test until instructed to do so and asked if subject understands.
4. ____ Tells subject to raise one leg, either leg, approximately 6" from the ground, keeping raised foot parallel to the ground, and gives demonstration.
5. ____ Tells subject to keep both legs straight and to look at elevated foot.
6. ____ Tells subject to count out loud in the following manner: one thousand one, one thousand two, one thousand three, and so on until told to stop, and gives demonstration.
7. ____ Checks actual time subject holds leg up. (Time for 30 seconds.)

Instructor: _____

Note: In order to pass the proficiency examination, the student must explain and proficiently complete each of the steps listed.

Instructor Guide

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 11 - "Testing Subjects" Practice First Session

2 Hours

Session 11

**"Testing Subjects"
Practice: First Session**



DWI Detection and Standardized Field Sobriety Testing

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Sample Dry Erase Board Array for Tabulating Results

"Designated Subjects"	Horizontal Gaze Nystagmus	Walk and Turn	One Leg Stand	Arrest?
"A"				
"B"				
"C"				
"D"				
"E"				
"F"				
"G"				
"H"				
"I"				
"J"				

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Participant Manual

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 11 - "Testing Subjects" Practice First Session

2 Hours

Session 11-A

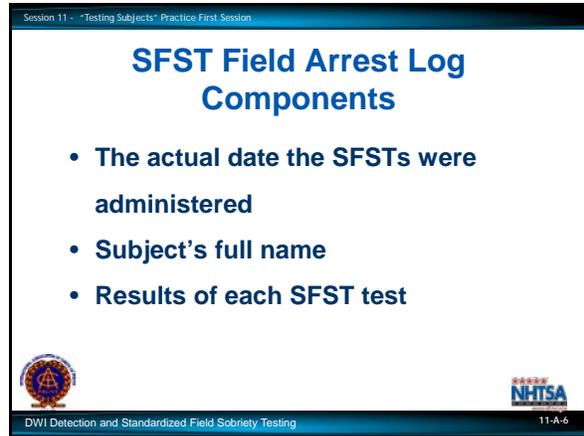
Dry Lab



DWI Detection and Standardized Field Sobriety Testing

11-A-1

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C. Use and Maintenance of SFST Field Arrest Log (IACP strongly recommends the use of this log)

The SFST Field Arrest Log is used to record the results of the SFSTs performed on suspected impaired subjects.

This log is important in documenting an officer's experience and proficiency in performing and interpreting SFSTs.

This log has the following components:

- The actual date the SFSTs were administered
- Subject's full name
- Results of each SFST test
- Classification of BAC as above or below 0.08 BAC
- Arrest/Not Arrest
- Subject's measured BAC (if available)
- Remarks

Utilization of Log

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Participant Manual

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 12 - Processing the Arrested Subject and Preparation for Trial

1 Hour 30 Minutes

Session 12

**Processing the Arrested
Subject and Preparation
for Trial**



DWI Detection and Standardized Field Sobriety Testing

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Session 12 - Processing the Arrested Subject and Preparation for Trial

Learning Objectives

- Discuss the importance of correct processing and report writing procedures in DWI arrests
- Discuss the correct sequence of DWI processing procedures




DWI Detection and Standardized Field Sobriety Testing 12-2

- Discuss the importance of correct processing and report writing procedures in DWI arrests
- Discuss the correct sequence of DWI processing procedures

<u>CONTENT SEGMENTS</u>	<u>LEARNING ACTIVITIES</u>
A. The Processing Phase.....	Instructor-Led Presentations
.....	Video Presentation
B. Narrative DWI Arrest Report	
C. Case Preparation and Pretrial Conference	Interactive Discussion
.....	Instructor-Led Demonstrations
D. Guidelines for Direct Testimony.....	Participant Presentations

The foundation for preparation and successful testimony is the relationship between the law enforcement officer(s) involved with the arrest and the prosecuting attorney(s) associated with the case. Effective communication and a clear understanding of each group’s objectives and expectations is essential for successful prosecution.

Session 12 - Processing the Arrested Subject and Preparation for Trial

Foundation for Successful Testimony

- Relationship between the law enforcement officer(s) involved with the arrest and the prosecuting attorney(s)
- Communication




DWI Detection and Standardized Field Sobriety Testing 12-4

Session 12 - Processing the Arrested Subject and Preparation for Trial

Testimony

- Be prepared to speak to the evidence
- Take time
- Listen
- Organize your response before answering questions




DWI Detection and Standardized Field Sobriety Testing 12-5

A. The Processing Phase

The foundation for preparation and successful testimony is the relationship between the law enforcement officer(s) involved with the arrest and the prosecuting attorney(s) associated with the case. Effective communication and a clear understanding of each group’s objectives and expectations is essential for successful prosecution.

You, as the state’s primary witness, play an important part in illustrating to the judge/jury the impairment of the defendant. In addition to verbal testimony, visual aids are often helpful in painting the picture of the entire DWI detection process. Visual aids engage the judge/jury and increase the retention of information. In addition, it is important that you do not use legal, law enforcement or medical terms unless absolutely necessary. The use of plain English assists the judge, jury and others involved in the case to understand the specifics of all the testimony.

Since testimony constitutes the majority of time spent in trial, it is imperative that, in addition to effective communication techniques, the witness be well prepared to speak to the evidence related to the case. Direct examination is your opportunity to tell the story. It should be an exchange between the prosecutor and the law enforcement officer. Take the time to think and make sure that you completely understand the question and organize your response before you answer. NEVER answer a question that you do not fully understand. Cross examination is NOT the time to showboat. Always, listen carefully to the question and again make sure you completely understand the question before you answer. If you do not understand the question, ask for clarification. If you are not able to fully understand the question during direct or cross examination, it is acceptable to say “I do not know,” “I cannot answer that question” or “I cannot answer that question without further explanation.” Always make sure you listen closely to the question and don’t answer a question you don’t understand.

Remember: When it comes to successful testimony, there is NO substitution for preparation.

Types of Evidence

- **Physical evidence**
- **Established facts**
- **Illustrative evidence**
- **Demonstrative evidence**
- **Written documentation**
- **Testimony**



Evidence of a DWI violation may be of various types:

- Physical (or real) evidence: something tangible, visible, audible (e.g. a blood sample or a partially empty can of beer).
- Well established facts (e.g. judicial notice of accuracy of the breath test device when proper procedures are followed).
- Illustrative evidence: visual aids (e.g., photo of the crash scene, defendant, or diagram of the roadway).
- Demonstrative evidence: demonstrations performed in courtroom (e.g., SFSTs or other field sobriety tests).
- Written documentation (e.g. the citation, the alcohol influence report, the drug evaluation report, evidential chemical test results, etc.).
- Testimony (the officer's verbal description of what was seen, heard, smelled, etc.).

Guidelines for Note Taking

- **Recognition and retention of facts that establish reasonable suspicion to stop, investigate further, and have probable cause to arrest**
- **Detection evidence must establish each element of the violation**
- **Recognize and recall facts and circumstances**
- **Rely on your own field notes**



Guidelines for Note Taking

One of the critical tasks in the DWI enforcement process is the recognition and retention of facts that establish reasonable suspicion to stop the driver, investigate further, and the probable cause to arrest persons for DWI. The evidence gathered during the detection process must establish each element of the violation and must be documented to support successful prosecution of the defendant. This evidence is largely sensory (see, smell, hear) in nature and therefore is extremely short lived.

Law enforcement officers must be able to recognize and act on facts and circumstances with which they are confronted. But the officer must also be able to recall those observations, and describe them clearly and convincingly, to secure a conviction. The officer is inundated with evidence of DWI (sights, sounds, smells, etc.) recognizes it, and bases the decision to stop, investigate and arrest on their observations.

Since evidence of a DWI violation is short lived, police officers need a system and tools for recording field notes at scenes of DWI investigations. Technological advances have made it possible to use audio, video, and digital recorders in the field. They provide an excellent means of documenting this short lived evidence. However, the vast majority of officers must rely on their own field notes.

One way of improving the effectiveness of field notes is to use a structured note taking guide. This type of form makes it very easy to record brief notes on each step of the detection process and ensures that vital evidence is documented. Field notes provide the information necessary for completion of required DWI report forms and assist the officer in preparing a written narrative of the investigation. Since they can be used to refresh the officer's memory, field notes could be useful if the officer is required to provide oral testimony.

Session 12 - Processing the Arrested Subject and Preparation for Trial

Writing the Report

- Initial observation
- Vehicle stop
- Contact with driver
- Driving or actual physical control



DWI Detection and Standardized Field Sobriety Testing 12-16

The following block outline format identifies some of the important components in a DWI arrest/narrative report:

Initial Observations - Describe your first observations of the driver's actions. What drew your attention to the vehicle/driver? Your first observations are important because they help establish your reasonable suspicion to stop. This should include details about the driving before you initiated the traffic stop. Be sure to record the time and location of the first event.

Vehicle Stop - Record any unusual actions taken by the driver. How did the driver react to the emergency light and/or siren? How far did the driver travel after emergency equipment was activated? How did the driver pull over? Was it a normal stop? Be detailed and specific.

Contact With Driver - Record your observations of the driver's personal appearance, condition of the eyes, speech, odors, inappropriate or inconsistent responses to questions, etc. Record the name and condition of passengers in the vehicle and where they were located. Describe any unusual actions taken by the driver or passengers.

Driving or Actual Physical Control - In some cases, you may not use the driving behavior as the basis for the contact. Your first contact could result from a crash investigation or a motorist assistance type of contact. Your observations and documentation must establish that the driver was operating or in actual physical control of the vehicle. You can use circumstantial evidence, such as seat belt marks, ownership of the vehicle, location of the keys, admissions, witness statements, etc. to establish this element.

Writing the Report

- Exit the vehicle
- SFSTs/Other field sobriety test
- Arrest
- Disposition of vehicle, people and property
- Transport defendant



Exit From Vehicle - Record your observations of the driver's exit from the vehicle and include any unusual actions taken by the driver. Be specific about how the driver exits the vehicle. For example: climbs out of the vehicle, uses the vehicle for support, leans on the vehicle, walks slowly and/or deliberately, stumbles, etc.

Standardized Field Sobriety Tests - This should include specific details about the validated clues noted during the test. It should also include all other observations made during the SFSTs such as: did not follow directions, how quickly or slowly the driver performed the test, etc.

Field Sobriety Tests - Describe the driver's actions when you administered other field sobriety tests. Be specific.

Arrest - Document the arrest decision and ensure that all elements of the violation have been accurately described.

Disposition/Location of Vehicle and Keys - Indicate where the vehicle was secured or towed and the location of the keys. If the vehicle was released to another party or was driven by a backup officer, record that fact.

Disposition of Passenger and/or Property - Ensure that passengers and property are properly cared for.

Transport of Defendant - Describe where the defendant was transported for evidential testing. Document time of departure and arrival. (This information can be obtained from the radio log). Note any spontaneous or voluntary comments made by the defendant.

Writing the Report

- Evidentiary test
- Implied consent/Miranda warning
- Witness' statements
- Notifications
- Citation/Complaint
- Incarceration or release
- Additional chemical test



Evidentiary Test - Document which test(s) were administered and by whom. Be sure to include the evidential test(s).

Implied Consent/Miranda Warning - Document that the admonishments were given at the appropriate point in the investigation.

Witness' Statements - List all witnesses (including other officers), contact information, and attach copies of their statements (if any). Additionally, make notes of any verbal statements made by witnesses.

Notification of Defendant's Attorney or Other Party - Document the time and result of defendant's telephone call to an attorney or other party.

Citation/Complaint - Document that the traffic citation/complaint was issued at the appropriate time, if applicable.

Incarceration or Release - Document the time and place of incarceration or the name and address of the responsible party to whom the defendant was released. Be sure to record the time.

Additional Chemical Test - If the defendant is authorized to request additional chemical tests and does so, record the type of test, time administered, location, and party administering the test.

The foregoing list is not intended to be all inclusive. In many cases, several points may not be applicable and additional information not listed may apply.

Session 12 - Processing the Arrested Subject and Preparation for Trial

Direct Testimony

- **Describe in detail:**
 - ✓ **Case facts**
 - ✓ **All observations**
 - ✓ **SFSTs clues/observations**
- **Be professional**
- **Use plain language**
- **Make eye contact with judge/jury**
- **Repeat important points**



DWI Detection and Standardized Field Sobriety Testing 12-28

D. Guidelines for Direct Testimony

Your basic task is to establish the facts of the case:

That the subject was driving or in actual physical control of a vehicle on a highway or other specified location within the court's jurisdiction and was impaired by alcohol and/or other drugs.

In other words, to present evidence to establish reasonable suspicion for the stop, probable cause for the arrest, and conclusive evidence regarding every element of the offense.

Describe in a clear, detailed, and convincing manner all relevant observations during the three detection phases and those subsequent to the arrest. Describe clearly how the defendant performed (e.g., "stepped off the line twice on steps 2 and 4, raised the arms on steps 5 and 7 going out and step 3 coming back, etc."). By presenting your observations clearly and convincingly, you will allow the fact of the defendant's impairment to speak for itself. Direct testimony should include all relevant information about this incident.

Always keep in mind that juries typically focus on an officer's demeanor as much or more than on the content of the testimony. Strive to maintain your professionalism and impartiality. Be clear in your testimony; explain technical terms in layman's language; don't use jargon, abbreviations, acronyms, etc. Make eye contact with the judge/jury; they are the people you are trying to convince. Repeat important points and continued observations about the defendant.

Defense Challenges

- Your observations/interpretations
- Your credentials
- Your credibility
- SFSTs



The defense will ask questions to challenge your observations and interpretations. For example, you may be asked whether the signs, symptoms and behaviors you observed of the defendant could have been caused by an injury or illness, or by something other than the alcohol/drugs. You will be asked questions to create doubt about your observations. Answer these questions honestly, but carefully. If your observations are not consistent with an illness or injury, explain why not. Clearly testify that your opinion is based on everything that was observed during the DWI investigation.

The defense will attempt to challenge your credentials by asking questions to cast doubt on your formal training. They will ask questions to "trip you up" on technical or scientific issues. Answer all questions about your training and experience completely and accurately, but don't embellish. Answer scientific or technical questions only if you have been trained in that area.

The defense will ask questions to challenge your credibility. You may be asked several very similar questions in the hope that your answers will be inconsistent.

You may be asked questions designed to imply you had already formed your opinion before the defendant completed the field sobriety tests. Listen to the questions carefully and emphasize your arrest decision was made at the completion of your DWI investigation and based on ALL available evidence.

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Trial Tips and Techniques

Courtroom Decorum

1. TELL THE TRUTH. Honesty is the best policy. Telling the truth requires a witness testify accurately as to what he knows. If you tell the truth and are accurate, you have nothing to fear on cross examination.
2. Provide your professional Curriculum Vitae to the prosecutor and, if requested, bring it to court with you.
3. READ YOUR INCIDENT REPORT prior to arrival at court. Go over the details and refresh your memory of the events of the arrest. If you cannot locate a copy of your report, ask the prosecutor prior to the court date.
4. Dress neatly and professionally; leave sunglasses, gloves, flashlight and other cumbersome equipment in your car before coming into the courtroom, unless needed for a demonstration.
5. Do not guess the answer to any question asked. It is OKAY to say “I don’t know” or “I can’t remember” in response to questions. Do not give the impression that you are guessing the answer by prefacing your response with “I think” or “I believe.” If you do not know the answer, it is okay to look at your report and refresh your memory. Always give definitive, positive, sure answers.
6. Listen carefully to the question asked. Do not begin your answer until the attorney has finished asking the question. Be sure you understand the question before you attempt to give an answer. It is appropriate if you don’t understand the question to say “I don’t understand your question.” If necessary, ask that the question be repeated or rephrased.
7. Take your time. Do not feel pressured to give a quick answer. Take time after the question is asked to think before you answer. After a question is asked, there may be an objection. When you hear the word, “objection,” stop testifying.
8. Answer the question that is asked, then stop. Do not volunteer information not asked. Explain an answer if you feel your answer appears ambiguous or incomplete. You are always permitted to explain your answer. Tell the prosecutor prior to your testimony if there is anything you feel they do not know about the case.
9. Always be professional in the courthouse. Jurors could be anywhere at any time.
10. Speak loud and clear so that you can be easily heard.

11. Look at the judge/jury when testifying. Always make eye contact with who you are trying to convince. During a bench trial, look at the judge. During a jury trial, look at the jury. This applies even when the attorney asking the question is not standing near the judge or jury box. Always talk to the judge or jury and maintain eye contact with them, even if it feels unnatural.
12. Always be courteous, even when the defense attorney is not. Control your emotions, and never allow yourself to be drawn into an argument. Remember, the best way to make a good impression with the judge/jury is to be courteous and professional. You were just doing your job during the arrest, and presenting the facts in court as they occurred.
13. Testify in plain language. Do not say, "The perpetrator exited the vehicle" when in reality "the defendant got out of his car." The person on trial is never a "lady" or "gentlemen," but is always "the defendant." Do not use military times without clarifying the time in laymen's terms. Do not use call signals. It makes more sense to the jury when you speak the same language they do.
14. It is the best practice to discuss the case with the prosecutor before trial. A defense attorney may ask if you've had a pretrial conference with the prosecutor. Tell the truth. Preparation for court is acceptable. Be straight forward in answering all questions.
15. Always tell the truth. No case is worth sacrificing your credibility.

Specific DWI Trial Recommendations

1. Never give the numerical PBT reading of the defendant when asked by the prosecutor. However, if the defense attorney asks you for the NUMERICAL reading, give it to him/her. The prohibition of PBT results of a defendant do not apply to witnesses, such as passengers in the car.
2. Discuss with the prosecutor, pre-trial, whether or not to demonstrate how you conducted field sobriety tests. Be certain that you can do in court all the tests you asked the defendant to perform at the time of the arrest. If you cannot do them, the jury will not expect that the defendant could have done them properly.
3. Know the reasons for giving field sobriety tests:
 - They are **divided attention tests**, designed to detect when a person is impaired by alcohol and/or drugs.
 - They provide evidence of impairment in cases where the defendant refuses to take a chemical test under implied consent.
 - They prevent an arbitrary decision to arrest, and allow an officer to articulate the reasons for concluding that a driver was DWI.
4. If you testify to the accuracy of the field sobriety tests, make sure you know the studies, percentages, and their significance. Considered independently, the Nystagmus test was 88% accurate, the Walk and Turn, 79% accurate, and the One Leg Stand, 83% accurate in identifying subjects whose BAC were .08 or more.
5. Remember, you should not testify that the defendant passed or failed the SFSTs. The tests are not scored "pass" or "fail." You should testify if the defendant completed the tests as instructed. These tests simply identify impairment.

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Sample DWI Incident Report

Defendant: Eryn Greenfield
Age: 31
Date of Birth: 10/03/XX
Date of Arrest:XX-XX-XX
Time of Arrest: 9:20 pm
CA - D.L. #: CA 1234567

First Observations:

On XX-XX-XX at approximately 9:00 p.m., I was patrolling westbound on Reed Avenue at the intersection with Interstate 80 (fully marked CHP patrol vehicle #904534). I was stopped at the intersection preparing to make a left turn onto eastbound I-80. I observed a yellow Volkswagon (S/V) traveling down the eastbound I 80 exit ramp approaching the intersection with Reed Avenue. I noticed the S/V traveling with no headlights. I also noticed that the front right parking light was not working correctly. Furthermore, I noticed the right tires of the S/V travel over the solid white fog line on the exit ramp by approximately 2 feet. The S/V made a brief stop at the intersection, then made a right turn onto eastbound Reed Avenue without using a turn signal. I made a U turn and followed the S/V. The S/V then made a wide right turn from Reed Avenue onto southbound Riverpoint Drive without using a turn signal. An enforcement stop was initiated at which point the S/V began to pull to the right. At the point the right front tire of the S/V rubbed up onto the raised concrete curb that paralleled the roadway.

Observations After The Stop:

I approached the S/V on the passenger side and made contact with the driver (convertible top down). I immediately noticed that the driver had red, bloodshot, watery eyes. I advised her of the reason for the stop and asked if her vehicle had any mechanical problems. She stated, "no." I requested her driver's license, registration, and insurance. The driver removed a stack of cards from her wallet, which was located in her purse on right front passenger seat. She began sifting through the stack of cards. I observed her clearly pass by her license and continue searching through the cards. Unable to locate her license on the first attempt, she started over at the top and located the license on the second attempt. She was identified as Eryn Greenfield by California driver's license (#CA1234567). After handing me the license, she did not make an attempt to retrieve the other documents I had requested. I asked her again for the registration and insurance cards. She then retrieved them out of the glove compartment. I asked her how much alcohol she had consumed and she stated "a couple of beers about an hour ago." I asked her what size and type of beer and she replied with 12oz. bottles of Heineken. I asked her if she felt the effects of the drinks and she stated, "No, I feel fine." As she spoke, I noticed that her speech was slurred. I asked her to exit the vehicle and step to the sidewalk so I could administer

several field sobriety tests to her (see field sobriety test section). As she exited the vehicle, she stepped around the front as instructed, then stumbled on the raised curb. I asked her several pre-field sobriety test questions of which she answered accordingly (see page 2 of face page). As I communicated with her, I smelled an odor of alcoholic beverage emitting from her breath.

Field Sobriety Tests:

This evaluation was performed on Riverpoint Drive, just south of Reed Avenue. The evaluation surface was smooth concrete. Lighting conditions consisted of patrol vehicle headlights, spotlights, overhead lights, streetlight, and my flashlight. No surface defects were noted or claimed. It was noticeably windy.

Horizontal Gaze Nystagmus (explained):

I observed lack of smooth pursuit, distinct and sustained nystagmus at maximum deviation, and an onset of nystagmus prior to 45 degrees in both of Greenfield's eyes. Greenfield was swaying forward and backward significantly during the test. At least 3 inches in both directions.

Walk and Turn (explained and demonstrated):

Instruction Stage: Lost balance (feet broke apart)

Walking Stage (1st Nine): Walked 10 steps (counted 10).

Raised left arm over 6 inches away from body to assist with balance on one occasion (at steps 4 - 5).

Walking Stage (2nd Nine): Walked 10 steps (counted 9).

Raised left arm over 6 inches away from body to assist with balance on two occasions (at steps 6 - 7).

Turn: Lost balance during turn and did not turn as instructed. Greenfield only took one step during the turn instead of several small steps as instructed.

One Leg Stand (explained and demonstrated):

While explaining the test, Greenfield started before being told to begin. Greenfield raised her left leg and began counting. She put her foot down on counts 1006 and 1009. As she was counting, she skipped 1017 (counting from 1016 to 1018). Used right arm for balance (6+ inches from body) and was swaying while balancing. She counted to 1019 after 30 seconds.

Arrest:

Based on the following information, I formed the opinion that Greenfield was driving under the influence:

- Driving at night with no headlights.

- Driving to the right of the solid white fog line on exit ramp.
- Making wide right turn from eastbound Reed Avenue to southbound Riverpoint Drive without using a turn signal.
- Right tire rubbing against raised concrete curb after stop was initiated.
- I observed divided attention problems while retrieving her license/registration and insurance.
- Her red, bloodshot, watery eyes and slurred speech.
- Her admissions to consuming alcoholic beverages.
- Stumbling over curb after exiting the vehicle.
- Odor of alcoholic beverage emitting from her breath.
- I observed signs of impairment as she performed the standardized field sobriety tests.

I arrested Greenfield for driving under the influence of an alcoholic beverage at 9:20 p.m. Greenfield was given the proper chemical testing advisement. She chose a breath test and was transported to the breath testing facility. She provided two breath samples of 0.08 and 0.08 at 9:50 p.m. and 9:52 p.m. She was then booked along with her property.

Recommendations:

I recommend a copy of this report be forwarded to the district attorney's office for review and prosecution of Greenfield for driving under the influence and driving with a blood alcohol concentration at or above the legal state limit.

Vehicle Disposition:

Greenfield's vehicle was stored by Reliable Towing.

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Instructor Guide

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 13 - Report Writing Exercise and Moot Court

1 Hour 30 Minutes

Session 13

Report Writing Exercise
and Moot Court



DWI Detection and Standardized Field Sobriety Testing

13-1

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Participant Manual

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 14 - "Testing Subjects" Practice: Second Session

2 Hours

Session 14

**"Testing Subjects"
Practice:
Second Session**



DWI Detection and Standardized Field Sobriety Testing

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Sample Dry Erase Board Array for Tabulating Results

"Designated Subjects"	Horizontal Gaze Nystagmus	Walk and Turn	One Leg Stand	Arrest?
"A"				
"B"				
"C"				
"D"				
"E"				
"F"				
"G"				
"H"				
"I"				
"J"				

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Participant Manual

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 14 - "Testing Subjects" Practice Second Session

2 Hours

Session 14-A

Dry Lab



DWI Detection and Standardized Field Sobriety Testing

14-A-1

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Participant Manual

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 15 - Review and Proficiency Examinations

1 Hour 50 Minutes

Session 15

Review and Proficiency Examinations



DWI Detection and Standardized Field Sobriety Testing

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Session 15 - Review and Proficiency Examinations

Learning Objective

Demonstrate knowledge and proficiency in administering the SFSTs battery




DWI Detection and Standardized Field Sobriety Testing 15-2

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

- Demonstrate knowledge and proficiency in administering the Standardized Field Sobriety Test battery.

<u>CONTENT SEGMENTS</u>	<u>LEARNING ACTIVITIES</u>
A. Review of Horizontal Gaze Nystagmus.....	Instructor-Led Presentations
B. Review of Walk and Turn.....	Instructor and Participant Led Demonstrations
C. Review of One Leg Stand	
D. Video Demonstrations	Video Demonstration (Second Showing) IF TIME PERMITS
E. Proficiency Exam	Participant Proficiency Examination

Session 15 - Review and Proficiency Examinations

Administrative Procedures

- **Eyeglasses**
- **Verbal instructions**
 - ✓ Feet together, hands at sides
 - ✓ Head still
 - ✓ Look at stimulus
 - ✓ Follow movement with eyes
- **Position stimulus(12-15 inches)(30-38 cm)**
- **Pupil size and resting nystagmus**
- **Equal tracking**




DWI Detection and Standardized Field Sobriety Testing 15-8

Session 15 - Review and Proficiency Examinations

Administrative Procedures

- **Check for Lack of Smooth Pursuit**
- **Check for distinct and sustained nystagmus at maximum deviation**
- **Check for onset of nystagmus prior to 45 degrees**
- **Total the clues**
- **Check for Vertical Gaze Nystagmus**




DWI Detection and Standardized Field Sobriety Testing 15-9

Nystagmus Administrative Procedures

Step 1: Check for Eyeglasses.

Step 2: Verbal Instructions.

- Feet together, hands at sides
- Head still
- Look at stimulus
- Follow movement with eyes

Step 3: Positioning the Stimulus.

Step 4: Pupil Size and Resting Nystagmus.

Step 5: Check for Equal Tracking.

Step 6: Check for Lack of Smooth Pursuit.

Step 7: Check for Distinct and Sustained Nystagmus at Maximum Deviation.

Step 8: Check for Onset of Nystagmus Prior to 45 Degrees.

Step 9: Total the clues.

Step 10: Check for Vertical Gaze Nystagmus.

Check each eye independently beginning with the subject's left and compare.

Session 15 - Review and Proficiency Examinations

Administrative Procedures

Verbal instructions:

- Assume heel toe stance
- Arms down at sides
- Don't start until told

9 heel to toe steps turn, 9 heel to toe steps

Turn procedures:

- Turn around on line
- Several small steps




DWI Detection and Standardized Field Sobriety Testing 15-12

Session 15 - Review and Proficiency Examinations

Administrative Procedures

While walking:

- Keep watching feet
- Arms down at sides
- Count steps out loud
- Don't stop during walk




DWI Detection and Standardized Field Sobriety Testing 15-13

Walk and Turn Administrative Procedures

Verbal instructions:

- Assume heel toe stance
- Arms down at sides
- Don't start until told

9 heel to toe steps turn, 9 heel to toe steps

Turn procedures:

- Turn around on line
- Several small steps

Walk and Turn Administrative Procedures

While walking:

- Keep watching feet
- Arms down at sides
- Count steps out loud
- Don't stop during walk

One Leg Stand Test Clues

- Sways while balancing
- Uses arms to balance
- Hopping
- Puts foot down



Test Interpretation

There are four specific clues of impairment for the One Leg Stand test

- Sways while balancing
- Uses arms to balance
- Hopping
- Puts foot down

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**PARTICIPANT PROFICIENCY EXAMINATION
STANDARDIZED FIELD SOBRIETY TEST BATTERY**

Name _____ Date ____/____/____

Agency _____

I. HORIZONTAL GAZE NYSTAGMUS

1. ___ Have subject remove glasses if worn.
2. ___ Stimulus held in proper position (approximately 12"-15" from nose, just slightly above eye level).
3. ___ Check for equal pupil size and resting nystagmus.
4. ___ Check for equal tracking.
5. ___ Smooth movement from center of nose to maximum deviation in approximately 2 seconds and then back across subject's face to maximum deviation in right eye, then back to center. Check left eye, then right eye. (Repeat)
6. ___ Eye held at maximum deviation for a minimum of 4 seconds (no white showing). Check left eye, then right eye. (Repeat)
7. ___ Eye moved slowly (approximately 4 seconds) from center to 45 angle. Check left eye, then right eye. (Repeat)
8. ___ Check for Vertical Gaze Nystagmus. (Repeat)

II. WALK AND TURN

1. ___ Instructions given from a safe position.
2. ___ Tells subject to place feet on a line in heel-to-toe manner (left foot behind right foot) with arms at sides and gives demonstration.
3. ___ Tells subject not to begin test until instructed to do so and asks if subject understands.
4. ___ Tells subject to take nine heel-to-toe steps on the line and demonstrates.
5. ___ Explains and demonstrates turning procedure.
6. ___ Tells subject to return on the line taking nine heel-to-toe steps.
7. ___ Tells subject to count steps out loud.
8. ___ Tells subject to look at feet while walking.
9. ___ Tells subject not to raise arms from sides.
10. ___ Tells subject not to stop once they begin.
11. ___ Asks subject if all instructions are understood.

III. ONE LEG STAND

1. ____ Instructions given from a safe position.
2. ____ Tells subject to stand straight, place feet together, and hold arms at sides.
3. ____ Tells subject not to begin test until instructed to do so and asked if subject understands.
4. ____ Tells subject to raise one leg, either leg, approximately 6" from the ground, keeping raised foot parallel to the ground, and gives demonstration.
5. ____ Tells subject to keep both legs straight and to look at elevated foot.
6. ____ Tells subject to count out loud in the following manner: one thousand one, one thousand two, one thousand three, and so on until told to stop, and gives demonstration.
7. ____ Checks actual time subject holds leg up. (Time for 30 seconds.)

Instructor: _____

Note: In order to pass the proficiency examination, the student must explain and proficiently complete each of the steps listed.

Participant Manual

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session 1 - Written Examination and Program Conclusion

1 Hour 50 Minutes

Session 16

**Written Examination
and Program
Conclusion**



DWI Detection and Standardized Field Sobriety Testing

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Session 1 - Written Examination and Program Conclusion

Learning Objectives

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




DWI Detection and Standardized Field Sobriety Testing 16-2

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

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

<u>CONTENT SEGMENTS</u>	<u>LEARNING ACTIVITIES</u>
A. Post Test.....	Written Participant Examination
B. Critique.....	Written Participant Critique
C. Review of Post Test.....	Instructor-Led Presentation
D. Concluding Remarks	
E. Certificates and Dismissal	

Laws

- What does "Per Se" mean?
- The "illegal per se" law makes it an offense to operate a motor vehicle while _____.
- True or False: The implied consent law grants the subject the option of refusing the chemical test.
- True or False: A person cannot be convicted of DWI if BAC was below 0.05.



Laws

- What does "Per Se" mean?
- The "illegal per se" law makes it an offense to operate a motor vehicle while_____.
- True or False: The implied consent law grants the subject the option of refusing the chemical test.
- True or False: A person cannot be convicted of DWI if BAC was below 0.05.

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Course Location _____ Date ____ / ____ / ____

DWI Detection And Standardized Field Sobriety Testing Training Program Participant's Critique

A. Workshop Objectives

Please indicate whether you feel that you personally achieved the following course objectives.

	Yes	No	Not Sure
1. Enable you to understand enforcement's role in general DWI deterrence.			
2. Enable you to understand the detection phases.			
3. Enable you to understand requirements for organizing and presenting testimonial and documentary evidence in DWI cases.			
4. Improve your ability to recognize and interpret evidence of DWI violations.			
5. Enable you to administer and interpret validated psychophysical tests to DWI subjects.			

6. Improve your ability to describe DWI evidence clearly and convincingly in written reports and verbal testimony.			
--	--	--	--

B. Workshop Sessions and Quality of Instruction

Please rate how helpful each workshop session was for you personally. Also, please rate the quality of instruction (subject knowledge, instructional techniques and learning activities).

Use a scale from 1 to 5 where: 5=Excellent, 4=Very Good, 3=Good, 2=Fair, 1=Poor.

	<u>Session/Activity</u>	<u>Quality</u>
Detection and General Deterrence	_____	_____
The Legal Environment	_____	_____
Overview of Detection, Note Taking and Testimony	_____	_____
Phase One: Vehicle in Motion	_____	_____
Phase Two: Personal Contact	_____	_____
Phase Three: Pre-Arrest Screening	_____	_____
Concepts and Principles of Standardized Field Sobriety Tests	_____	_____
Test Battery Demonstrations	_____	_____
"Dry Run" Practice	_____	_____
"Drinking Subjects" Practice	_____	_____
Processing the Arrested Subject and Preparation for Trial	_____	_____
Report Writing Exercise and Moot Court	_____	_____

C. Course Design

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

1. The program contains some information that is not needed and that should be deleted.

Agree Disagree Not Sure

2. There are some important topics missing from the program that should be added.

Agree Disagree Not Sure

3. The program is too short.

Agree Disagree Not Sure

4. I feel this program has improved my own ability to enforce DWI laws.

Agree Disagree Not Sure

5. The instructors did a good job.

Agree Disagree Not Sure

6. I am very glad I attended the program.

Agree Disagree Not Sure

7. The program is too long.

Agree Disagree Not Sure

8. The instructors should have been better prepared.

Agree Disagree Not Sure

9. I feel fully qualified to use the nystagmus test now.

Agree Disagree Not Sure

10. I feel fully qualified to use the two divided attention tests now.

Agree

Disagree

Not Sure

11. Too much time was spent practicing with drinking volunteers.

Agree

Disagree

Not Sure

12. These three new tests definitely will improve our ability to identify impaired drivers.

Agree

Disagree

Not Sure

13. I wish we had more practice with drinking volunteers.

Agree

Disagree

Not Sure

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

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

F. Overall Course Rating

Please rate the overall quality of the seminar on a scale from 1 to 5 where: 5=Excellent, 4=Very Good, 3=Good, 2=Fair, 1=Poor.

Overall Course Rating: _____

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Participant Manual

DWI Detection and Standardized Field Sobriety Testing (SFST)

Session Overview - Introduction to Drugged Driving

4-hours

Introduction to Drugged Driving



DWI Detection and Standardized Field Sobriety Testing

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Session Overview – Introduction to Drugged Driving

Learning Objectives

- Define the term “drug” in the context of DWI enforcement
- Describe the incidence of drug involvement in motor vehicle crashes and DWI enforcement
- Name the categories of drugs




DWI Detection and Standardized Field Sobriety Testing Intro-2

Session Overview – Introduction to Drugged Driving

Learning Objectives

- Describe the observable signs of impairment usually associated with the seven drug categories
- Describe medical conditions and other situations that can produce similar signs of impairment
- Describe appropriate procedures for dealing with drug impaired or medically impaired suspects




DWI Detection and Standardized Field Sobriety Testing Intro-3

At the conclusion of this session, participants will be able to:

- Define the term "drug" in the context of DWI enforcement
- Describe in approximate, quantitative terms the incidence of drug involvement in motor vehicle crashes and in DWI enforcement
- Name the categories of drugs

Learning Objectives

Describe the observable signs usually associated with the drug categories

- Describe medical conditions and other situations that can produce similar signs
- Describe appropriate procedures for dealing with drug impaired or medically impaired suspects.

CONTENT SEGMENTS..... LEARNING ACTIVITIES

- A. Overview Instructor-Led Presentations
- B. Eye Examinations: Detecting Signs of Drug Influence Participant Practice
- C. Drug Categories and Their Observable Effects
- D. Combination of Drugs
- E. Dealing with Suspected Drug Influence or Medical Impairment

Session Overview – Introduction to Drugged Driving

Session Purpose

Improve your ability to recognize suspects who may be medically impaired or impaired by drugs other than alcohol and, when you encounter such suspects, take appropriate action




DWI Detection and Standardized Field Sobriety Testing Intro-4

Session Overview – Introduction to Drugged Driving

This Training Will NOT...

Important issue this training will NOT qualify you to perform the functions of a Drug Recognition Expert.




DWI Detection and Standardized Field Sobriety Testing Intro-5

A. Overview

- The purpose of this session is to improve your ability to recognize suspects who may be medically impaired or impaired by drugs other than alcohol and, when you encounter such suspects, take appropriate action.
- Alcohol certainly remains the most frequently abused drug, and most impaired drivers are under the influence of alcohol
- Many other drugs also are routinely abused by many drivers.
- It is highly likely that every experienced DWI enforcement officer has encountered at least some drivers who were under the influence of drugs other than alcohol.
- Depending upon the specific types of drugs they have taken, some drug-impaired drivers may look and act quite a bit like persons who are under the influence of alcohol, but others will look and act very differently from alcohol-impaired drivers.
- It is important that you be able to recognize subjects who may be under the influence of other drugs, so that you will know when to summon assistance from physicians or other appropriate persons, or trained drug recognition experts. (DREs)

One important thing that this session will not accomplish: it will NOT qualify you to perform functions of a Drug Recognition Expert (DRE).

Officers become DREs only after they have completed a very challenging program that includes nine days of classroom training and many weeks of closely-supervised on-the-job training. (Two-Day Pre-School followed by Seven-Day classroom training.)

Session Overview – Introduction to Drugged Driving

2014 National Survey Drug Use and Health (NSDUH)

- 139.7 million (52%) people consider themselves drinkers
- 60.9 million people describe themselves as binge alcohol users
- Estimated 27 million people aged 12 or older were current illicit drug users in 2014



DWI Detection and Standardized Field Sobriety Testing Intro-8

C. Statistics and Research

Alcohol and Drug Use

Social drinking is considered acceptable in many societies.

It is important to understand the use of alcohol in the context of society, since it is related to the enforcement and adjudication of DWI offenses.

The National Survey on Drug Use and Health (NSDUH) Survey 2012 reports that:

139.7 million (52%) people consider themselves as alcohol users

60.9 million people describe themselves as binge drinkers.

An estimated 27.0 million people aged 12 or older were current illicit drug users in 2014.

Although these statistics are significant, it is reasonable to assume that the problem is even larger when you consider legal or prescription drugs used in a manner other than for what they have been prescribed or produced.

When we look at drug use specifically, it is helpful to see the trends based on specific types of drugs.

Eye Examinations Overview

The eye examinations that you can conduct to assess possible drug or medical impairment include:

- Resting nystagmus
- Tracking ability
- Pupil size
- Horizontal gaze nystagmus (HGN)
- Vertical gaze nystagmus (VGN)



Eye Examinations Overview:

The eye examinations that you can conduct to assess possible drug or medical impairment include:

- Resting nystagmus
- Tracking ability
- Pupil size
- Horizontal gaze nystagmus (HGN)
- Vertical gaze nystagmus (VGN)

Resting Nystagmus is referred to as jerking as the eyes look straight ahead. This condition is not frequently seen. Its presence usually indicates a pathological disorder or high doses of a Dissociative Anesthetic drug such as PCP.

Tracking Ability will be affected by certain categories of drugs, and also by certain medical conditions or pathological disorders.

If the two eyes do not track together, the possibility of a medical condition or injury is present.

By passing a stimulus across both eyes, you can check to see if both eyes are tracking equally.

Session Overview – Introduction to Drugged Driving

Central Nervous System (CNS) Depressants

- Alcohol
- Barbiturates (Secobarbital)
- Non barbiturates (GHB/Soma)
- Anti-Anxiety Tranquilizers (Valium/Xanax)
- Anti-Depressants (Prozac/Elavil)
- Muscle relaxants






DWI Detection and Standardized Field Sobriety Testing Intro-19

Central Nervous System (CNS) Depressants

CNS Depressants slow down the operations of the brain, and usually depress the heartbeat, respiration, and many other processes controlled by the brain.

The most familiar CNS Depressant is alcohol.

Other CNS Depressants include:

- Barbiturates (such as Secobarbital (Seconal), and Pentobarbital (Luminal))
- Non-Barbiturates (GHB-gamma-hydroxybutyrate and Soma)
- Anti-Anxiety Tranquilizers (Such as Valium, Librium, Xanax, and Rohypnol)
- Anti-Depressants (such as Prozac and Elavil)
- Muscle relaxants and many other drugs (Soma)

CNS Depressants usually are taken orally, in the form of pills, capsules, liquids, etc. However, CNS Depressants may be injected or insufflated.

In general, people under the influence of any CNS Depressant look and act like people under the influence of alcohol.

Session Overview – Introduction to Drugged Driving

Indicators of CNS Depressant Influence



DWI Detection and Standardized Field Sobriety Testing Intro-20

General indicators of CNS Depressant influence are:

- “Drunken” behavior and appearance
- Uncoordinated
- Drowsy
- Sluggish
- Disoriented
- Thick, slurred speech
- Unsteady, staggering (Gait Ataxia)

Eye indicators of CNS Depressant influence are:

- Horizontal Gaze Nystagmus usually will be present
 - Vertical nystagmus may be present (with high doses)
 - Pupil size usually will not be effected, except that Methaqualone and Soma may cause pupil dilation
-
-
-
-
-
-
-
-
-
-

Session Overview – Introduction to Drugged Driving

Central Nervous System (CNS) Stimulants

- Cocaine
- Amphetamines
- Methamphetamine



The image contains three photographs. The first shows a pile of white powder on a dark surface next to a cigarette. The second shows several yellow, crystalline chunks. The third shows a pile of white, round tablets, some of which are in a small orange container.

DWI Detection and Standardized Field Sobriety Testing Intro-21

Central Nervous System Stimulants

Central Nervous System Stimulants accelerate the heart rate, respiration and many other processes of the body.

The two most widely abused kinds of CNS Stimulants are cocaine and methamphetamines.

Cocaine is made from the leaves of the coca plant.

Methamphetamines are chemically produced (manufactured) drugs.

Cocaine abusers may take the drug:

- By insufflation
- By smoking (freebase, or “Crack”)
- By injection
- Orally

Abusers of amphetamines and methamphetamines may take their drugs:

- By injection
- Orally
- By insufflation
- Smoked (methamphetamines only)

Session Overview – Introduction to Drugged Driving

Indicators of CNS Stimulant Influence

- People under the influence of CNS Stimulants tend to be hyperactive, indicated by nervousness, extreme talkativeness and an inability to sit still
- They also are usually unable to concentrate, or to think clearly for any length of time



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General indicators of CNS Stimulant influence:

People under the influence of CNS Stimulants tend to be hyperactive, indicated by nervousness, extreme talkativeness and an inability to sit still. They also are usually unable to concentrate, or to think clearly for any length of time.

- Restlessness
- Talkative
- Excitation
- Euphoria
- Exaggerated reflexes
- Loss of appetite
- Anxiety
- Grinding teeth (bruxism)
- Redness to nasal area (if “snorting”)
- Body tremors

Eye indicators of CNS Stimulant influence:

- Neither horizontal nor vertical nystagmus will be observed
 - The pupils generally will be dilated.
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Session Overview – Introduction to Drugged Driving

Hallucinogens

- **Peyote**
- **Salvia Divinorum**
- **LSD**
- **MDMA (Ecstasy)**



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Hallucinogens

Hallucinogens are drugs that affect a person’s perceptions, sensations, thinking, self awareness and emotions.

One common type of hallucination caused by these drugs is called synesthesia, which means a transposing of the senses.

Sounds for example, may be transposed into sights.

Sights, for example, may be transposed into odors or sounds.

Some hallucinogenic drugs come from natural sources:

- Peyote is a Hallucinogen found in a particular species of cactus.
- Psilocybin is a Hallucinogen found in a number of species of mushroom.

Other Hallucinogens are synthetically manufactured:

- LSD (Lysergic Acid Diethylamide)
- MDA (3,4-Methylenedioxyamphetamine)
- MDMA (3,4-Methylenedioxymethamphetamine or Ecstasy)
- Many others

Session Overview – Introduction to Drugged Driving

Indicators of Hallucinogen Influence

- Hallucinations
- Dazed appearance
- Body tremors
- Uncoordinated
- Perspiring
- Disoriented
- Paranoia
- Difficulty in speech
- Nausea
- Piloerection (goose bumps)



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General indicators of Hallucinogen influence:

Hallucinogen abusers usually take their drugs orally; however, some Hallucinogens can be smoked, or injected or “snorted”.

- Hallucinations
- Dazed appearance
- Body tremors
- Uncoordinated
- Perspiring
- Disoriented
- Paranoia
- Difficulty in speech
- Nausea
- Piloerection (goose bumps)

Eye indicators of Hallucinogen influence:

- Neither horizontal nor vertical gaze nystagmus should be present
 - The pupils usually will be noticeably dilated
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Session Overview – Introduction to Drugged Driving

Dissociative Anesthetics

- Phencyclidine (PCP)
- Ketamine
- Dextromethorphan



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Dissociative Anesthetics

Dissociative Anesthetics is the category of drugs that includes PCP, its various analogs, and Dextromethorphan (DXM).

PCP is a synthetic drug, that was first developed as an intravenous anesthetic.

Because PCP produces very undesirable side effects, it is no longer legally manufactured. However, an analog (chemical cousin) Ketamine is still being legally manufactured and available.

However, it is easy to manufacture:

- The formula for making PCP and PCP analogs have been widely publicized.
- The manufacturing process involves readily available chemicals.

Many Dissociative Anesthetic users smoke the drug, by using it to adulterate tobacco, marijuana, or various other substances.

Dissociative Anesthetics can also be taken orally or by injection, or inhaled.

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Indicators of Dissociative Anesthetic Influence

- Warm to the touch
- Perspiring
- Blank stare
- Repetitive speech
- Incomplete verbal responses
- Confused
- Muscle rigidity

Possibly violent and combative



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General indicators of Dissociative Anesthetics:

Dissociative Anesthetics can also be taken orally or by injection, or inhaled.

- Warm to the touch
- Perspiring
- Blank stare
- Repetitive speech
- Incomplete verbal responses
- Confused
- Muscle rigidity
- Possibly violent and combative

Eye Indicators of Dissociative Anesthetic influence:

- Horizontal Gaze Nystagmus generally will be present, often with very early onset and very distinct jerking.
- Vertical nystagmus generally will be present.
- Pupil Size usually will not be effected.

Session Overview – Introduction to Drugged Driving

Narcotic Analgesics

- Heroin
- Morphine
- Codeine
- Synthetic Opiates (e.g., Methadone, Fentanyl)



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Narcotic Analgesics

Narcotic Analgesics include a large number of drugs that share three important characteristics:

- They will relieve pain.
- They will produce withdrawal signs and symptoms, when the drug is stopped after chronic administration.
- They will suppress the withdrawal signs and symptoms of chronic morphine administration.

Some drugs classified as Narcotic Analgesics are natural derivatives of opium:

- Heroin
- Morphine
- Codeine

Some are synthetic Narcotic Analgesics, such as:

- Methadone
- Numorphan
- Fentanyl
- OxyContin

Session Overview – Introduction to Drugged Driving

“Tolerance”

- An important characteristic of Narcotic Analgesics is that users develop tolerance to them
- “Tolerance” means that the same dose of the drug will produce diminishing effects, or that a steadily larger dose is needed to produce the same effects




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Indicators of Narcotic Analgesic Influence

- “On the nod”
- Droopy eyelids
- Depressed reflexes
- Dry mouth
- Facial itching
- Low, raspy speech
- Fresh puncture marks may be evident




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Tolerance

- An important characteristic of Narcotic Analgesics is that users develop tolerance to them.
- “Tolerance” means that the same dose of the drug will produce diminishing effects, or that a steadily larger dose is needed to produce the same effects.

A tolerant user who has taken his or her “normal” dose of heroin (for example), may exhibit little evidence of divided attention impairment.

General indicators of Narcotic Analgesic influence:

- “On the nod”
- Droopy eyelids
- Depressed reflexes
- Dry mouth
- Facial itching
- Low, raspy speech
- Fresh puncture marks may be evident

Eye indicators of Narcotic Analgesic influence:

- Neither horizontal nor vertical nystagmus will be present
- Pupils generally will be constricted

Session Overview – Introduction to Drugged Driving

Inhalants

- Various glues
- Paint
- Gasoline
- Aerosol sprays
- Nitrous Oxide
- Ether
- Amyl Nitrite



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Inhalants

Inhalants are breathable chemicals that produce mind-altering results.

Inhalants include many familiar household materials, such as glue (“Toluene”), paint, gasoline, aerosol sprays, etc. that produce volatile fumes.

Some drugs that are classified as Inhalants include:

- Various glues (e.g. Toluene)
- Paint
- Gasoline
- Aerosol sprays (i.e., vegetable frying pan lubricants, hair sprays, insecticides)
- Nitrous Oxide
- Ether
- Amyl Nitrite

Certain anesthetics also may be used as Inhalants.
