

Instructor Guide

# DWI Detection and Standardized Field Sobriety Testing (SFST)

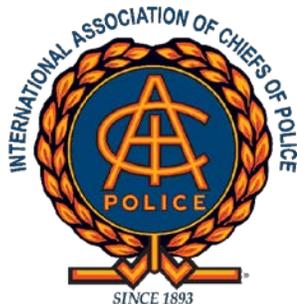


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# DWI Detection & Standardized Field Sobriety Testing

## Administrator Guide



February 2018

**DWI Detection and Standardized Field Sobriety Testing**  
**Instructor Guide**  
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## Preface

The DWI Detection and Standardized Field Sobriety Testing (SFST) training curriculum prepares police officers and other qualified persons to conduct the SFSTs for use in driving while impaired (DWI) investigations. This training, developed under the auspices and direction of the NHTSA and the IACP, has experienced remarkable success since its inception in the early 1980s.

As in any educational training program, an instructor 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. Changes will 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 SFSTs are to be administered under ideal conditions. We recognize that the SFSTs 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.

## Introduction

The Administrator Guide provides an introduction and overview of the SFST Training Program. The acronym "DWI" means driving while impaired **and is synonymous with the acronym "DUI," "driving under the influence."** These terms refer to any and all offenses involving the operation of vehicles by persons under the influence of alcohol and/or other drugs. However, the focus of this curriculum is on the alcohol-impaired driver.

**The procedures outlined in this guide describe how the SFSTs are to be administered under ideal conditions. We recognize that the SFSTs will not always be administered under ideal conditions in the field because such conditions will not always exist. Even when administered under less than ideal conditions, they will serve as useful indicators of impairment. Slight variations from the ideal, i.e., the inability to find a perfectly smooth surface at roadside, do not necessarily make the SFSTs invalid.**

Enforcement of alcohol-impaired driving is a complex and demanding law enforcement responsibility sufficient to warrant a separate curriculum. This is not to deny or minimize the importance of detecting and arresting drivers impaired by drugs other than alcohol. Indeed, other materials (as referenced in this document) are available from NHTSA to improve police officers' skills in **detecting** and **apprehending** drug-impaired drivers.

In this regard NHTSA and IACP have developed two trainings that address drug-impaired driving:

- *Introduction to Drugged Driving* is a four-hour overview of drugs other than alcohol that impair.
- *Advanced Roadside Impaired Driving Enforcement (ARIDE)* is a 16-hour course which offers additional information to law enforcement officers on detecting impairment caused by more than just alcohol. Oftentimes law enforcement officers who have not received advanced or in-service training regarding drug impairment tend to not be able to identify these characteristics; therefore, they will release an impaired driver. Once an officer completes the training, he/she will be more proficient with the Horizontal Gaze Nystagmus (HGN), Walk and Turn (WAT), and One Leg Stand (OLS) tests and gain a broader knowledge of drug impairment indicators. The law enforcement officer will also be more familiar with the Drug Evaluation and Classification (DEC) Program and its function. This will facilitate better communication and transfer of critical roadside indicators of impairment to the evaluating Drug Recognition Expert (DRE) for a more complete and accurate assessment of the impairment.

The *Introduction to Drugged Driving* session is an excellent option to the SFST training. The ARIDE course is an excellent stand-alone training for experienced SFST practitioners. **BOTH ARE HIGHLY RECOMMENDED, HOWEVER, NEITHER WILL QUALIFY AN OFFICER TO SERVE AS A DRE.**

These impaired driving courses have been approved by NHTSA and IACP. International Standards have been established by IACP to ensure consistency in the content, delivery, and application of the SFST and drugged driving detection training. The SFST Standards are provided in this Administrator Guide (Appendix B).

For more information regarding these impaired driver detection programs, contact your State Highway Safety Office (SHSO) or NHTSA Regional Training Coordinator (Appendix E).

**Note: Neither NHTSA nor IACP are certifying agencies for impaired driving courses, i.e., SFST, ARIDE, DRE, etc. This includes both practitioners and instructors.**

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## **Purpose of This Document**

The Administrator Guide is intended to facilitate planning and implementation of the SFST Course. The core course consists of 16 sessions with two "live" alcohol workshops.

The Guide outlines acceptable options to the "core" training procedures (see "How Flexible Is the Course?" Item 7, page 7). It overviews the sequence of instruction, documents the materials and the teaching aides that make up the instructional package, describes course administrative requirements, and provides guidelines for discharging those requirements satisfactorily. The Guide sets forth the fundamental tasks that make up the job of DWI enforcement and identifies knowledge, skills, and attitudes police officers need to perform those tasks well. The Guide also outlines the preparatory work that must be accomplished (primarily at the departmental or academy level) before the course can be conducted and outlines the follow-up work that should be undertaken, subsequent to training, to ensure that the desired outcomes of the training are realized.

## **Overview of the Course**

### ***Intended Audience***

Participants should be persons employed and under the direct control of public criminal justice agencies or institutions involved in providing training services to law enforcement agencies. Ideally, officers responsible for DWI enforcement will actually use all aspects of the training, especially the three SFSTs - HGN, WAT, and OLS. Officers selected to attend this training should be aware of the hazards caused by impaired drivers and be motivated to arrest those drivers. Their duty assignments should enable them to spend the time required to process DWI offenders.

Some law enforcement agencies have concluded the subject matter should be offered only to officers who have amassed substantial on-the-job experience in detecting and arresting impaired drivers. Other agencies have advanced equally strong arguments to support the position the training is appropriate for recruit-level officers. Either assessment is left up to the individual agencies using this curriculum. However, all user agencies should note the ability to maintain the skills learned in this course will rapidly diminish if they are not reinforced by frequent "street" application and regular in-service training. This is not to imply this training is so complex or confusing that it can only be mastered by exceptionally skilled officers. The techniques of the SFSTs can readily be grasped by anyone of average competence, provided they are willing to devote the appropriate time and effort to study and practice.

### ***Purpose of the Training***

The fundamental purpose of this training course is to foster DWI deterrence, i.e., to dissuade people from driving while impaired by increasing the odds that they will be arrested and convicted. This course is based on the assumption that a principal reason for enforcing DWI laws is to deter those who might otherwise be tempted to break the law. If potential DWI violators believe that there is a real risk of being caught, it is reasonable to believe most will refrain from driving while impaired.

Police officers can't possibly detect and arrest all DWI violators. Not all who are arrested will be convicted and punished. However, officers can improve the skills that increase the chances of detecting, arresting, recording, articulating, and gathering sufficient evidence to sustain a conviction. The training is based on the premise that officers perform two fundamental tasks which affect the likelihood of apprehending and convicting impaired drivers. The first of those tasks is **detection**. In this course, "detection" is defined as "the entire process of identifying and gathering evidence to determine whether a suspect should be arrested for DWI." DWI detection begins when an officer's attention is drawn to a particular vehicle or its operator. The precipitating events are unlimited. The initial "spark" that causes the officer to focus attention on the particular vehicle may carry with it an immediate, strong suspicion of the possibility of impairment; or, only a slight suspicion of the possibility of impairment; or, depending on the circumstances, no suspicion at all at that time. Regardless, it sets in motion a process in which the officer focuses on the particular individual and has the opportunity to observe and elicit additional evidence.

The detection process ends only when the officer formulates the decision either to arrest or not arrest the individual for DWI. That decision is based on all of the accumulated evidence. Effective DWI enforcers do not leap immediately to the arrest/no arrest decision. Rather, they proceed carefully through a series of intermediate decisions, each of which can elicit evidence. The course clearly outlines each decision step.

Successful DWI detectors are those officers who know what to look and listen for, who have the skills to ask the right questions, and choose and use the right tests. They are highly motivated and apply their knowledge and skill whenever they contact someone who may be under the influence. In this way, they tend to make more DWI arrests and gather the best possible evidence to support their charges.

The second basic task of effective DWI enforcement is **description**. Just as detection is the process of collecting evidence, description is the process of articulating evidence. Successful description demands the ability to verbally convey evidence clearly and convincingly. The officer's challenge is to communicate observational evidence to people who weren't there to see, hear, or smell the evidence themselves. The officer's tools are words. These words make up the written report and verbal testimony which the officer uses to "paint a word picture" when communicating with the prosecutor, the judge, the members of the jury, and the defense attorney. This skill allows these people to develop a sharp mental image that allows them to "see," "hear," and "smell" the evidence. Successful DWI describers have the verbal skills needed to use descriptive words and phrases to communicate their evidence clearly and convincingly.

This training will help officers become more skillful at detection and description, make more DWI arrests, and obtain more convictions. These actions will lead to greater DWI deterrence through less impaired driving and fewer crashes, injuries, and deaths.

### ***Benefits of the Training***

Participants will learn to:

- Recognize driving behaviors and other indicators commonly exhibited by impaired drivers
- Become better detectors and better describers by improving their knowledge, attitudes, and skills in detecting the impaired driver and articulating their observations
- Develop a better understanding of the tasks and decisions involved in the DWI detection process
- Recognize the magnitude and scope of DWI-related crashes, injuries, deaths, property loss, and other social aspects of the DWI problem
- Understand the deterrent effects of DWI enforcement
- Have a better understanding of the legal environment relevant to DWI enforcement and use of the three SFSTs
- Know and recognize typical clues of alcohol impairment that may be detected during face-to-face contact with DWI suspects
- Know and perform the appropriate administrative procedures for the divided attention psychophysical tests
- Know and perform appropriate administrative procedures for the HGN test
- Know and recognize typical clues of alcohol impairment that may be seen during administration of the SFSTs
- Understand the DWI prosecution requirements and their relevance to DWI arrest reporting.

### ***Course Content***

The course presents a substantial body of information relevant to the entire DWI detection process, including the organization, presentation, and articulation of the evidence gleaned from that process. It also presents supportive information to bolster the participants' awareness of the importance of effective DWI enforcement.

Key elements of the subject matter include:

- Involvement of impaired driving in traffic crashes, deaths, and injuries, both Nationally and within the participants' State(s)
- Concept of general deterrence of DWI and evidence of the effectiveness of deterrence in reducing impaired driving
- Laws governing DWI and its enforcement within the participants' State(s)

- Concept of detection as a three-phase process, with specific evidence-gathering and decision-making tasks in each phase
- Kinds of evidence of alcohol impairment typically associated with each phase of detection
- Concepts and principles of divided attention (psychophysical) testing
- Concepts and principles of HGN testing
- Guidelines for processing suspects arrested for DWI, preparing arrest reports, and delivering testimony in DWI trials

### ***Training Activities***

The principal activity of this course is hands-on practice by the participants. In a variety of ways, they spend approximately three quarters of the total training time actually doing various elements of the detection and description tasks. They observe video presentations of vehicles and operators and gather evidence of impairment. They form decisions, i.e., to stop suspected impaired drivers, to request them to exit their vehicles, to administer SFSTs, and to decide to arrest or not arrest them. They write narrative and other reports to document that evidence. They organize and testify to the evidence they have observed. Most significantly, they practice—again and again—administering and interpreting the SFSTs.

Even though significant time is spent in lectures and demonstrations by instructors, the participants are actively engaged, never passive listeners.

The following are among the most important learning activities of the course:

- Video presentations of vehicles and operators exhibiting indicators associated with the various phases of DWI detection
  - Participants view the videos, then identify and record the clues of possible impairment
- Brief "testimony" sessions are conducted where selected participants attempt to give clear, convincing verbal descriptions of the clues observed in the video presentation
- "Dry run" practice in administering SFSTs, in which participants work in small groups, taking turns administering HGN, WAT, and OLS to each other
- "Controlled drinking" practice(s), in which participants administer the SFSTs to volunteers (not members of the class) who have consumed various amounts of alcohol
  - Participants also practice observing, recording, and interpreting test results during these sessions

- NHTSA/IACP-approved videos of the three SFSTs being performed by volunteer drinkers are available for options one and two only
  - Videos allow participants to practice observing, interpreting, and recording the tests

**NOTE: NHTSA/IACP strongly believe that conducting live alcohol workshops is the optimal way of achieving the learning objectives of this training.**

- Report writing exercise, in which participants view a video of a simulated DWI detection/arrest sequence and prepare a detailed narrative report
- Moot court, in which selected participants "testify" based on the contents of their narrative reports
- Written tests, in which participants demonstrate their knowledge of the content subject matter
- A field sobriety proficiency examination, in which participants demonstrate their ability to administer HGN, WAT, and OLS tests

### ***Length of Training***

The core curriculum consists of 15 sessions and requires three full training "days." There is no need to conduct the training for three consecutive days, or to adhere to a traditional 8:00am - 5:00pm class-day schedule. For example:

- There may be reasons to spread the course over a five-day period or conduct some sessions at night
- A five-day sequence, with an average of four to five hours' instruction each day, will afford the participants more independent study time and an opportunity to assimilate the information presented
- Scheduling the "controlled drinking" practice sessions at night makes it easier to recruit volunteer drinkers
  - Also, it allows participants to practice administering the SFSTs under more realistic circumstances (most impaired driving arrests occur at night)
  - If weather permits, these practice sessions can be held outdoors to enhance realism
- Evening and nighttime training sessions are less susceptible to interruption
  - A court appearance could cause a participant to be absent from a daytime class for several hours
  - Such absences cannot be tolerated in this course: there is simply no way that a participant can achieve the training objectives if several hours of instruction or practice are missed
  - SESSIONS MISSED DURING EXCUSED ABSENCES MUST BE MADE UP

The sequence and duration of the 15 core sessions and 2 optional sessions are listed below.

Session	Title	Duration
1	Introduction and Overview	30 Minutes
2	Detection and General Deterrence	50 Minutes
3	The Legal Environment	1 Hour 10 minutes
4	Overview of Detection, Note Taking and Testimony	50 Minutes
5	Phase One: Vehicle In Motion	1 Hour 30 minutes
6	Phase Two: Personal Contact	1 Hour 30 minutes
7	Phase Three: Pre-Arrest Screening	40 Minutes
8	Concepts and Principles of the SFSTs	3 Hours 20 minutes
9	Test Battery Demonstrations	40 Minutes
10	"Dry Run" Practice	50 Minutes
11	"Testing Subjects" Practice: First Session	2 Hours
12	Processing the Arrested Subject, Report Writing and Preparation for Trial	3 Hours
13 OPT	Moot Court (Optional)	2 Hours
14	"Testing Subjects" Practice: Second Session	2 Hours
15	Review and Examinations	1 Hour 50 minutes
16	Program Conclusion	50 Minutes
17 OPT	Introduction to Drugged Driving (Optional)	4 Hours

### **Course Flexibility**

All of the training objectives are considered appropriate and essential for police officers who wish to become proficient at detecting evidence of DWI and at describing that evidence in written reports and verbal testimony. All of the subject matter is considered necessary to achieve those objectives. All of the learning activities are needed to ensure that the participants master the subject matter.

This curriculum should take a minimum of 24 hours to teach. The participant must have met all of the listed learning goals and performance objectives included.

This course is "flexible" in that it can easily be **expanded** since it does not cover all dimensions of DWI enforcement. For example, NHTSA/IACP has developed two trainings addressing impairment by drugs other than alcohol. One is the Introduction to Drugged Driving course, which is approximately 4 hours in duration, and the other is the ARIDE course, which is approximately 16 hours. The Introduction to Drugged Driving is designed to be completely compatible with this course and is an excellent addition to the training. The State DEC Program Coordinator or SHSO can be contacted for information on the ARIDE curriculum.

In recognizing the limitation some agencies have in conducting live alcohol workshops, NHTSA sponsored research involving the use of videos as an alternative training procedure (NOTE: See Appendix C). As a result of this research, NHTSA/IACP will now allow two options to the core curriculum:

- **OPTION ONE:** To substitute NHTSA/IACP-approved videos of "dosed" subjects for one alcohol workshop (See Session 11-A or 14-A) and to conduct the other alcohol workshop "live" as indicated in Session 11 or 14.
- **OPTION TWO:** To substitute NHTSA/IACP-approved videos of "dosed" subjects for both live alcohol workshops (See Sessions 11-A and 14-A).

It is critical to note that the purpose of this training is to ensure participants become proficient in administering and interpreting the SFSTs. **Regardless, if the workshop was a live workshop or video workshop, it is strongly recommended each participant maintain a log of every SFST administered.**

Note: During training, the SFSTs must be administered each time exactly as outlined in this course. For field conditions, refer to the Preface.

### **Overview of the Curriculum Package**

In addition to this Administrator Guide, the curriculum package for the SFST course consists of the following documents and materials:

- Instructor Guide
- Visual Aids
- Participant Manual

### ***Instructor Guide***

The Instructor Guide is a complete and detailed blueprint of what the course covers and how it is to be taught. It is organized into 15 core sessions and 2 optional sessions.

Each session consists of a cover page, an outline page, and the lesson plans, which include a thumbnail of the PowerPoint slide referenced in the lesson plans.

The cover page presents the session's title and the total instructional time required to complete the session.

The outline page lists the specific learning objectives of the session, i.e., what the participants will be able to do once they have successfully completed the session's learning activities. The outline page also lists the session's major content segments and the principal types of learning activities that take place during the session.

The Instructor Guide serves as a means of preparing the instructor to teach the course. Every instructor should review the entire set of lesson plans to become familiar with the content and learning activities and develop a clear understanding of how the course "fits together". Instructors are expected to become thoroughly familiar with every session they are assigned to teach, to assemble all "props" and other instructional equipment referenced in the lesson plans, and to augment the "instructional notes" as necessary to ensure that individual teaching styles and experiences are applied to the content and learning activities.

The Instructor Guide serves as an in-class reference document for helping to maintain the sequence and pace of presentations and other learning activities. However, the information contained in the outlines is not to be read verbatim to the participants.

### **Visual Aids**

Four kinds of audio/visual aids are used in this course.

- Wall charts
- Dry-erase board/easel pad presentations
- Slides (PowerPoint slides)
- Videos

The wall charts are permanently-displayed items. They consist of sketches with brief captions intended to depict major themes and segments of the course. Wall charts can be handmade, using colored marker pens, on easel pads. Sketches and text must be large enough to be viewed from any seat in the classroom. PowerPoint slides can be projected onto easel pads and traced with colored markers to produce the wall charts.

The dry-erase board/easel pad presentations, as outlined in the lesson plans, are self-explanatory.

The slides are simple graphic and/or narrative displays that emphasize key points and support the instructor's presentation. The slides referenced in the lesson plans are found in each session of the Instructor Guide. The instructor should supplement the slides with locally-prepared materials wherever appropriate.

Video presentations are provided and referenced in the instructor lesson plans. For example, a presentation entitled "Visual Detection of DWI Motorists" and a video entitled "Motorcycle Visual Detection Cues" are used in Session 5.

Other video presentations consist of brief encounters with impaired motorists. These segments cover vehicle in motion observations, personal contact, and pre-arrest screening. Each video provides the participants an opportunity to practice recognizing and documenting observational evidence of DWI. Subsequent to each video, selected participants are called upon to practice "testifying" about their observations.

The remainder of the video presentations are classroom lectures and demonstrations covering the three SFSTs and the NHTSA/IACP-approved videos used as options to the controlled drinking workshops in Sessions 11-A and 14-A.

### ***Participant Manual***

The participant manual is a reference manual for the course. It provides a summary of the contents of each session.

The participant manual is intended to be used during the entire training.

### **General Administrative Requirements**

#### ***Facility Requirements***

The presentation/demonstration sessions of the SFST training require a classroom with ample table/desk space for each participant, a computer, a multimedia projector and screen, and a dry erase board and/or easel pad. The classroom must have sufficient open space to permit clearly visible demonstrations of the SFSTs. If possible, the participants' tables/desks should be arranged in a U-shaped format so that the instructors can conduct their demonstration in the open space in the center.

The hands-on practice sessions and the proficiency examinations require additional space consisting of a large open area (free of any obstructions such as tables, chairs, etc.) in which teams of participants can work without interfering with each other. It must be possible to mark straight lines 12 to 15 feet long on the floor to facilitate practicing the WAT test (i.e., strips of easily removable tape). If weather permits, these practice sessions can be held outdoors to enhance realism.

The live "Testing Subjects" Practice Sessions (11 and 14) require a separate room for the volunteer drinkers and use of one or more accurate breath testing instrument devices for monitoring their blood alcohol concentrations (BACs).

#### ***Instructor Qualifications***

SFST instructors MUST have successfully completed the NHTSA/IACP-approved SFST training, NHTSA/IACP SFST Instructor Development Course (IDC), have experience in administering the SFSTs, and have experience providing DWI testimony in court. Dedicated, qualified instructors are critical to the continued success of the SFST program.

SFST instructors are responsible for observing, evaluating, and verifying the performance of SFST candidates throughout the training process. Therefore, only persons experienced in the administration of the SFSTs should become SFST instructors.

Instructors planning and managing a live alcohol workshop should have experience in this area. **A ratio of at least one instructor for every six participants is recommended.** Their responsibilities include coaching participants during the various hands-on practice sessions and conducting the proficiency examinations during Session 15.

All instructors must be fully proficient in administering the SFSTs. It is beneficial to recruit a Traffic Safety Resource Prosecutor (TSRP) or an experienced DWI prosecutor to assist in conducting certain segments in Session 3: The Legal Environment, Session 12: Processing the Arrested Subject, Report Writing, and Preparation for Trial, and Session 13: Moot Court.

It is preferred SFST instructors delivering the four-hour "Introduction to Drugged Driving" session also be DREs.

### ***Class Size Considerations***

This course is a highly interactive learning experience. Participants need ample opportunities to practice applying the skills they are learning (i.e., observing, testifying, reporting, and administration of the SFSTs). Participants need individual attention during practice sessions.

The recommended maximum class size is 24 participants. An ideal range would be 15-21. It is recommended that a minimum of two instructors teach the classroom portion of the SFST curriculum. Each instructor should be proficient in the administration and interpretation of the SFSTs and be fully conversant with the SFST curriculum.

### **Guidelines for Controlled Drinking Practice Sessions**

**NHTSA/IACP strongly recommends the use of live alcohol workshops during this training.** If used, volunteers will consume carefully-measured quantities of alcohol and submit to SFSTs administered by the participants. Drinking volunteers are an essential resource for the core curriculum. Therefore, careful steps must be taken to ensure the volunteers' safety as well as their contribution to the overall learning experience.

At least one instructor should be experienced in conducting an alcohol workshop. **A ratio of at least one instructor for every six participants is recommended.** Their responsibilities include coaching participants during the practical portion of this session.

**NOTE: WEAPONS ARE NOT PERMITTED IN THE VICINITY OF ANY DRINKING VOLUNTEER.**

### ***Criteria to be considered when selecting volunteer drinkers***

- They cannot be members of the class
- They should not be law enforcement officers
- They must be verified to be at least of legal drinking age and in reasonably good health
- They cannot have any known history of alcoholism
- They cannot have any known medical condition that may be exacerbated by alcohol (such as hypertension or diabetes)
- They cannot be taking any known medication (prescription or otherwise) that might adversely interact with alcohol

### ***Managing the Volunteer Drinkers***

Transportation should be provided for the volunteers to the training session and **must** be provided from the training session. Under no circumstances may volunteers be permitted to drive from the training session, regardless of their BAC at the time of departure. Volunteers should be released only into the custody of responsible, sober persons.

It is recommended there be a minimum of one drinking volunteer for every three to five participants.

From the time of their arrival until they are properly released, volunteers must be kept under constant supervision. It is suggested that at least one monitor be present for every four volunteers. Whenever possible, volunteers should be paired with a monitor of the same gender. The monitors must supervise the volunteers, serve their drinks, make sure they comply with the schedule, and keep them under close observation.

It is imperative that all volunteers' safety and well-being be a primary concern throughout the exercise, transportation, and release to the appropriate persons. At no time shall they be subject to any threatening, harmful, or inappropriate situation. Instructors and monitors shall maintain a professional demeanor at all times.

**THE EFFECTIVENESS OF THE VOLUNTEERS AS TRAINING RESOURCES DEPENDS ON THEIR BACs. IDEALLY, VOLUNTEERS AT ANY SESSION SHOULD ACHIEVE PEAK BACS BETWEEN 0.06 AND 0.14.**

Volunteers should be instructed to refrain from eating two hours prior to their arrival at the training facility. Food in their stomachs may affect the absorption of alcohol into their bloodstreams and impede your ability to control their BACs.

Volunteers should be brought to the training facility a minimum of three hours before the practice session is scheduled to begin. Each volunteer shall read and sign the "Alcohol Workshop Participant Statement of Informed Consent" form. Each volunteer should be breath tested and have their pulse, blood pressure, and HGN checked and recorded.

NOTE: Additional time may be needed for administrative procedures.

### ***Guidelines for achieving target BACs.***

The table below indicates the ounces of 80-proof distilled alcoholic beverage that volunteers should consume in relation to their weight and the "target" peak BAC during a three-hour interval.

<b>Weight (Pounds)</b>	<b>MEN</b>	<b>WOMEN</b>
<b>110</b>	5	4
<b>120</b>	6	5
<b>130</b>	6	5
<b>140</b>	7	5
<b>150</b>	7	6
<b>160</b>	8	6
<b>170</b>	8	6
<b>180</b>	9	7
<b>190</b>	9	7
<b>200</b>	10	8
<b>210</b>	10	8
<b>220</b>	10	8
<b>230</b>	11	9
<b>240</b>	11	9
<b>250</b>	12	10

It is suggested that volunteers consume half of the total allocated amount of alcoholic beverage during the first hour. They should refrain from drinking or smoking within 15 minutes prior to any breath test.

NOTE: A volunteer may cease drinking at any time.

### **Course Administrative Planning and Preparation Requirements**

Course administrative planning and preparation tasks are to:

- Select officers whom you expect to devote substantial amounts of time to DWI enforcement
- Identify the learning objectives that are appropriate for your participants
- Tailor the instructional material, as appropriate, to conform to your learning objectives
- Select instructors and assign them to teach specific sessions of the course
  - Review the lesson plans and visual aids with the instructors. Give them sufficient time to prepare
- Prepare the instructional facilities by arranging the classroom seating format. Secure the necessary audio visual equipment and materials
- If the core curriculum or option one (1) is selected, recruit volunteer drinkers
  - Arrange for their supervision and transportation and secure the necessary supplies needed for the alcohol workshop(s)

## **Standards for Course Completion**

In order to successfully complete this training, participants must pass the written examination and demonstrate proficiency in administering and interpreting the SFSTs.

### ***The Written Examination***

A written knowledge examination focuses on the administrative and interpretation procedures for the SFSTs. **Participants must achieve a minimum grade of 80% to successfully complete this training.** To obtain a copy of the final examination, contact the State SFST Coordinator or DRE Coordinator.

NOTE: For retesting requirements refer to IACP International Standards for the SFST Program, Section 1.4. (Appendix B)

### ***Assessing Participant Proficiency***

Instructors must decide whether individual participants are proficient with the SFSTs. This is accomplished by the following:

- The lesson plans for Session 15 (Review and Examinations) set forth a procedure for testing each participant's ability to administer the three SFSTs properly
- "Passing" this test requires that the participants administer the complete SFSTs without deleting or erroneously performing any of the administrative elements of the tests

### **Participant Critiques**

A participant Critique Form is provided to document their ratings of course content and activities at the conclusion of the training. Evaluation of these critiques by the instructors and/or course coordinator is critical for maintaining a high degree of achievement in learning and delivery. The form is divided into eight parts:

- Training Objectives
- Workshop Sessions and Quality of Instruction
- Course Design
- Topic Deletions
- Topic Additions
- Overall Course Rating
- Quality of Instruction
- Final Comments or Suggestions

## **SFST Field Evaluations**

It is encouraged that the DWI enforcement of officers completing this training be assessed on a regular basis. This assessment could examine such factors as:

- The number of DWI arrests
- The average BAC of those arrests
- The percentage of arrests resulting in DWI conviction

This information could help document the utility of the course, identify officers who may need refresher training, and secure continuing command-level support for the training.

NHTSA/IACP encourages officers to document all administrations of SFSTs. At a minimum, this documentation should include subject's name, date, results of each test, and officer's classification of subject's BAC and measured BAC, if available. A sample log is included in Session 8.

NOTE: If options utilizing video subjects have been used, maintaining the SFST Field Arrest Log is strongly recommended. Officers utilize an SFST log for the following reasons:

- Records training proficiency
- Records field proficiency
- Documents the officer's experience

All of these combined helps to establish the officer's credibility in administering the SFSTs and may be used as evidence in court.

REMINDER: Only the NHTSA/IACP options videos are approved for the SFST instruction.

## **Requests for Information, Assistance or Materials**

Please contact your SHSO and/or your NHTSA Regional Training Coordinator for help in planning and conducting this training. Information can be found at <https://www.nhtsa.gov/about-nhtsa> (scroll down to the NHTSA Regional Offices area of the page).

## APPENDIX A

### SYNOPSIS OF THE SFST CURRICULUM

#### Session 1 - Introduction and Overview

This session has three segments: "Welcoming Remarks and Objectives," "Administrative Details," and "Pretest." Slide 1-1 will require the instructor to insert the city and dates of this course each time it is offered.

Give a brief welcome and introduction. Describe your credentials for providing SFST training and carefully state the goals and objectives of the course. During this segment have the participants introduce themselves and print their names clearly on name tent cards so that you will be able to call on them by name.

Next, you must attend to some essential "housekeeping duties" by notifying participants of the schedule that will be followed, pointing out the locations of restrooms, lunch rooms, etc. In the final segment, you will have participants complete a pre-test that will allow you to assess how much they already know about the SFSTs.

#### Session 2 - Detection and General Deterrence

This session has five segments: "The DWI Problem," "Concept of General Deterrence," "Relating Detection to Deterrence Potential," "Evidence of Effective Detection and Effective Deterrence," and "Physiology of Alcohol." Instructors will need to add information to slide 2-4 containing figures for the participant's State and/or community from traffic records data. In most of these segments, you will present and discuss with your participants some statistical information. The second segment, Physiology of Alcohol, is a presentation step in the cognitive domain. It gives participants a brief overview of the nature and effects of alcohol. In this session you will help your participants reach some very important conclusions at the outcome of the course:

- First, they will realize that impaired driving is responsible for the deaths and serious injuries of thousands of people in their own States
  - They have to believe that it is a serious problem that must be solved
- Second, they have to believe that many of the people who drive while impaired will stop doing that, at least some of the time, if they fear getting caught
  - Your participants must see that we can create the fear of being caught
- Finally, they have to believe that this notion of deterrence through fear of arrest really does work
  - You can show them evidence that it has worked in the past and you can show them how to make it work in the future

In this session, participants must realize why it is important for them to improve their skills at DWI detection. But if they don't see the value of what you want them to learn, their learning efficiency will be low.

### Session 3 - The Legal Environment

This session has five segments: "DWI Statute," "Implied Consent Law," "DWI Per Se Statute," "Preliminary Breath Testing," and "Case Law Review." Instructors will need to insert participant's State information on the following slides:

- Slide 3-3 DWI Statute
- Slide 3-11 DWI Per Se Statute
- Slide 3-14 Implied Consent Law
- Slide 3-16 State Legal Presumptions
- Slide 3-19 PBT Statute Information (if applicable)
- Slide 3-21 SFST Case Law
- Slide 3-22 HGN Case Law
- Slide 3-23 Search and Seizure Case Law
- Slide 3-24 Other Relevant Case Law

In addition to the above slides, instructors should research and document, in instructional notes (below the slide), the legal definitions regarding the following slides:

- Slide 3-4 "Driving"
- Slide 3-5 "Actual Physical Control"
- Slide 3-6 "Vehicle/Motor Vehicle"
- Slide 3-7 "Location"
- Slide 3-8 "Impaired/Under the Influence"
- Slide 3-10 "DWI Jury Instructions"
- Slide 3-14 and 3-15 "Implied Consent Law"

The entire session is designed to satisfy the well-recognized fact that "you can't enforce the law unless you know the law." The first four segments cover specific types of legislation that either define impaired driving offenses or that regulate the enforcement and prosecution of those offenses. It is the instructor's job to clarify those laws for the participants so they will understand what they have to prove and how they have to prove it when they arrest someone for impaired driving. Because these laws vary from State-to-State, **you may have to modify the content of the first four segments to ensure that the information presented accurately reflects the statutes of your participants' jurisdictions.**

The final segment, "Case Law Review" focuses on how courts in various States have treated HGN. You will need to clarify these decisions for your participants so that they understand how they must introduce HGN evidence to ensure its admissibility.

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

This session has three segments. In the first segment, "Three Phases of Detection," you will define an important concept of DWI Detection for your participants. This concept views detection as a continual process of evidence gathering that ends in the arrest decision. The concept forms the basis for nearly all of the sessions that follow. In the second segment, "DWI Investigation Field Notes," you will introduce the participants to a field note-taking guide that they will use in several subsequent hands-on practice sessions. In the final segment, "Courtroom Testimony," you will review requirements and procedures for presenting observed evidence of DWI violations.

## **Session 5 - Phase One: Vehicle in Motion**

This session is the first of several sessions in which you will explain and demonstrate techniques of detection and testimony and subsequently coach your participants while they practice using those techniques.

Session 5 has six segments. The first, "Overview: Tasks and Decisions," defines what the patrol officer is supposed to do during the first phase of DWI Detection. In the second segment, "Initial Observation: Visual Cues of Impaired Operation (Automobiles)," you will explain and give concrete examples of the most reliable initial indicators of impaired driving. You will introduce fundamental concepts of alcohol impairment in this segment and you will show two videos that portray what research has shown to be the most common visual clues of DWI. The third segment, "Initial Observation: Visual Cues of Impaired Operation (Motorcycles)," will introduce the similar concepts as it relates to motorcycle operation.

In the fourth segment, "Recognition and Description of Initial Cues," your participants will watch video segments of vehicles exhibiting possible indicators of impaired driving and they will attempt to recognize those indicators and to describe them clearly and convincingly in written notes. Following each video segment, you will select a participant who will attempt to give a clear and complete verbal description of the observations in a simulated courtroom setting.

In the fifth segment, "Typical Reinforcing Cues of the Stopping Sequence," you will explain and give examples of the kinds of indicators of impairment that may be observed when an officer signals a driver to stop. This sets the stage for the final segment, "Recognition and Description of Initial and Reinforcing Cues." Here again, participants watch video segments of vehicles exhibiting some initial clues of DWI and subsequently responding to an officer's stop command. The participants attempt to compile accurate and clearly descriptive notes on their observations of the video segments. You choose representative participants to offer verbal descriptions of the observations.

## **Session 6 - Phase Two: Personal Contact**

This session is very similar in structure to Session 5. Our focus now, however, is on the recognition and description of clues of impairment that come to light after the suspect's vehicle has come to a stop and the officer comes into face-to-face contact with the suspect.

The first of the five segments of Session 6 is "Overview: Tasks and Decision." In this segment, you set the stage by explaining what it is that the officer is supposed to do during initial personal contact with a possible DWI violator. In the second segment, "Typical Investigation Clues of the Driver Interview," you explain and give examples of evidence that officers may obtain through their sense of sight, hearing, or smell. In the third segment, "Recognition and Description of Investigation Clues," your participants view a video segment that gives an opportunity to practice recognizing some clues. Subsequently, some members of the class are called upon to "testify" about those observations.

The fourth segment is "Interview/Questioning Techniques." Here, you explain and give demonstrations of simple procedures for questioning suspects that divide their attention in an effort to elicit additional evidence of impairment.

The fifth segment is "Recognition and Description of Clues Associated with the Exit Sequence." In this segment, you explain and give examples of evidence that might be seen or heard when a suspect responds to an officer's request to exit the vehicle and proceed to roadside. Then, your participants view a brief video that portrays a typical exit sequence and they practice recognizing and describing the clues exhibited in that sequence.

### **Session 7 - Phase Three: Pre-Arrest Screening**

It is in this session that you first introduce the participants to the administrative procedures for the three SFSTs.

The first segment, "Overview: Tasks and Decisions," explains what officers should do when employing SFSTs and preliminary breath tests (if applicable) to investigate suspected DWI violators.

The second segment, "Gaze Nystagmus - Definition," will describe the definition of nystagmus and that alcohol and certain other drugs cause HGN.

The third segment, "Horizontal Gaze Nystagmus – Definition, Concept and Demonstration," and the fourth segment, "Vertical Gaze Nystagmus – Definition, Concept and Demonstration," constitute the participants' initial exposure to nystagmus. You explain the phenomenon and relate it to impairment by alcohol. You give initial demonstrations of administrative procedures for HGN and Vertical Gaze Nystagmus (VGN). Note this is a very brief introduction to nystagmus; the instructor is only setting the stage for Session 8.

In the fifth segment, "Divided Attention Tests: Concepts, Examples and Demonstration," you explain the fundamental concept of divided attention and its relationship to alcohol impairment and you give several concrete demonstrations of tests that employ the concept. The two most important of those demonstrations focus on WAT and OLS.

In the sixth segment, "Advantages and Limitations of Preliminary Breath Testing," you will explain the role of Preliminary Breath Testing (PBT) in the DWI Detection process. While you need to do a thorough job in explaining how PBTs can help officers arrive at appropriate arrest/no arrest decisions, it is important that you do not oversell this technology. PBTs need to be presented in their proper context, i.e., something that can help corroborate officers' observations. They must not be viewed by participants as the sole or most important basis for the arrest decision (optional if PBTs are not allowed in your State).

The final segment is "The Arrest Decision." At this time you will briefly review all of the evidentiary concepts covered in Sessions 5, 6, and 7 and you will stress the importance of basing the arrest decision on all of the evidence gathered during all three phases of DWI Detection.

### **Session 8 - Concepts and Principles of the SFSTs**

In this session you fully explain and repeatedly demonstrate the three SFSTs. It is also at this time that participants begin to practice administering these tests.

The goal of the first segment, "Overview: Development and Validation," is to convince your participants that it is worthwhile to learn and use the SFSTs because they have scientific validity, a commodity not shared by any other field sobriety tests.

The second segment is "SFST Field Validation Studies." This segment discusses the three SFSTs as a scientifically-validated and reliable method for discriminating between impaired and unimpaired drivers.

The third segment is "Horizontal Gaze Nystagmus (HGN)." Here, you present each of the three validated clues of HGN in sequence: Lack of Smooth Pursuit; Distinct and Sustained Nystagmus at Maximum Deviation; and, Onset of Nystagmus prior to 45 Degrees. You demonstrate the proper method of checking for each of these clues and monitor brief but productive intervals during which your participants practice checking for each clue. You also explain how to interpret the results of an HGN test, i.e., to evaluate whether or not a suspect is impaired based on the HGN clues and you explain the scientific validity associated with the interpretation of HGN clues.

The fourth segment is "Vertical Gaze Nystagmus (VGN)." You demonstrate the proper method of checking for VGN and monitor brief but productive intervals during which your participants practice. You also explain how to interpret the results of a VGN test.

The fifth segment, "Walk and Turn," is identical in structure to the preceding segment. You explain and repeatedly demonstrate the instructional procedures for administering WAT. You involve participants in these demonstrations and you coach the participants in properly giving the verbal instructions and physical demonstrations that must accompany the administration of this test. You explain the eight validated clues of impairment for WAT and you explain how to interpret those clues in accordance with the findings of the validation research. You will set up and monitor practice intervals in which the participants will administer the WAT.

The sixth segment is "One Leg Stand." It is structured in much the same way as the fourth and fifth segments. You will explain and demonstrate how OLS is administered. You will explain the four validated clues of impairment for OLS and you will explain how to interpret those clues in accordance with the validation research. You will set up and monitor practice intervals during which the participants will practice administering the OLS.

In the final segment, "Taking Field Notes on the Standardized Field Sobriety Tests," you will explain how to record the observed clues.

### **Session 9 - Test Battery Demonstrations**

In this session you will conduct several complete and careful demonstrations of how the three SFSTs are administered and interpreted. The session has two segments. The first is "Live Classroom Demonstrations." You will conduct two complete demonstrations of the three tests using participants as the test "subjects." Then, you will "talk" a participant through a complete demonstration using another participant as the "subject."

The second segment is "Video Demonstrations." This video demonstrates the correct administration of the SFSTs.

## **Session 10 - "Dry Run" Practice Session**

In this session you will assign participants to work in teams taking turns administering the three tests to one another. You will monitor their work and provide constructive criticism and commendations, as appropriate.

## **Session 11 and Session 11-A - "Testing Subjects" Practice: First Session**

The core curriculum requires a live drinking session or a dry video workshop. The two-hour live drinking session ends the second day of training. Again, you will assign the participants to work in teams. But, instead of testing each other, they will administer the tests to a group of volunteer drinkers who are not members of the class and who have been recruited especially for this purpose. The participants will carefully record and interpret the volunteers' performance of the tests and will assess each volunteer's impairment. In the final segment of this Session, "Session Wrap-up," participants will report their assessments of the volunteers and will be informed of the volunteers' BACs. (Instructions for "dosing" volunteers are in the Administrator Guide).

For Options One and Two, participants will view the NHTSA/IACP-approved videos designated for this session. This two-hour Session ends the second day of training. You will assign the participants to work in teams. They will practice administration of the SFST on another participant, view the videos, assess the video subjects' impairment, and record their observations. In the final segment of this Session, "Session Wrap-up", participants will report their assessments of the video subjects and will be informed of the subjects' BACs.

NOTE: NHTSA/IACP strongly recommends using the core curriculum.

## **Session 12 - Processing the Arrested Subject, Report Writing and Preparation for Trial**

In the first of its four segments, "The Processing Phase," you will review the tasks officers are supposed to perform when processing persons arrested for DWI. Since these tasks vary somewhat from agency to agency, you may have to modify the content of this first segment.

In the second segment, "Narrative DWI Arrest Report," you will provide the kind of information officers should include in their DWI reports. Participants will view a DWI stop and arrest scenario and will record their observations. A Field Note-Taking Guide form is available if necessary. You will present and explain a model report-writing format. The narrative DWI Arrest Report will be based on the Field Note-Taking Guide Form.

The third segment is "Case Preparation and Pretrial Conference." You will explain the things officers should do in preparing to testify in DWI cases and you will emphasize the role of the pretrial conference with the prosecutor in trial preparation.

The final segment is "Guidelines for Direct Testimony." You will present and explain some "dos and don'ts" of testimony in DWI cases.

### **Session 13 - Moot Court (optional)**

While this session is optional, the experience provided to participants may prove valuable for testifying. It provides a practical application for the session objectives learned in Session 12. If this session is omitted, it does not affect the goals and objectives of the SFST curriculum in developing skills in DWI Investigation.

You will inform the participants they will view a video portrayal of a typical DWI detection-to-arrest sequence. After the video, divide the participants into their groups and assign them one of the topics described in this session. After allowing time to prepare, each group will testify about their topic.

### **Session 14 and 14-A - "Testing Subjects" Practice: Second Session**

The core curriculum and Option One require this session to contain a live drinking workshop or a dry video workshop. The procedures for this session are identical to Session 11.

For Option Two participants will view the NHTSA/IACP-approved videos designated for this session. The procedures for this option are identical to those in Session 11-A.

NOTE: NHTSA/IACP strongly recommends using the core curriculum.

### **Session 15 - Review and Proficiency Examinations**

In this session, you will select participants to administer the complete SFSTs; they will also explain and interpret the validated clues for each test. You will constructively critique the participants' demonstrations and explanations, as appropriate. Then, you will show a video segment demonstrating the proper administration of a SFST. Next, you will formally test each participant's ability to administer the three tests properly. Participants should not receive a certificate of completion of this training until they have demonstrated proficiency in the SFSTs.

### **Session 16 - Written Examination and Program Conclusion**

This session is based on a written examination. The passing grade is 80%. The evaluation of the course is based on an anonymous critique form that participants will complete.

**APPENDIX B**

**International Standards  
of the  
Standardized Field Sobriety Testing Program**



**A Product of**

**The DEC Program Technical Advisory Panel  
of the IACP Highway Safety Committee**

**Revised October 2016**

## **Use of the Masculine Pronoun in this Document**

“He”, “him” and “his” are used throughout this document wherever a singular pronoun is required to refer to either the male or female gender. This is to avoid awkward phrasing such as “he/she” or the inaccurate use of the plural pronoun “they” or “them” when used with a singular verb.

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## Executive Summary

Since the mid-1970s the National Highway Traffic Safety Administration (NHTSA), with the cooperation and assistance of the law enforcement community, has conducted research that resulted in the development of a battery of three standardized field sobriety tests (horizontal gaze nystagmus, walk and turn, and the one leg stand) to assist police officers in detecting impaired drivers. The program, which was previously termed Improved Sobriety Testing, was initially developed by the Los Angeles Police Department and was validated in laboratory and field studies conducted by the Southern California Research Institute. Training in how to conduct the tests is included in the NHTSA course DWI Detection and Standardized Field Sobriety Testing.

In 1986, the Advisory Committee on Highway Safety of the International Association of Chiefs of Police (IACP) passed a resolution which recommended that law enforcement agencies adopt and implement the field sobriety testing training program developed by NHTSA. As the program has grown, it was apparent that in order to insure continued success, nationally accepted standards must be established. These standards, which establish criteria for the selection and training of SFST practitioners, would help insure the continued high level of success of the SFST program. In 1992, the IACP Highway Safety Committee recommended the development of this system of nationally accepted standards.

In April of 1992, the IACP and NHTSA sponsored a meeting at the headquarters of IACP in Arlington, Virginia. Persons invited to this meeting included senior SFST instructors from several states, curriculum specialists, and training administrators. The participants met in working groups to reach a consensus concerning the many issues relating to the SFST program and to develop recommended minimum standards to the IACP Technical Advisory Committee on Highway Safety. The standards were drafted and presented to the committee for their review at the midyear meeting in June 1992.

The Advisory Committee on Highway Safety, by resolution, adopted the national standards for the SFST program. The standards were subsequently approved by voting membership of the IACP.

Presented in this document are standards specifying the requirement for selection, training, recertification and decertification of SFST practitioners and instructors.

## Definitions

### **BLOOD OR BREATH ALCOHOL CONCENTRATION (BAC):**

A measurement that indicates the grams of alcohol per 100 milliliters of a person's blood or 210 liters of his breath. For example, a BAC of 0.08% means that there are 80 milligrams of alcohol in 100 milliliters of the person's blood.

### **CERTIFICATION:**

IACP/NHTSA Impaired Driving Curriculum courses (i.e. Standardized Field Sobriety Testing, Advanced Roadside Impaired Driving Enforcement, Drug Recognition Expert) have approved curriculum but the attendees receive no certification or credentials from IACP or NHTSA upon completion.

### **COURSE MANAGER:**

An individual who ensures that each training event follows the standardized curriculum and evaluates the training event. The course manager represents the National Highway Traffic Safety Administration and the International Association of Chiefs of Police and resolves issues with the content and/or delivery of the training.

### **CRIMINAL JUSTICE AGENCY:**

For purposes of these standards, a criminal justice agency is any organization, funded by public monies, that is involved in the apprehension, prosecution, and adjudication of public miscreants; or in the incarceration, detention, supervision, or control of said miscreants following apprehension, prosecution, and/or adjudication.

### **DRE INSTRUCTOR:**

A trained and certified drug recognition expert who has received further training and experience instructing within the DEC Program and who has successfully completed the IACP/NHTSA Drug Recognition Expert (DRE) Instructor Development Course (IDC) or an approved equivalent. A DRE Instructor is qualified to teach SFSTs based upon the qualification as a DRE Instructor.

### **DRUG EVALUATION AND CLASSIFICATION PROGRAM (DECP) TECHNICAL ADVISORY PANEL (TAP):**

A group formed to assist the Highway Safety Committee of the International Association of Chiefs of Police (IACP) on specific matters relating to the Drug Evaluation and Classification Program (DECP or DEC Program). These matters include, but are not limited to, the revision of the approved training curriculum, review and approval of proposed alternative training programs, and other matters relating to the technical aspects of the DEC Program, which include Standardized Field Sobriety Testing (SFST), Advanced Roadside Impaired Driving Enforcement (ARIDE), Drug Impairment Training for Education Professionals (DITEP) and the DEC Program.

### **DRUG RECOGNITION EXPERT**

### **GOVERNOR'S HIGHWAY SAFETY OFFICE:**

A state agency, or the equivalent, that appoints the state DEC Program coordinator.

**HIGHWAY SAFETY COMMITTEE:**

A standing committee of the IACP that addresses highway safety issues. One of its subcommittees, the Technical Advisory Panel (TAP), makes recommendations specifically on impaired driving issues.

**HORIZONTAL GAZE NYSTAGMUS (HGN):**

An involuntary jerking of the eyes, occurring as the eyes gaze towards the side.

**IMPAIRMENT:**

One of the several terms used to describe the degradation of mental and/or physical abilities necessary for safely operating a vehicle.

**IMPLIED CONSENT:**

A law that states the suspected DWI drivers are deemed to have given their consent to submit to chemical testing. If the individual fails to provide a chemical test, they can be subject to license sanctions.

**IACP STAFF:**

With grant assistance from the National Highway Traffic Safety Administration, the Division of State and Provincial Police of the IACP has agreed to develop standards and assist in managing the certification process for the DECP. As part of this agreement, the IACP performs necessary staff and coordination functions for the program, such as maintaining the DECP certification registry and issuing certification credentials.

**INTOXICATION:**

One of the several terms used to describe the degradation of mental and/or motor skills and other faculties due to use of alcohol or other drugs.

**NHTSA:**

The National Highway Traffic Safety Administration, within the United States Department of Transportation that exercises primary responsibility for coordinating federal efforts to ensure the safe design and operation of motor vehicles.

**STANDARDIZED FIELD SOBRIETY TESTING INSTRUCTOR:**

An individual who has successfully completed the NHTSA/IACP approved Standardized Field Sobriety Testing (SFST) Instructor Development Course (IDC), the Drug Recognition Expert IDC, or an approved equivalent.

**STANDARDIZED FIELD SOBRIETY TESTS (SFSTs):**

Three tests developed and validated through a series of controlled experiments supported by research grants from NHTSA. The three tests include: Horizontal Gaze Nystagmus (HGN); Walk and Turn (WAT); and One Leg Stand (OLS).

**STATE:**

In addition to the designated states within the United States, this term is used to indicate other recognized jurisdictions outside the USA.

## I. STANDARDS FOR TRAINING IN THE SFST TRAINING PROGRAM

Standards in this section specify the criteria which must be met prior to an individual's completion in the Standardized Field Sobriety Testing (SFST) Program. These criteria outline the knowledge and skills required to be considered for training, as well as the knowledge required for completion of the program.

The current approved curriculum involves a three-day training program. Prior to beginning the training program, participants should have an interest in traffic law enforcement with an emphasis on DUI/DWI. During this training, participants are taught to administer and interpret the results of the SFST battery, including horizontal gaze nystagmus (HGN), walk and turn and the one leg stand.

Upon completion of this classroom training, the participant must pass a comprehensive written examination and successfully complete a proficiency examination witnessed by an SFST instructor.

### 1.1 In order to be considered for training in the SFST, a person shall be employed and under the direct control of a public criminal justice agency or institution involved in providing training services to law enforcement agencies.

**Commentary:** At the discretion of the agency head or administrator, and with consent of the training authority, other persons may audit or observe any or all portions of the SFST training.

### 1.2 SFST students shall complete an approved classroom training course which shall, at a minimum, achieve the learning objectives as stated in the NHTSA/IACP approved training curriculum.

**Commentary:** This curriculum normally takes about 24 hours to teach. To be recognized by NHTSA/IACP, regardless of hours, the participants must have met all the listed learning goals and performance objectives included in each of the training sessions.

Because of the differences in the type and level of training for officers in the detection of impaired substances, agencies should determine the most effective means of providing classroom training in SFST. However, in order to maintain the credibility and integrity of the program, agencies that use a training program other than that currently approved by NHTSA/IACP must have the alternative curriculum approved by the IACP Highway Safety Committee as meeting the required learning objectives. In addition, the IACP Drug Evaluation and Classification (DEC) Program Technical Advisory Panel (TAP), an advisory arm of the Highway Safety Committee, will be responsible for providing periodic updates and modifications to the NHTSA/IACP-approved training curriculum. Presently, the core SFST training course is 24 hours in length and includes at least two controlled drinking sessions utilizing volunteer drinkers, (i.e. "live alcohol workshops"). Acceptable options to the "live" workshops involving the use of videos have been approved. The acceptable alternatives are (1) to substitute NHTSA/IACP approved videos of "dosed" subjects for the first alcohol workshop, but to conduct the second alcohol workshop "live"; or (2) to substitute NHTSA /IACP approved videos of "dosed" subjects for both alcohol workshops.

*It is critical to note that the purpose of this training is to ensure that participants become proficient in administering and interpreting standardized field sobriety tests. NHTSA and IACP strongly recommend the use of live alcohol workshops as part of SFST training, however, NHTSA and IACP recognize the limitations some agencies have in conducting live alcohol workshops. If either option is selected, each student must maintain a log of each SFST administered.*

**1.3 All SFST candidates shall attend and complete all classroom portions of an approved SFST curriculum. This shall include satisfactorily completing all assignments and required examinations. Participants shall not be permitted to "test out" of portioned of the training nor shall they be permitted to attend only those classes that they have not previously completed.**

**Commentary:** Class sessions missed should be made up at the earliest possible time.

**1.4 In order to satisfactorily complete the classroom portion of the training, SFST candidates must complete the NHTSA/IACP-approved final examination with a score of not less than eighty percent (80%). Candidates scoring less than 80% on the final may be retested one time under the supervision of an SFST instructor. The retest shall be completed not less than 15 nor more than 30 days following the completion of the classroom training.**

**Commentary:** The examination used to retest the candidate shall be an NHTSA/IACP-approved examination and shall not have been administered to the candidate previously. If the candidate does not achieve a passing score on reexamination, the candidate must retake the classroom portion of the training and pass the final examination.

**1.5 Upon completion of training, the candidate must demonstrate the ability to administer the SFSTs in the approved sequence and appropriately document and interpret the results.**

**Commentary:** One of the primary factors in the success of the SFST program has been the emphasis upon a standardized approach. The training stresses the importance of a systematic, structured administration of the SFSTs. This includes completing all portions of the field sobriety tests in the appropriate sequence.

## **II. STANDARDS FOR TRAINING AS INSTRUCTORS IN THE STANDARDIZED FIELD SOBRIETY TESTING PROGRAM**

SFST instructors will have successfully completed the NHTSA/IACP-approved Standardized Field Sobriety Testing (SFST) training program or its equivalent, and will have experience in administering the SFSTs and in providing testimony in court in the area of DUI/DWI enforcement. Dedicated, qualified instructors are critical to the continued success of the SFST program.

SFST instructors are responsible for observing, evaluating and verifying the performance of SFST candidates throughout the training process. Therefore, only persons experienced in the administration of the SFST battery should become SFST instructors. Also addressed in this section are standards for instructors/trainers in the program. These individuals are responsible for training the SFST instructors.

- 2.1 Only persons who have successfully completed the NHTSA/IACP approved DUI Detection and Standardized Field Sobriety Testing training program, or its equivalent, may be designated as SFST instructors.**
- 2.2 Any SFST trained person desiring to become an instructor in the SFST program shall make a written application through and be recommended by their agencies as meeting all requirements to become instructors.**

**Commentary:** The agency head or SFST coordinator shall verify that a candidate instructor meets the prerequisites to enter SFST instructor training. Prerequisites may also include any state, local or agency requirements specified for instructors within the jurisdiction.

- 2.3 The candidate instructor shall satisfactorily complete the NHTSA/IACP-approved SFST Instructor Development Course, or an approved equivalent, which shall include both knowledge and practical examination of candidate instructors. State certified DRE instructors are recognized as SFST instructors and are approved to instruct the SFST program.**

**Commentary:** This requirement does not preclude state or local jurisdictions from placing additional requirements on persons assigned to teach additional local law enforcement programs.

The IACP Highway Safety Committee shall be responsible for reviewing and evaluating alternative training programs submitted by agencies. Those programs meeting or exceeding the approved learning objectives for instructor training shall be deemed "equivalent".

- 2.4 All training sessions conducted as part of the SFST program shall be coordinated by a designated SFST instructor who has previously instructed, to insure proper content and delivery of the approved curriculum.**

**Commentary:** To ensure that all training classes are conducted in accordance with the standards, it is recommended that the instructor coordinating the training have a minimum of one-year experience as a SFST instructor.

- 2.5 An instructor trainer (a person who is training instructors) shall have demonstrated proficiency as an instructor.**
- 2.6 An instructor trainer must be knowledgeable of and have audited the SFST School and the SFST Instructor School, and must be thoroughly familiar with the SFST student and instructor manuals.**

**Commentary:** An instructor must demonstrate evidence of the satisfactory completion of the NHTSA/IACP-approved Instructor Development Course or equivalent. Instructor trainers must be familiar with the approved SFST Training Program and be thoroughly familiar with the curricula for their assigned blocks of instruction.

### III. SFST REFRESHER TRAINING

The standards in this section outline the recommended requirements for refresher/update training of SFST practitioners and SFST instructors.

- 3.1 **It is recommended that all law enforcement agencies maintain records concerning the training of law enforcement officers trained in SFSTs.**
- 3.2 **It is recommended that states adopt SFST refresher/update training guidelines for SFST practitioners and instructors to ensure they remain proficient and knowledgeable in the administration and interpretation of the SFSTs.**

*Commentary:* The methods and frequency of the SFST refresher/update training are left to the individual states. NHTSA and the IACP have developed an SFST Refresher Training curricula that can be taught in either a 4-hour or 8-hour classroom setting.

- 3.3 **It is recommended that all SFST practitioners complete a state-approved refresher/update training at a minimum of every three years from the date of their most recent state refresher/update training as an SFST practitioner.**
- 3.4 **It is recommended that all SFST instructors complete a minimum of 8 hours of state-approved refresher/update training at a minimum of every two years from the date of their most recent state refresher/update training as an SFST instructor.**

*Commentary:* The methods of training are left to the individual state. However, the training should include curriculum revision updates to ensure consistency and accuracy in the delivery of the SFST training. Instructing an SFST course shall not be considered part of the refresher/update training.

### IV. STANDARDS FOR REMOVAL OF AN SFST INSTRUCTOR

The standards in this section outline the circumstances and procedures for removing an SFST instructor. In order to assure that standards of performance are maintained, a means of removing persons unable to meet those criteria are recommended. The final authority and responsibility for maintaining program professionalism and standards resides with the state. It shall be incumbent upon the state to assure that certified SFST instructors meet approved standards for delivering the SFST in accordance with the IACP International Standards or approved equivalent state standards.

- 4.1 **It is recommended that decertification occur when an SFST instructor fails to meet minimum standards and requirements for certification, or demonstrates unethical or unprofessional behavior that reflects adversely on the program.**
- 4.2 **Recognition as an SFST instructor will remain in place as long as that individual meets the requirements of Standards 3.2 and 3.4**

## **V. APPROVAL OF SFST TRAINING CURRICULA**

The Highway Safety Committee of the IACP oversees the operation and development of the Standardized Field Sobriety Testing and Drug Evaluation and Classification Programs. In order to maintain the high standards of the programs, the committee has established a subcommittee, the Technical Advisory Panel (TAP). Responsibilities of this panel, appointed by the IACP Highway Safety Committee, include the review of proposed alternative training programs to determine whether or not the course content and learning objectives are consistent with approved standards.

The National Highway Traffic Safety Administration (NHTSA) and IACP have developed a course of instruction to train police officers in the techniques of removing impaired drivers from our roadways. These training courses have been adopted by the IACP as the minimum training requirements for certification courses (i.e., for SFST, DRE and DRE instructors).

Organizations wishing to submit proposed training curricula for review and approval as equivalent programs for the purpose of training persons in the detection and removal of the impaired driver shall submit lesson plans, visual aids, and any other required materials to the IACP. The IACP staff will submit the proposed course to the TAP for evaluation. Courses that meet applicable standards and learning objectives shall be termed as equivalent courses.

R/10/16

**APPENDIX C**  
**Overview of SFST Refresher Training**

In support of SFST training, NHTSA and IACP have developed an SFST Refresher Training.

This training is intended for law enforcement officers at the Federal, State, county, and local level who have already taken, **and successfully completed**, the basic SFST classroom training.

These individuals will now be able to refresh their skills at:

- Recognizing and interpreting evidence of DWI
- Administering and interpreting the scientifically validated sobriety tests
- Describing DWI evidence clearly and convincingly

The SFST Refresher Training is designed to be taught in a four-hour format or can be expanded to an eight-hour format.

To obtain a copy of the SFST Refresher Training, please contact your SHSO or NHTSA Regional Office.

**APPENDIX D**

**INSTRUCTOR ROSTER**

**Course Name:**

**Course Date:**

**Course Location:**

Name: _____ Title: _____ Organization: _____ Mailing Address: _____ _____ City, State, ZIP: _____ Phone: _____	Name: _____ Title: _____ Organization: _____ Mailing Address: _____ _____ City, State, ZIP: _____ Phone: _____
Name: _____ Title: _____ Organization: _____ Mailing Address: _____ _____ City, State, ZIP: _____ Phone: _____	Name: _____ Title: _____ Organization: _____ Mailing Address: _____ _____ City, State, ZIP: _____ Phone: _____
Name: _____ Title: _____ Organization: _____ Mailing Address: _____ _____ City, State, ZIP: _____ Phone: _____	Name: _____ Title: _____ Organization: _____ Mailing Address: _____ _____ City, State, ZIP: _____ Phone: _____
Name: _____ Title: _____ Organization: _____ Mailing Address: _____ _____ City, State, ZIP: _____ Phone: _____	Name: _____ Title: _____ Organization: _____ Mailing Address: _____ _____ City, State, ZIP: _____ Phone: _____

(COPY THIS FORM FOR ADDITIONAL NAMES)

**PARTICIPANT ROSTER**

**Course Name:**  
**Course Date:**  
**Course Location:**

Name: _____ Title: _____ Organization: _____ Mailing Address: _____ _____ City, State, ZIP: _____ Phone: _____	Name: _____ Title: _____ Organization: _____ Mailing Address: _____ _____ City, State, ZIP: _____ Phone: _____
Name: _____ Title: _____ Organization: _____ Mailing Address: _____ _____ City, State, ZIP: _____ Phone: _____	Name: _____ Title: _____ Organization: _____ Mailing Address: _____ _____ City, State, ZIP: _____ Phone: _____
Name: _____ Title: _____ Organization: _____ Mailing Address: _____ _____ City, State, ZIP: _____ Phone: _____	Name: _____ Title: _____ Organization: _____ Mailing Address: _____ _____ City, State, ZIP: _____ Phone: _____
Name: _____ Title: _____ Organization: _____ Mailing Address: _____ _____ City, State, ZIP: _____ Phone: _____	Name: _____ Title: _____ Organization: _____ Mailing Address: _____ _____ City, State, ZIP: _____ Phone: _____

(COPY THIS FORM FOR ADDITIONAL NAMES)

## APPENDIX E Resources

List of NHTSA regional offices:

[www.nhtsa.gov](http://www.nhtsa.gov)

List of State and Territorial Highway Safety Offices:

[www.ghsa.org/html/about/shsos.html](http://www.ghsa.org/html/about/shsos.html)

National Sobriety Testing Resources Center for obtaining SFST materials:

<https://dredata.nhtsa.gov>

IACP Drug Evaluation and Classification Program:

<http://www.decp.org/>

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DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Session 1 – Introduction  
and Overview



February 2018

Session 1 - Introduction

## DWI Detection and Standardized Field Sobriety Testing



Location  
Date

DWI Detection and Standardized Field Sobriety Testing 1-2

***Instructor needs to put in Location and Date.***

***Before beginning this session fill in the blanks with local statistics on slide 10.***

***Write your names on dry erase board or easel/easel pad. State names, agency, and relevant background information.***

#### CONTENT SEGMENTS

- A. Welcoming Remarks and Objectives
- B. Administrative Details
- C. Pre-Test

#### LEARNING ACTIVITIES

- Instructor-Led Presentation
- Written Examination



















Session 1 - Introduction

## Job Performance Enabling Objectives



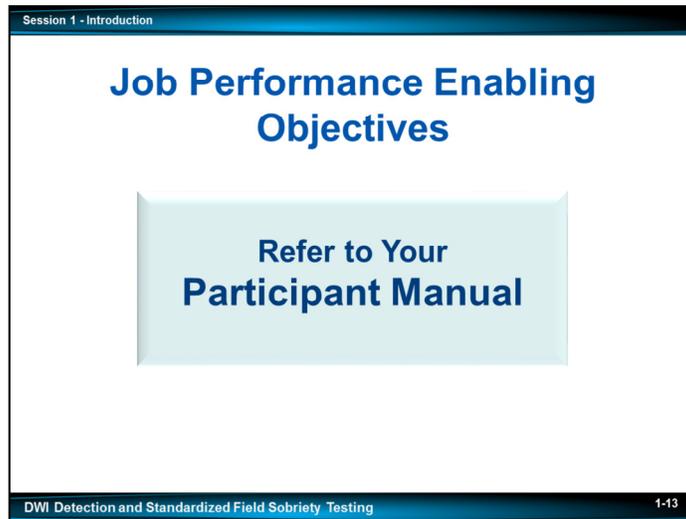
DWI Detection and Standardized Field Sobriety Testing 1-12

***Enabling objectives support overall learning objectives and are detailed in the Participant Manual. Some examples are: (Select some enabling objectives from the list below to see as examples.)***

### **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 (HGN) test
- Know and carry out appropriate administrative procedures for validated divided attention psychophysical tests
- Know and recognize typical clues of alcohol and/or other drug impairment that may be seen during administration of the SFSTs
- Understand the factors that may affect the accuracy of preliminary breath testing (PBT) devices
- Understand the elements of DWI prosecution and their relevance to DWI arrest reporting
- Choose appropriate descriptive terms to convey relevant observations of DWI evidence
- Write clear, descriptive narrative DWI arrest reports

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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.

**DRUG RECOGNITION EXPERT (DRE)**

An individual who successfully completed all phases of the DRE training requirements for certification established by the IACP and NHTSA. The word "evaluator," "technician," or similar words may be used as a substitute for "expert," depending upon locale or jurisdiction.

**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.”

## **GENERAL INDICATOR**

Behavior or observations of the subject that are observed and not specifically tested for. (Observational and Behavioral Indicators)

## **HORIZONTAL GAZE NYSTAGMUS (HGN)**

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

## **IMPAIRMENT**

One of the several items used to describe the degradation of mental and/or physical abilities necessary for safely operating a vehicle.

## **IMPLIED CONSENT LAW**

Suspected DWI drivers are deemed to have given their consent to submit to chemical testing. If the driver fails to provide a chemical test, they can be subject to license sanctions.

## **NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION**

An Administration within the United States Department of Transportation that exercises primary responsibility for coordinating federal efforts to ensure the safe design and operation of motor vehicles.

## **NYSTAGMUS**

An involuntary jerking of the eyes.

**ONE LEG STAND (OLS)**

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

**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 TESTS**

There are three SFSTs, namely Horizontal Gaze Nystagmus (HGN), Walk and Turn (WAT), and One Leg Stand (OLS). 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

## **TRAFFIC SAFETY RESOURCE PROSECUTOR (TSRP)**

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 SFSTs.

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DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Session 2 – Detection and  
General Deterrence



February 2018

# 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



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***Briefly review objectives, content, and activities of this session.***

### *Learning Objectives*

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

- Describe the frequency of DWI violations and crashes
- Define general deterrence
- Describe the relationship between detection and general deterrence

## Learning Objectives (continued)

- Describe brief history of alcohol
- Identify common types of alcohol
- Describe physiological processes of absorption, distribution, and elimination of alcohol in the body



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- 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

### CONTENT SEGMENTS

- A. The DWI Problem
- B. Concept of General Deterrence
- C. Relating Detection to Deterrence Potential
- D. Evidence of Effective Detection and Effective Deterrence
- E. Physiology of Alcohol

### LEARNING ACTIVITIES

- Instructor-Led Presentation
- Video Presentation
- Reading Assignments

## The DWI Problem

- Prior to 1994, nearly half of the drivers who died in crashes had been drinking
- In 2015 – 10,265 alcohol related fatalities represented 29% of all traffic fatalities



### A. The DWI Problem (Local, State and National)

#### *How Widespread Is DWI?*

While not all of those who drive after drinking have a Blood Alcohol Concentration (BAC) of 0.08 or higher (the presumptive or illegal per se limit for DWI in all States) some drivers do have BACs in excess of these limits.

Prior to 1994, nearly half of the drivers who died in crashes had been drinking.

Each year, tens of thousands of people die in traffic crashes. Throughout the Nation, alcohol is the major contributor to traffic fatalities. In 2015, there were 10,265 alcohol-related fatalities representing 29% of all traffic fatalities.

***(NHTSA, Traffic Safety Facts; 2015 Facts Data, 2016.) (DOT HS 812 350)***

***Ask participants to suggest why alcohol-related crashes are more likely to result in death:***

- ***Drinking drivers are more likely to be taking excessive risk such as speeding, turning abruptly, etc.***
- ***Drinking drivers may not react in enough time to slow down prior to crashing***
- ***Drinking drivers are less likely to wear seatbelts***

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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 2-8

A frequently quoted, and often misinterpreted, statistic places the average incidence of DWI at 1 driver in 50. 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 at certain times and places many more than two percent of drivers are impaired. The National Highway Traffic Safety Administration (NHTSA) research suggests 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?

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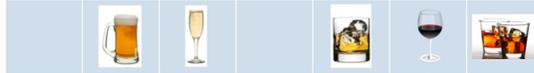
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## Average DWI Violator

- Drives intoxicated 80 times before arrest
- Once every four or five nights
- Some every day



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Although it may be true, on the average, two percent of drivers are DWI at any given time, it certainly is not the same two percent every time. Not everyone who commits DWI is out on the road impaired every Friday and Saturday night. Some of them, at least, must skip an occasional weekend. Thus, the 10% who show up, weekend after weekend, in the Friday and Saturday statistics must come from a larger pool of violators, each of whom "contributes" to the statistics on some nights, but not necessarily on all nights.

There are some who drive impaired virtually everyday; others commit the violation less often. It is likely at least one quarter of all American motorists drive while impaired at least once in their lives. That figure falls approximately midway between the 55% of drivers who at least occasionally drive after drinking and the 10% of weekend, nighttime drivers who have BACs above the legal limit.

**Sources:**

***Borkenstein, R.F., et al, Role of Drinking Driver in Traffic Accidents. Bloomington IN: Department of Police Administration, Indiana University, March 1964***

***Alcohol Highway Safety Workshop, Participant's Workbook Problem Status. NHTSA, 1980***

***DWI Law Enforcement Training: Instructor Guide. NHTSA. August 1974. P.139***

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## DWI Problem

- Far more than 2% of drivers contribute
- Crime committed by a substantial segment of Americans
- Can be fought through societal approach



These estimates include everyone who drives impaired everyday, as well as everyone who commits the violation just once and never offends again; and it includes everyone in between. In short, it includes everyone who ever runs the risk of being involved in a crash while impaired.

### *Society's Problem and the Solution*

The fact is far more than two percent of American drivers actively contribute to the DWI problem. DWI is a crime committed by a substantial segment of Americans.

It has been and remains a popular crime; one many people from all walks and areas of life commit. DWI is a crime that can be fought successfully only through a societal approach of comprehensive community-based programs.

***Explain "alcohol-impaired crash" per NHTSA refers to a crash where at least one motor-vehicle operator has a BAC of .08% or higher. In 2015, 27% of all fatally-injured motorcycle operators had a BAC of .08 or higher. In 2015, the 21-24 year old group constituted 28% of all alcohol-impaired driving fatalities in the U.S. (NHTSA Traffic Safety Facts 2015 Data, December 2016, DOT HS 812 350.)***

***Ask participants to suggest reasons why alcohol-impaired crashes are more likely to result in death.***

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## Alcohol-Related Crash Fatalities

- 26% on weekends were alcohol-impaired
- 3 times higher at night
- 1.02 million DWI arrests in 2016
- Average one fatality every 50 minutes
- Cost society approximately \$44 billion



- 
- 26% of all fatal crashes on weekends alcohol-impaired
  - Alcohol-impaired drivers involved in fatal crashes were 3 times higher at night
  - 1.02 million drivers were arrested for DWI in 2016
  - These alcohol-related fatalities represent an average of one alcohol-related fatality every 50 minutes
  - Based on the most current cost data available, these alcohol-related fatalities cost society approximately \$44 billion in lost productivity, medical expenses, property damages, and other related expenditures (<https://www.nhtsa.gov/risky-driving/drunk-driving>, July 12, 2017)

**Source: NHTSA Traffic Safety Facts, 2016 Data, DOT HS 812 450, October 2017.**

**Source: FBI 2016 Crime in the United States**

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Session 2 – Detection and General Deterrence

## General Deterrence



**The fear of arrest**

DWI Detection and Standardized Field Sobriety Testing 2-17

**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 there is a good chance 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 they will get caught, sooner or later, if they continue to drive while impaired.

***Pose this question: How do we convince the public there is a good chance of being arrested for DWI? Guide the discussion to bring out the fact an appreciable number of violators must be arrested if others are to believe there is a real risk they will be arrested.***

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

***Pose this question: Are we presently arresting enough violators in this State to convince them there is a real risk of being caught?***

Several programs have demonstrated significant deterrence can be achieved by arresting 1 DWI violator for every 100 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



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**According to the Center for Disease Control (CDC), 111 million (2014) US adults drink too much and get behind the wheel.**

**If the chances of being arrested are minimal, do you believe the average DWI offender will fear arrest?**

**Draw the analogy – compare with housebreaking a puppy by punishing the puppy once only every 100 times it messes on the carpet.**

When the chances of being arrested are 1 in 100, the average DWI violator really has little to fear.

**Why is the DWI arrest to violations ratio (1:100) so low?**

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

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## The Ultimate Goal: Changing Behavior

- **Avoid committing DWI**
- **Control drinking prior to driving**
- **Select alternative transportation**
- **Avoid riding with impaired drivers**
- **Recognize impaired driving is unacceptable**

### *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.

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## Prevention



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

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### *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 drinking and driving is strictly an individual's personal business; 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 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.

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Session 2 – Detection and General Deterrence

## The Fear of Being Caught and Punished

### Long term costs and inconvenience



DWI Detection and Standardized Field Sobriety Testing 2-26

*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 a 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.

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## Specific Deterrence

- **Caught and arrested**
- **Public must perceive appreciable risk of being caught and convicted**
- **Enforcement creates and sustains fear of being caught**



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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 it will convince the specific violator there is indeed something to fear as a result of being caught and to emphasize 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 there is an appreciable risk of being caught and convicted if they commit the crime. If actual and potential DWI violators come to believe 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.

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## How Great is the Risk?

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



*How Great is the Risk?*

**Question #3: If the chances of being arrested are 1 in 100, do you believe the average DWI violator will fear arrest?**

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 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.

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## Changing the Odds

- Arrest enough violators to convince many of them it can happen to them
- As arrest rate increases, odds are it will happen to them eventually



### *Changing the Odds*

**Question Number 4: Why is the DWI arrest to violation ratio so low?**

**Gently guide the discussion to bring out two possibilities:**

- **DWI violators vastly outnumber police officers**
- **Some officers are not well trained in DWI detection**

If an arrest/violation ratio of 1 in 100 is not enough to make deterrence work, is it then reasonable to think we can ever make deterrence work?

After all, if we doubled DWI arrests to 1 in 50, we would still be missing 49 violators for every one we managed to catch. If we increased arrests tenfold, to 1 in 10, 9 would escape for every one arrested. How much deterrence would that produce?

Surprisingly, it would probably produce quite a bit. We don't have to arrest every DWI offender every time in order to convince them they have something to fear. We only have to arrest enough of them, enough of the time. As the arrest rate increases, the odds are it will happen to them eventually. The law of averages (or cumulative probability) will catch up with them and sooner than we might at first expect.

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Session 2 – Detection and General Deterrence

## Stockton, California

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

DWI Detection and Standardized Field Sobriety Testing 2-33

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 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 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 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.

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## Improve DWI Detection

### Keys to success:

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

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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 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 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 when DWI arrests per licensed driver increased total fatalities decreased (12 month moving average).

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## Example of General Deterrence

When arrest/violation ratio is 1 in 100:

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

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***Point out this level of deterrence was achieved with an arrest/violation ratio of about 1 in 100. Increased skills coupled with increased efforts resulted in more arrests and less crashes.***

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 DWI arrests went up over 500% in Stockton, citations for other traffic violations increased by a comparatively modest 99%. The implication is 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.

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## Increased DWI Detection Skills

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



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What have the results of these studies shown? Basically, they have shown 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 far fewer of the violators being stopped now avoided detection and arrest.

The difficulty in detecting DWI among operators personally contacted by untrained officers has been well documented. Analysis of roadside survey and arrest data suggest 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 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.

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**The ability to detect DWI violators is the key to general deterrence and possibly the greatest impediment to it.**



The ability to detect DWI violators is the key to general deterrence and possibly the greatest impediment to it. If we accept the three to one ratio of failed detections as being reasonably accurate, the implications are rather alarming. Consider the impact on a DWI violator's subsequent behavior when, after being stopped by the police, the operator is allowed to continue driving. Very likely, these DWI violators and their friends will become even more convinced of their ability to handle drinking and driving. Further, they will come to believe they will never be arrested because police officers can't determine when they are "over the limit." Instead of creating general DWI deterrence, this attitude breeds specific reinforcement. This helps to develop a feeling among DWI violators they have nothing more to fear from police than an occasional ticket for a minor traffic offense.

On the positive side, the ratio of undetected to detected violations suggests much can be accomplished with existing resources if we use those resources as efficiently as possible. By just being able to improve detection skills of law enforcement officers, we could experience an increase in the arrest/violation ratio without any increase in contacts.

This same, or better, degree of effectiveness can happen here.

***Point out the keys to success are:***

- ***Better training in detection skills***
- ***Willingness to arrest every DWI violator who is detected***

***Solicit participants' questions concerning general deterrence.***

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**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 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.

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Session 2 – Detection and General Deterrence

## Fermentation

**Yeast combines with sugars from fruit or grains in a chemical reaction resulting in ETOH.**



DWI Detection and Standardized Field Sobriety Testing 2-43

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.

***Point out humans almost certainly first encountered ethanol that had been produced accidentally in this fashion.***

***Ask : "Why can't fermentation produce a higher ethanol concentration than 14%?" .***

***Point out ethanol starts to boil at a lower temperature than water does.***

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## Common Drink Sizes (0.60 ounces of pure ethanol)

- **Bottle of beer – 12 ounces of fluid @ 5% alcohol**
- **Glass of wine – 5 ounces of fluid @ 12% alcohol**
- **Shot of whiskey (80 proof) – 1 and 1/2 ounces @ 40% alcohol**



Over the millennia, during which people have used and abused ethanol, some common-sized servings of the different beverages have evolved.

- Beer is normally dispensed in 12-ounce servings
  - Since beer has an ethanol concentration of about four percent, the typical bottle or can of beer contains a little less than one half ounce of pure ethanol
- A standard glass of wine has about four ounces of liquid
  - Wine is about 12% alcohol so the glass of wine also has a bit less than one half ounce of ethanol in it
- Whiskey and other distilled spirits are dispensed by the "shot glass," usually containing about one and one half ounces of fluid
  - At a typical concentration of 40% ethanol (80 proof), the standard shot of whiskey has approximately one half ounce of ethanol

Therefore, as far as their alcoholic contents are concerned, a can of beer, a glass of wine and a shot of whiskey are all the same.

**Source: National Institute on Alcohol Abuse and Alcoholism**

**(<https://www.niaaa.nih.gov/alcohol-health/overview-alcohol-consumption/what-standard-drink>) (National Institute of Health). Accessed April 19, 2017**

***Point out the proof of a distilled spirit is equal to twice the ethanol concentration.***

***Point out alcohol concentration may vary greatly depending on type/brand.***

***Solicit participant comments and questions on this overview of alcohol.***

## Alcohol is a CNS Depressant



Ethanol is a Central Nervous System Depressant. It doesn't affect a person until it gets into their Central Nervous System, i.e., the brain, brain stem and spinal cord. Ethanol gets to the brain by getting into the blood. In order to get into the blood, it has to get into the body.

There are actually a number of different ways in which ethanol can get into the body. It can be inhaled: Ethanol fumes, when taken into the lungs, will pass into the bloodstream and a positive BAC will develop. However, prolonged breathing of fairly concentrated fumes would be required to produce a significantly high BAC.

Ethanol could also be injected, directly into a vein; it would then flow with the blood back to the heart, where it would be pumped first to the lungs and then to the brain. And, it could be inserted as an enema and pass quickly from the large intestine into the blood. But none of these methods are of any practical significance because alcohol is almost always introduced into the body orally, i.e., by drinking.

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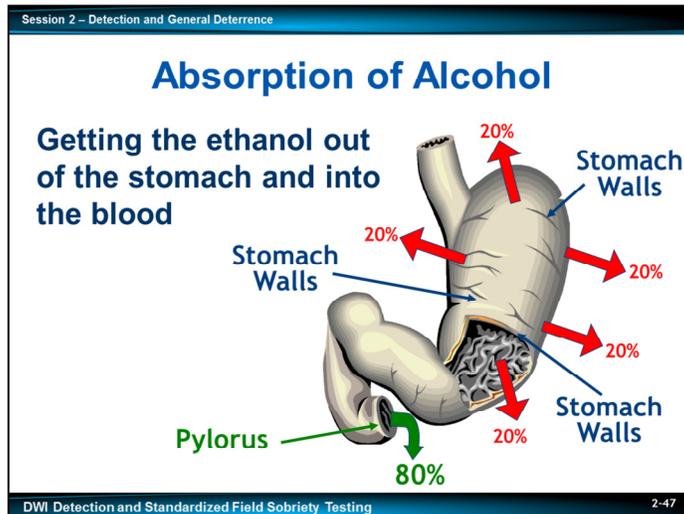
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Once the ethanol gets into the stomach it has to move into the blood. The process by which this happens is known as absorption. One very important fact pertaining to alcohol absorption is it doesn't have to be digested in order to move from the stomach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

Another very important fact is alcohol can pass directly through the walls of the stomach. These two facts, taken together, mean 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 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.

***Solicit participants' comments and questions about the absorption of alcohol into the blood.***



## Distribution of Alcohol

- Which parts of the body have lots of water? Which parts do not?
- The average male is 68% water
- The average female is 55% water



**Ask participants to suggest why this significant difference exists.**

The affinity of alcohol for water, and its lack of affinity for fat, helps explain an important difference in the way alcohol affects women and men. Pound for pound, the typical female's body contains a good deal less water than does the typical man's. This is because women have additional adipose (fatty) tissue designed in part to protect a child in the womb. A Swedish pioneer in alcohol research, E.M.P. Widmark, determined the typical male body is about 68% water, the typical female only about 55%. Thus, when a woman drinks, she has less fluid -- pound for pound -- in which to distribute the alcohol.

**Ask : Suppose a woman and a man who weigh exactly the same drink exactly the same amount of alcohol under exactly the same conditions. Who will reach the higher BAC?**

**Answer: If a woman and a man who weighed exactly the same drank exactly the same amount of alcohol under the same circumstances, her BAC would climb higher than his. When we couple this to the fact the average woman is smaller than the average man, it becomes apparent a given amount of alcohol will cause a higher BAC in a woman than it usually will in a man.**

**Solicit participant comments and questions about the distribution of alcohol in the body.**

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## Metabolism in the Liver

- Burns ethanol
- Aided by alcohol dehydrogenase enzyme
- Ultimate products of chemical reaction are carbon dioxide and water
- Average person's BAC drops by about 0.015 per hour

Most of the metabolism of alcohol in the body takes place in the liver. An enzyme known as alcohol dehydrogenase acts to speed up the reaction of alcohol with oxygen. The speed of the reaction varies somewhat from person to person and even from time to time for any given person. On the average, however, a person's blood alcohol concentration -- after reaching peak value -- will drop by about 0.015 per hour. For example, if the person reaches a maximum BAC of 0.15, it will take about ten hours for the person to eliminate all of the alcohol.

***Some metabolism of alcohol also takes place in other parts of the body including the brain. But the liver does the vast majority of the job.***

For the average-sized male, a BAC of 0.015 is equivalent to about two thirds of the alcohol content of a standard drink (i.e., about two thirds of a can of beer, or glass of wine, or shot of whiskey). For the average-sized female, that same BAC would be reached on just one half of a standard drink. So the typical male will eliminate about two thirds of a drink per hour while the typical female will burn up about one half of a drink in that hour.

***Pose this problem to the class: Suppose a person reaches a peak BAC of 0.15. How long will it take for his or her body to eliminate all of the alcohol?***

***Answer: # hours = BAC / Elimination rate***

***Example:  $X = 0.15 / 0.015$***

***$X = 10$  hours***







## Blood Alcohol Concentration

- **BAC is the number of grams of alcohol found in 100 milliliters of the person's blood**
  - **Example – If a person has a BAC of .08, then there is eight one-hundredths of a gram of alcohol in every 100 milliliters of the person's blood**

***It actually takes 454 grams (g) to make a pound.***

But in another respect, when we contrast alcohol with virtually any other drug, we find impairment by alcohol requires a vastly larger dose than does impairment by the others. Consider exactly what a BAC of 0.08 means. BAC is expressed in terms of the "number of grams of ethanol in every 100 milliliters of blood". Therefore, 0.08 means there is 0.08g of ethanol in every 100 milliliters (mL) of blood. You will find BAC results are reported in a variety of units. Two common variations are milligrams/milliliters and percent. There are 1000 milligrams (mg) in one gram; therefore, 0.08g equals 80mg and a BAC of 0.08 would be reported as 80mg of ethanol/100mL of blood. Percent means parts per one hundred. In this example 0.08g/100mL of blood is equivalent to 0.08% BAC.

Note: The term BAC is used in the manual. However, it should be understood to refer to either Blood Alcohol Concentration (BAC) or Breath Alcohol Concentration (BrAC) depending on the legal requirements of the jurisdiction.

***Ask : How much alcohol does a person have to drink to reach a BAC of 0.08?***

- ***Take an average male weighing 175 pounds and in reasonably good physical shape***
- ***Assume he does his drinking on an empty stomach***
- ***It is estimated a person would have to consume four cans of beer, four glasses of wine, or four shots of 80-proof whiskey in a fairly short period of time to reach a BAC of 0.08***

***Explain there are numerous physiological variables that can affect BAC such as gender, weight, stomach contents, medical/health, metabolic rate, etc.***

***Review questions are located at end of Session 2 (Test Your Knowledge).***

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DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Session 3 – The Legal Environment



February 2018

Session 3 – The Legal Environment

1 Hour 10 Minutes

## Session 3

### The Legal Environment



DWI Detection and Standardized Field Sobriety Testing 3-2

*(Time varies with the complexity and variation of your State's laws relating to drinking and driving and DWI enforcement.) \*\*\*The lesson plans for this session are based on a generic set of drinking and driving laws, patterned after the Uniform Vehicle Code.\*\*\* Significant modification should be made to adapt this session to the current statutes of your State. Instructors will need to insert participant's State information on the following slides:*

*Slide 3-4 DWI Statute*

*Slide 3-12 DWI Per Se Statute*

*Slide 3-15 Implied Consent Law*

*Slide 3-17 State Legal Presumptions*

*Slide 3-20 PBT Statute Information (if applicable)*

*Slide 3-22 SFST Case Law*

*Slide 3-23 HGN Case Law*

*Slide 3-24 Search and Seizure Case Law*

*Slide 3-25 Other Relevant Case Law*

*In addition to the above slides, instructors should research and document, in instructor notes (below the slide), the legal definitions regarding the following slides:*

*Slide 3-5 "Driving"*

*Slide 3-6 "Actual Physical Control"*

*Slide 3-7 "Vehicle/Motor Vehicle"*

*Slide 3-8 "Location"*

*Slide 3-9 "Impaired/Under the Influence"*

*Slide 3-11 "DWI Jury Instructions"*

*Slide 3-16 "Implied Consent 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 (if applicable)

## Learning Objectives

### Be familiar with:

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



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### ***Briefly review the objectives, content, and activities of this session.***

Upon successfully completing this session, the participant 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.

### CONTENT SEGMENTS

- A. DWI Statute: Driving While Under the Influence
- B. Per Se Statute: Driving With a Prohibited Blood Alcohol Concentration
- C. Implied Consent
- D. Preliminary Breath Testing
- E. Case Law Review

### LEARNING ACTIVITIES

- Instructor-Led Presentations
- Reading Assignments















# Conviction

Criminal offense – establish facts  
“beyond a reasonable doubt”



### *Conviction*

In order to convict a person of DWI, it is necessary to establish all elements were present.

- Operation
- Control
- Vehicle
- Impairment

If DWI is a criminal offense, the facts must be established "beyond a reasonable doubt." If DWI is a violation, the standard of proof may be less. In either case, it is the officer's responsibility to collect and thoroughly document all evidence for use at trial.

***Insert or discuss State jury instructions for DWI.***

***Insert or discuss State pattern jury instructions of “beyond a reasonable doubt.”***

In some States, an operator may be charged with a non-criminal alcohol-related violation and the standard of proof may be less.

***Insert or discuss State standard of proof for a violation.***

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## Per Se Statute

Refer to local State information

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***Insert State-specific statute for Per Se.***

**B. Per Se Statute: Driving with a Prohibited Blood Alcohol Concentration (BAC)**

All States include in their DWI statutes a provision making it illegal to drive with a statutorily prohibited BAC. This provision, often called a Per Se law, creates another mechanism by which a suspect can be prosecuted for a DWI offense.

Following is a typical Per Se provision.

It is unlawful for any person to:

- Operate or be in physical control
- Of any vehicle
- Within this State
- While having a BAC at or above State’s level

These elements may vary from State to State.

***Compare and contrast these elements with the elements of DWI.***

***Remind participants law enforcement officers must have probable cause prior to Per Se Statute coming into play.***

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## DWI and DWI Per Se

- **DWI – driving while under influence**
  - **Chemical test is additional evidence**
- **DWI Per Se – driving while having more than a statutorily prohibited BAC**
  - **Chemical test is presumptive evidence**

The DWI and DWI Per Se can work simultaneously to prosecute a suspect for DWI:

- The DWI law makes it an offense to drive while under the influence of alcohol and/or any drug
- The DWI Per Se law makes it an offense to drive while having more than a statutorily prohibited BAC

The Per Se law is an additional method of prosecuting DWI. For the DWI, the chemical test result is additional evidence. For the DWI Per Se, the chemical test result is presumptive evidence.

***Pose this question to the class: "Since there is a Per Se law, why is it necessary to retain the old DWI law?" Probe for responses until at least the following points have emerged:***

- ***Some subjects refuse to submit to chemical testing***
- ***Some violators are under the influence of drugs other than alcohol***
- ***Some are under the influence of alcohol at BACs below State's level***

***Instructors should be familiar with the legal processes in their State regarding disposition DWI/DWI Per Se convictions.***

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 the driver was "under the influence." It is sufficient for the State to show the driver's BAC was at or above the State's level.

Important to remember, an officer must still have probable cause to believe the driver is impaired before making an arrest. Implied consent usually requires the driver be arrested before the request of a chemical test. The law also requires 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 the offense has been committed and make a valid arrest before the chemical test can be requested.

***You may remind participants of lower State levels for underage and commercial motor vehicle operators.***







## Legal Presumptions

### BAC \_\_\_\_\_ or more

- Presumed under the influence

### Less than \_\_\_\_\_

- Presumed not under the influence

### At least \_\_\_\_\_ but below \_\_\_\_\_

- No presumption

***Insert State-specific information for Legal Presumptions (if applicable – this may not apply to all States).***

Legal presumptions define impairment and emphasize the significance of the scientific chemical test evidence.

For example, if the chemical test shows the person's BAC is .08 or more it shall be presumed the person is under the influence.

In this State, if the test shows the BAC is \_\_\_\_\_ or less, it shall be presumed the person is not under the influence.

If the test shows the BAC is more than \_\_\_\_\_ but less than \_\_\_\_\_, there is no presumption as to whether the person is or is not under the influence. The weight of the chemical test evidence is presumptive of alcohol influence, not conclusive.

- ***Some States use breath alcohol concentration (BrAC)***
- ***Statutory presumption levels vary from State to State. Know your State law.***

The fact finder (court or jury) may accept the legal presumption and conclude the driver was or was not impaired on the basis of the chemical test alone. However, other evidence such as testimony about the defendant's driving, odor of alcohol, appearance, behavior, movements, speech, etc. may be sufficient to overcome the presumptive weight of the chemical test.

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# Preliminary Breath Testing (PBT)

Refer to local State information



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***This slide is only applicable for States that permit preliminary breath testing. If not applicable, skip this slide.***

***Insert State statute and provide citation.***

## **D. Preliminary Breath Testing (PBT)**

### *Description*

Many States have enacted PBT laws. These laws permit a law enforcement officer to request a driver suspected of DWI to submit to a roadside breath test prior to arrest. PBT laws vary significantly from one State to another.

***If available, demonstrate PBT operation.***

### *Application*

PBT results may be used to assist in determining whether an arrest should be made. The results may not be admissible as substantive evidence against the defendant in court. Discuss State laws regarding admissibility of PBT results. However, PBT laws may provide statutory or administrative penalties if the driver refuses to submit to the test. These penalties may include license suspension, fines, or other sanctions.

***Outline the statutory/administrative penalties for PBT refusal in your State, if any.***

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DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

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



February 2018

## Session 4

### Overview of Detection, Note Taking, and Testimony



## Learning Objectives

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



***Briefly review the objectives, content, and activities of this session.***

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.

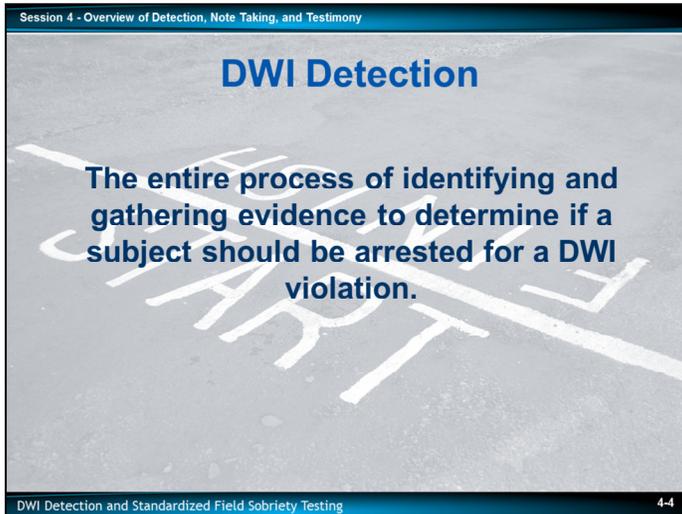
***Write on dry erase board or easel/easel pad - "Focus: DWI Detection".***

### CONTENT SEGMENTS

- A. Three Phases of Detection
- B. DWI Investigation Field Notes
- C. Courtroom Testimony

### LEARNING ACTIVITIES

- Instructor-led Presentation
- Reading Assignments



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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.

***Point out other definitions sometimes are given for "DWI Detection," but this particular definition will be used for this course.***

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

***Point out the initial suspicion may be very slight in some cases and may be very strong in others.***

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, unusual but not necessarily illegal behavior, or almost anything else. Initial detection may carry with it an immediate suspicion 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.

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## DWI Detection Phases

- Phase One – Vehicle in Motion
- Phase Two – Personal Contact
- Phase Three – Pre-Arrest Screening



### 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 (SFSTs) 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 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.

***Emphasize 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.

***Emphasize the importance of being able to articulate why the driver did not or could not perform the 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?**

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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.

***Point out merely stopping the subject doesn't necessarily mean the officer is committed to arresting the subject for DWI. Emphasize the importance of collecting evidence and the use of mobile video and visual aids in accordance with departmental policy.***

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.

***Point out by instructing the driver to exit the vehicle the officer still is not committed to making the DWI arrest. However, the officer suspects there is a possibility the driver is under the influence.***

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 PBT.

***Emphasize this decision is based on the accumulation of evidence from all three phases and represents the culmination of the detection process.***

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## Possible Outcomes – Yes



- 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

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.

***Provide an example and walk through each decision.***

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## Note Taking and Testimony

- Graphically describe your observations
- Convey evidence clearly and convincingly
- Importance of field notes



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### 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 who select the most appropriate terminology for both written reports and courtroom testimony will be better able to communicate clearly and convincingly, making DWI prosecution more successful.

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Session 4 - Overview of Detection, Note Taking, and Testimony	
Vague	Clear
<ul style="list-style-type: none"> <li>• Made an illegal left turn on Jefferson</li> <li>• Drove erratically</li> <li>• Driver appeared drunk, shaking</li> </ul>	<ul style="list-style-type: none"> <li>• From Main, turned left (north bound) on Jefferson, which is one way south bound</li> <li>• Weaving from side to side. Crossed center line twice and drove on shoulder three times</li> <li>• Driver's eyes bloodshot; gaze fixed; Strong odor of alcoholic beverage on driver's breath</li> </ul>
DWI Detection and Standardized Field Sobriety Testing	
4-18	

Consider the following examples.

**Vague Language**

- Made an illegal left turn on Jefferson
- Drove erratically
- Driver appeared drunk, shaking

**Clear Language**

- From Main, turned left (north bound) on Jefferson, which is one way south bound
- Weaving from side to side. Crossed center line twice and drove on shoulder three times
- Driver's eyes bloodshot; gaze fixed; Strong odor of alcoholic beverage on driver's breath

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## Officer Must Be Able To

- Recognize and interpret DWI evidence
- Describe the evidence clearly and convincingly



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### **B. DWI Investigation Field Notes**

One of the most critical tasks in the DWI enforcement process is the recognition and documentation of facts and clues that establish legal grounds to stop, investigate, and subsequently arrest persons suspected of DWI. The evidence gathered during the detection process must establish the elements of the violation and must be completely documented to support successful prosecution of the defendant. This evidence is largely sensory (sight, smell, hearing) in nature, and therefore, is extremely short-lived.

You must be able to recognize and act on the facts and circumstances with which you are confronted. But you also must completely document your observations and describe them clearly and convincingly to secure a conviction. You may be inundated with evidence of DWI, i.e., sights, sounds, smells. You recognize this evidence, sometimes subconsciously, and on this evidence base your decisions to stop, to investigate, and ultimately to arrest.

***Point out how practice opportunities will be provided (e.g., video segments, classroom demonstrations, etc.).***

Since evidence of a DWI violation is short-lived, you need a system and tools for recording field notes at scenes of DWI investigations.

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

**FIELD NOTE-TAKING GUIDE**

I. NAME \_\_\_\_\_ SEX \_\_\_\_\_ RACE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY/STATE \_\_\_\_\_ OR LIC. NO. \_\_\_\_\_  
 D/O B \_\_\_\_\_ DOC. SEC. \_\_\_\_\_  
 VEHICLE MAKE \_\_\_\_\_ YEAR \_\_\_\_\_ LIC. STATE \_\_\_\_\_  
 DISPOSITION \_\_\_\_\_ NO. PASSENGERS \_\_\_\_\_  
 INCIDENT LOCATION \_\_\_\_\_  
 DATE \_\_\_\_\_ TIME \_\_\_\_\_ URASH YES  NO

II. VEHICLE IN MOTION  
 INITIAL OBSERVATIONS \_\_\_\_\_  
 OBSERVATION OF STOP \_\_\_\_\_

III. PERSONAL CONTACT  
 OBSERVATION OF DRIVER \_\_\_\_\_  
 STATEMENTS \_\_\_\_\_  
 PRE-EXIT SOBRIETY TESTS \_\_\_\_\_  
 OBSERVATION OF THE EXIT \_\_\_\_\_  
 ODORS \_\_\_\_\_

**GENERAL OBSERVATIONS**

SPEED \_\_\_\_\_  
 ATTITUDE \_\_\_\_\_  
 CLOTHING \_\_\_\_\_  
 PHYSICAL DEFECTS/DRUGS OR MEDICATIONS USED \_\_\_\_\_

IV. PRE-ARREST SCREENING

		HORIZONTAL GAZE NYSTAGMUS	
		LEFT	RIGHT
Equal Pivots	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> LACK OF SMOOTH PURSUIT	
Equal Tracking	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> DISTINCT AND SUSTAINED NYSTAGMUS AT MAXIMUM	
Vertical Nystagmus	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES	
Other (i.e., Resing Nystagmus)			

DWI Detection and Standardized Field Sobriety Testing 4-21

## Observations - Short-Lived Evidence

**Write on dry erase board or easel/easel pad: "observations – short-lived evidence."**

One way to improve the effectiveness of your handwritten field notes is to use a structured note taking guide. The guide makes it easy to record brief "notes" on each step of the detection process and ensures vital evidence is documented.

The field notes provide the information necessary to complete required DWI report forms and assist you in preparing a written account of the incident. The field notes will also be useful if you are required to provide oral testimony since they can be used to refresh your memory.

A model note taking guide is provided for your use. A brief description follows. Details are provided in subsequent units.

### Note-Taking Guide

**Distribute Note-Taking Guide or State/local DWI Investigation guide to participants.**

**Have student refer to guide at the end of this session or hand out local note-taking guide.**

**Advise participants each section of the note taking guide will be broken down and thoroughly explain in subsequent sessions.**

Remember you must document those actions which gave you reasonable suspicion or probable cause to justify further investigation of a suspected DWI incident.

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

## Field Note-Taking Guide

**ONE LEG STAND**

L	R

Sways while balancing  
Uses arms to balance  
Hopping  
Puts foot down



Type of Footwear:

OTHER: \_\_\_\_\_

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**OTHER FIELD SOBRIETY TESTS**

NAME OF TEST \_\_\_\_\_  
DESCRIBE PERFORMANCE \_\_\_\_\_

NAME OF TEST \_\_\_\_\_  
DESCRIBE PERFORMANCE \_\_\_\_\_

NAME OF TEST \_\_\_\_\_  
DESCRIBE PERFORMANCE \_\_\_\_\_

PBT (1) (optional) Time: \_\_\_\_\_ Results: \_\_\_\_\_ PBT (2) (optional) Time: \_\_\_\_\_ Results: \_\_\_\_\_

DWI Detection and Standardized Field Sobriety Testing 4-25

- Section IV provides space to record the results of all field sobriety tests administered and the results of the preliminary breath test (PBT) if such a test was given.
- Section V provides space to record the officer's general observations, such as the subject's manner of speech, attitude, clothing, etc. Any physical evidence collected should also be noted in this section.

Since this is a note-taking guide and space is limited, you will have to develop your own "shorthand" system. Your notes should be detailed and descriptive of the facts, circumstances, or events being described. These notes may be used to refresh your memory and to write the narrative report documenting your observations to testify in court.

***Encourage officers not to rely strictly on video to document these observations. Notes should be taken as soon as possible after the arrest.***

NOTE: Field notes may be subpoenaed as evidence in court. It is important any "shorthand" system you use be describable, usable, complete, and consistent.

***Solicit participant's questions concerning note-taking procedures.***

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## Preparing Testimony

### Prior to trial:

- Review paperwork
- Review other evidence
- Mentally organize elements, evidence, and testimony
- Identify potential issues
- Discuss with prosecutor



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Testimony preparation continues prior to trial. Just before the trial, you should:

- Review field notes, incident report, narrative, and other paperwork
- Review other evidence, i.e., video, photographs, etc.
- Mentally organize elements of offense and the evidence available to prove each element
- Mentally organize testimony to convey observations clearly and convincingly
- Identify weak spots and/or potential issues with the case and decide how to address those issues
- Discuss the case with the prosecutor

***Point out a pretrial conference is recommended. However, the decision whether or not to conduct one is controlled by the prosecutor. The "conference" may occur 5 minutes prior to the trial.***

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 groups' objectives and expectations is essential for successful prosecution.

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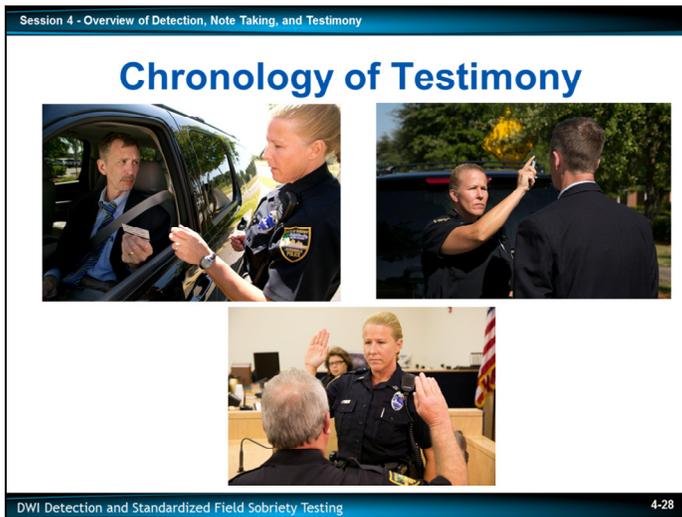
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### *Chronology of Testimony*

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

***Point out in many instances the prosecutor will control the sequence of testimony. However, the officer should organize testimony in a logical time sequence, i.e., to present facts and observations in the order in which they occurred.***

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.

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

***For example, observing a vehicle driving without headlights is a “cue” or prompt to stop the vehicle.***

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

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

***For example, an empty alcohol container in the vehicle is a clue the driver may have been consuming alcohol.***

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

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## Chronology of Testimony

### Arrest and post arrest observations:

- Arrest procedures and admonitions
- Defendant's actions and statements
- Post arrest observations
- Request for chemical test(s)
- Administration and results of chemical test(s)
- Interview

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### Arrest and Post Arrest Observations

- The arrest itself including procedures used to inform driver of arrest, admonish subject of rights, and so on
- Defendant's actions, statements, and/or admissions subsequent to the arrest
- Observation of defendant subsequent to the arrest including not just what the defendant said but actions and reactions
- The request for the chemical test including the procedures used, admonition of rights and requirements, and so on
- The conduct, actions, reactions, and results of the chemical test if you were also the testing officer
- The interview of the defendant, including any new observations, statements, and/or admissions.

***Emphasize the importance of documentation in preparation for court testimony.***

***Discuss your State's administrative license suspension hearing procedure.***

***Point out participants may have the opportunity to practice giving testimony as the training progresses through the three detection phases.***

***Solicit participant's questions concerning testimonial requirements.***

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**FIELD NOTE-TAKING GUIDE**

I. NAME \_\_\_\_\_ SEX \_\_\_\_\_ RACE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY/STATE \_\_\_\_\_ OP.LIC.NO. \_\_\_\_\_  
 D.O.B. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ SOC. SEC. # \_\_\_\_\_  
 VEHICLE MAKE \_\_\_\_\_ YEAR \_\_\_\_\_ LIC. \_\_\_\_\_ STATE \_\_\_\_\_  
 DISPOSITION \_\_\_\_\_ NO. PASSENGERS \_\_\_\_\_  
 INCIDENT LOCATION \_\_\_\_\_  
 DATE \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ TIME \_\_\_\_\_ CRASH YES  NO

II. VEHICLE IN MOTION

INITIAL OBSERVATIONS \_\_\_\_\_

OBSERVATION OF STOP \_\_\_\_\_

III. PERSONAL CONTACT

OBSERVATION OF DRIVER \_\_\_\_\_

STATEMENTS \_\_\_\_\_

PRE-EXIT SOBRIETY TESTS \_\_\_\_\_

OBSERVATION OF THE EXIT \_\_\_\_\_

ODORS \_\_\_\_\_

GENERAL OBSERVATIONS

SPEECH \_\_\_\_\_

ATTITUDE \_\_\_\_\_

CLOTHING \_\_\_\_\_

PHYSICAL DEFECTS/DRUGS OR MEDICATIONS USED \_\_\_\_\_

IV. PRE-ARREST SCREENING

HORIZONTAL GAZE NYSTAGMUS

Equal Pupils       Yes    No    LACK OF SMOOTH PURSUIT  
 Equal Tracking     Yes    No    DISTINCT AND SUSTAINED NYSTAGMUS AT MAX DEV  
 Vertical Nystagmus    Yes    No    ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES  
 Other (i.e., Resting Nystagmus) \_\_\_\_\_

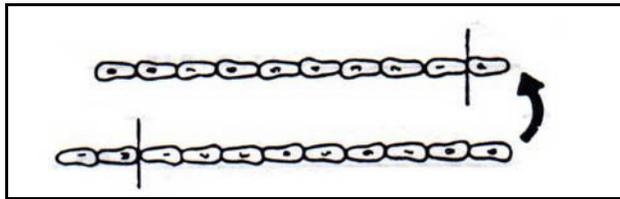
LEFT	RIGHT

WALK AND TURN

INSTRUCTION STAGE

CANNOT KEEP BALANCE

STARTS TOO SOON



WALKING STAGE

FIRST NINE STEPS

SECOND NINE STEPS

STOPS WALKING

MISSES HEEL-TO-TOE

STEPS OFF LINE

USES ARMS FOR BALANCE

ACTUAL STEPS TAKEN

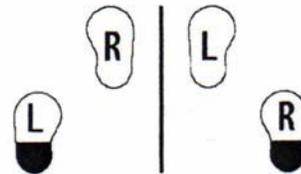

IMPROPER TURN (Describe) \_\_\_\_\_

CANNOT DO TEST (EXPLAIN) \_\_\_\_\_

OTHER: \_\_\_\_\_

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: \_\_\_\_\_

OTHER FIELD SOBRIETY TESTS

NAME OF TEST \_\_\_\_\_

DESCRIBE PERFORMANCE \_\_\_\_\_

NAME OF TEST \_\_\_\_\_

DESCRIBE PERFORMANCE \_\_\_\_\_

NAME OF TEST \_\_\_\_\_

DESCRIBE PERFORMANCE \_\_\_\_\_

PBT (1) (optional) Time: \_\_\_\_\_ Results: \_\_\_\_\_

PBT (2) (optional) Time: \_\_\_\_\_ Results: \_\_\_\_\_

DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Session 5 – Phase One:  
Vehicle in Motion



February 2018

# Session 5

## Phase One: Vehicle in Motion



## Learning Objectives

- Identify typical cues of Detection Phase One
- Describe observed cues clearly and convincingly
- Understand significance of the impaired motorcycle riders problem
- Obtain skills necessary to detect, arrest, and prosecute alcohol- and drug-impaired motorcyclists



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

- Identify typical cues of Detection Phase One
- Describe the observed cues clearly and convincingly
- Understand the significance of the problem of impaired motorcycle riders
- Obtain the skills necessary to detect, arrest, and prosecute alcohol- and drug-impaired motorcyclists

### CONTENT SEGMENTS

- A. Overview: Tasks and Decision
- B. Initial Observations: Visual Cues of Impaired Operation (Automobiles)
- C. Initial Observations: Visual Cues of Impaired Operation (Motorcycles)
- D. Recognition and Description of Initial Cues
- E. Typical Reinforcing Cues of the Stopping Sequence
- F. Recognition and Description of Initial and Reinforcing Cues

### LEARNING ACTIVITIES

- Instructor-Led Presentations
- Video Presentation
- Instructor-Led Demonstrations
- Participant Presentations

Session 5 – Phase One: Vehicle in Motion

## Phase One: Vehicle in Motion

Initial Observation of the Vehicle in Operation

?

DWI Detection and Standardized Field Sobriety Testing 5-4

### A. Overview: Tasks and Decision

Your first task in Phase One: Vehicle in Motion is to observe the vehicle in operation and 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. ***Point out block No. 1 on the slide. Pose this question: "What are some of the kinds of things that might first draw your attention to a vehicle?"***

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

## Phase One: Vehicle in Motion

Initial Observation  
of the Vehicle  
in Operation

↓

Should I Stop  
the Vehicle?

?

↓

Observation of  
the Stop



DWI Detection and Standardized Field Sobriety Testing 5-5

**Point out the decision on the slide. Ask class to suggest circumstances under which it would be appropriate to delay the stop decision and to continue to observe the vehicle.**

**Emphasize the officer may not have an explicit reason to suspect impairment at this time.**

Alternatives to stopping the vehicle include:

- Delaying the stop/no stop decision in order to continue observing the vehicle
- Disregarding the vehicle

Whenever there is a valid reason to stop a vehicle, the officer should be alert to the possibility the driver may be impaired by alcohol and/or other drugs.

Once the stop command has been communicated to the suspect driver, the officer must closely observe the driver's actions and vehicle maneuvers during the stopping sequence.

**Point out block No. 2 on the slide.**

Sometimes significant evidence of alcohol influence comes to light during the stopping sequence. In some cases, the stopping sequence might produce the first suspicion of DWI. Drivers impaired by alcohol and/or other drugs may respond in unexpected and dangerous ways to the stop command.

**Emphasize officer's need to be alert for own safety.**

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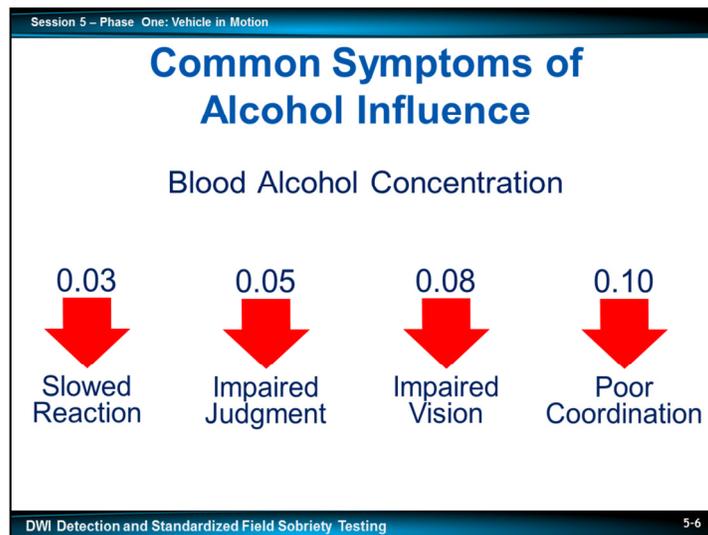
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### **B. Initial Observations: Visual Cues of Impaired Operation (Automobiles)**

*The following video segments were produced to show a variety of traffic stop situations being performed by different law enforcement agencies. The goal of these segments is to depict the cues associated with impaired driving. Participants should be guided by their own agency's policy regarding traffic stops, officer safety tactics, and professional conduct.*

Drivers who are impaired frequently exhibit certain effects or symptoms of impairment. These include:

- Slowed reactions
- Impaired judgment as evidenced by a willingness to take risks
- Impaired vision
- Poor coordination

***Use the following types of questions to involve the participants in a discussion of driving violations/characteristics associated with alcohol influence (all vehicles):***

- ***What violations may result from slowed reactions? (i.e., running red light, failure to proceed on green light)***
- ***What violations might result from impaired judgment? (i.e., speeding, violation of right-of-way)***
- ***What violations might result from impaired vision? (i.e., wrong-way driving, lane departure, almost striking object or vehicle)***
- ***What violations might result from poor coordination? (i.e., wide turns, drifting/weaving, braking erratically)***

The next page presents common symptoms of alcohol influence.

This unit focuses on alcohol impairment because research currently provides more information about the effects of alcohol on driving than it does about the effects of other drugs on driving. Remember whether the driver is impaired by alcohol and/or drugs, the law enforcement detection process is the same and the offense is still DWI.

***The Drug Evaluation Classification (DEC) Program and the Advanced Roadside Impaired Driving Enforcement (ARIDE) course have increased awareness of the DWI drug problem.***



The common effects of alcohol on the driver's mental and physical faculties lead to predictable driving violations and vehicle operating characteristics. The National Highway Traffic Safety Administration (NHTSA) sponsored research to identify the most common and reliable initial indicators of DWI. This research identified 24 cues, each with an associated high probability the driver exhibiting the cue is *impaired*. These cues and their associated probabilities are described in the NHTSA publication, The Visual Detection of DWI Motorists. They also are discussed in Vehicle in Motion, a video sponsored by NHTSA to assist law enforcement officers to recognize DWI detection cues. **(ANACAPA Sciences, DOT HS 808 654, 1997)**

NHTSA sponsored research to identify the most common and reliable initial indicators of DWI. Research identified 100 cues, each providing a high probability indication the driver is *under the influence*.

**The cues presented in these categories predict a driver is DWI at least 35 % of the time.**

The list was reduced to 24 cues during three field studies involving hundreds of officers and more than 12,000 enforcement stops.

**Show Video first. Use slide for review. Allow 12 minutes.**

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## Speed and Braking Problems

- Stopping problems
- Unnecessary acceleration or deceleration
- Varying speed
- 10 mph or more under the speed limit



Speed and braking problems. [p=.45-.70]

- Stopping problems (too far, too short, or too jerky)

**Stopping problems include:**

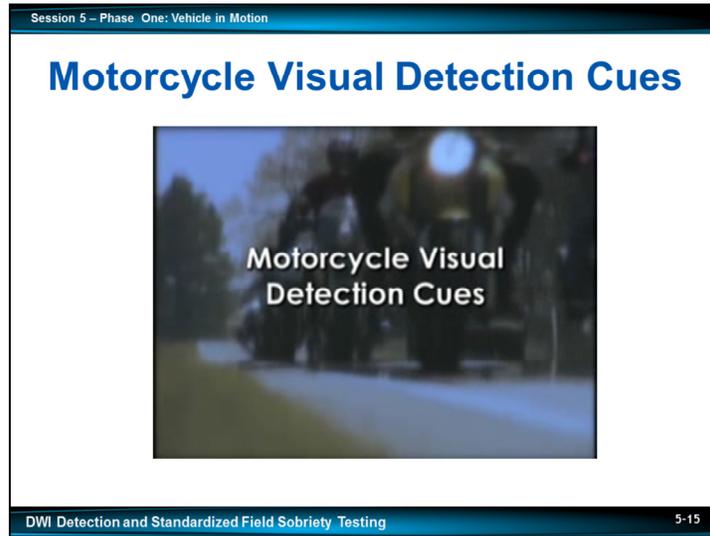
- **Stopping too far from a curb or at an inappropriate angle**
- **Stopping too short or beyond a limit line**
- **Jerky or abrupt stops**
- Unnecessary acceleration or deceleration
- Varying speed
- 10 mph or more under the speed limit











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**C. Initial Observations: Visual Cues of Impaired Operation (Motorcycles)**

**Show video. Allow 14 minutes.**

NHTSA estimated in 2014, 30 percent of all motorcycle riders killed were impaired by alcohol (BAC .08 or greater).

**Source: *The Detection of DWI Motorcyclists, DOT HS 812 292, June, 2016 and Fatal Accident Reporting System (FARS)***

***Motorcycles are defined as two- or three-wheeled motorcycles, off-road motorcycles, mopeds, scooters, mini bikes, and pocket bikes. The motorcycle rider is the person operating the motorcycle; the passenger is a person seated on, but not operating, the motorcycle; the motorcyclist is a general term referring to either the rider or passenger.***

NHTSA sponsored research to develop a set of behavioral cues to be used by law enforcement personnel to detect motorcyclists who are operating their vehicles while impaired. These cues can be used both day and night. These cues have been labeled as:

- Excellent Predictors
- Good Predictors

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## Elements of the Driving Task



### *Relationship of Visual Cues to Impaired Divided Attention Capability*

***Point out it is important to understand how the effects of alcohol are exhibited in driving so officers can recognize the significance of their visual observations.***

Driving is a complex task, composed of many parts:

***Ask participants to name the various parts of the driving task. List them on the easel/easel pad as they are named.***

- Steering
- Controlling accelerator
- Signaling
- Controlling brake pedal
- Operating clutch (if applicable)
- Operating gearshift (if applicable)
- Observing other traffic
- Observing signal lights, stop signs, other traffic control devices
- Making decisions (whether to stop, turn, speed up, slow down, etc.)
- Many other things

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## Safe Driving Demands



Safe driving demands the ability to divide attention among numerous simultaneous tasks.

In order to drive safely, a driver must be able to divide attention among all of these various activities.

Under the influence of alcohol or many drugs, a person's ability to divide attention becomes impaired.

The impaired driver tends to concentrate on certain parts of driving and to disregard other parts.

***This picture shows a driver running a red light.***

***Another Example: Person stops at a green light (scene from previous video).***

- Alcohol has impaired ability to divide attention
- Driver is concentrating on steering and controlling the accelerator and brake
- Does not respond to the particular color of the traffic light

Some of the most significant evidence from all three phases of DWI detection can be related directly to the effects of alcohol and/or other drugs on divided attention ability.

***Point out the concept of divided attention is especially important during personal contact with DWI subjects and during pre-arrest screening of them.***

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## Phase One: Task One Initial Observation of Vehicle Operation

Requires the ability to:

- Recognize evidence of alcohol and/or other drug influence
- Describe that evidence clearly and convincingly

### *Phase One: Task One Initial Observation of Vehicle Operation*

The task of making initial observations of vehicle operation is the first step in the job of DWI detection.

Proper performance of that task demands two distinct but related abilities:

- Ability to recognize evidence of alcohol and/or other drug influence
- Ability to describe that evidence clearly and convincingly

It is not enough a police officer observe and recognize symptoms of impaired driving. The officer must be able to articulate what was observed so a judge or jury will have a clear mental image of exactly what took place.

***Emphasize observational evidence is of little value if the officer cannot make the judge or jury "see" what the officer saw.***

Improving the ability to recognize and clearly describe observational evidence requires practice. It isn't practical to have impaired drivers actually drive through the classroom. The next best thing is to use video to portray typical DWI detection contacts.

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## Procedures for Practicing Cue Recognition and Description

- View DWI violation videos
- Take notes
- Testify
  - Choose words carefully
  - Provide as much detail as possible
  - Construct accurate image of observations
- Critique testimony

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### *Procedures for Practicing Cue Recognition and Description*

***All participants view brief video segments illustrating possible DWI violations.***

***Make sure all participants understand the procedures that will be followed during the practice sessions.***

***Following the video segment, a few minutes will be given to allow all participants to write notes on what was observed.***

***Hand out copies of the standard note taking guide.***

***One or more participants will be called forth to "testify" concerning what was observed.***

***Emphasize participants are to use the guide to compile notes on their observations of the video segments.***

***Class will critique the "testimony" in terms of how clearly and convincingly it conveys what was actually observed. Emphasize the purpose of the critique is not to embarrass anyone, but rather to help everyone become more skilled at providing clear, descriptive testimony.***

***Goal is to choose words carefully and provide as much detail as necessary and to construct an accurate mental image of the observations.***

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## Leaving the Shopping Center



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**Video Segment “Leaving the Shopping Center”**(Video approximately 54 seconds)  
**Show Video Segment “Leaving the Shopping Center.” Allow two minutes for participants to compile notes.**

**Testimony of Video Segment "Leaving the Shopping Center"**

**Select a representative participant to come forward and "take the witness stand" facing the class.**

**Key points to be elicited:**

- **Weather/Traffic conditions**
- **Drives up over raised island**
- **Makes wide right turn**
- **Causes bicyclist to swerve**

**Elicit testimony as follows: "Officer, you have been sworn. Please tell the court exactly what you observed at the time and place in question."**

**Allow the participants to refer to their notes, if so desired.**

**When participant completes testimony ask: "Officer, do you have anything else to add?"**

**Once participant indicates there is nothing further to add, ask the class to comment on the clarity and completeness of the testimony and to add any important details left out.**

**Continue to prompt the class to offer comments until all of the key points have been noted.**

**If so desired and appropriate, repeat the showing of Video Segment No. 1 to point out the key details.**

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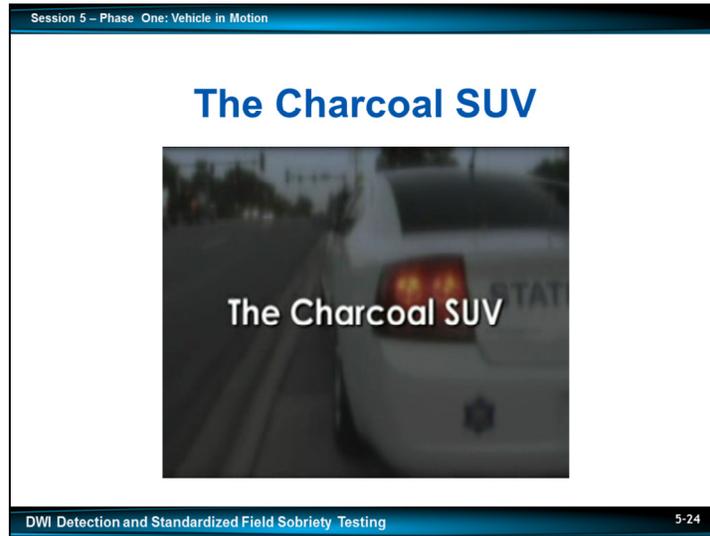
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***Video Segment "The Charcoal SUV" (Video approximately 1 minute)***

***Show Video Segment "The Charcoal SUV." Allow two minutes for participants to compile notes.***

***Testimony on Video Segment "The Charcoal SUV."***

***Select a representative participant to come forward to "testify." Allow participant to refer to notes. Probe for any additional details or more descriptive language in the testimony. Solicit comments from the class.***

***Key points to be elicited:***

- ***Weather/Traffic conditions***
- ***Wrong directional light on***
- ***Sits on green arrow***
- ***Turns on red light***
- ***Drifts first to left then right***

***Stress the importance of the particular words used to describe the subject vehicle's motion.***

***Point out words such as "swerving" and "drifting," etc., convey a powerful and clear mental image of how the vehicle moved, while terms such as "erratic" and "abnormal," etc., are essentially non-descriptive.***

***Point out it is permissible and desirable for the officer to use hand movements, along with verbal testimony, to convey clearly how the vehicle moved.***

***If desired and appropriate, repeat the showing of Video Segment "The Charcoal SUV"***

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Session 5 – Phase One: Vehicle in Motion

## Vehicle in Motion: Stopping Sequence

What do you see?

- Tries to flee
- No/slow response
- Abrupt weave
- Sudden stop
- Strikes curb
- New violations
- Anything else



DWI Detection and Standardized Field Sobriety Testing 5-25

### E. Typical Reinforcing Cues of the Stopping Sequence

After the command to stop is given, the alcohol-impaired driver may exhibit additional important evidence of DWI.

**Ask participants to suggest possible cues that might be observed after the stop command that might reinforce the initial suspicion of DWI.**

Some of these cues are exhibited because the stop command places additional demands on the driver's ability to divide attention.

**Point out the concept of divided attention is especially important during personal contact with DWI subjects and during pre-arrest screening of them.**

**Point out here the dangers inherent with fleeing operators. If time allows, review agency's pursuit policy.**

The signal to stop creates a new situation to which the driver must devote some attention, i.e., emergency flashing lights, siren, etc., that demand and divert the subject's attention. Signal to stop requires the driver to turn the steering wheel, operate the brake pedal, activate the signal light, etc.

As soon as an officer gives the stop command, the subject's driving task becomes more complex.

If subject is under the influence, the subject may not be able to handle this more complex driving very well.

**Emphasize turning on the patrol vehicle's emergency lights creates a simple test of the subject's driving impairment.**

## Phase One: Task Two Observation of the Stop

Requires the ability to:

- Recognize evidence of alcohol and/or other drug influence
- Describe that evidence clearly and convincingly

### *Phase One: Task Two Observation of the Stop*

It is the officer's responsibility to capture and convey the additional evidence of impairment that may be exhibited during the stopping sequence.

- Requires ability to recognize evidence of alcohol and/or other drug influence
- Requires ability to describe that evidence clearly and convincingly

### **F. Recognition and Description of Initial and Reinforcing Cues**

Procedures for practicing cue recognition and description.

***The next two video segments combines both tasks and the decision of DWI Detection Phase One.***

- ***Each segment begins with the initial observation of the vehicle in operation***
- ***In each segment, the decision to stop the vehicle is made***
- ***Each segment concludes with the observation of the stop***

***Standard note taking guide to be used to compile notes.***

***Following each segment, a few minutes will be given to allow participants to gather thoughts and compile notes.***

***Participants will be called upon to "testify" concerning what was observed, both prior to and after the stop command.***

***Class will constructively critique the "testimony." Make sure all participants understand the procedures.***

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## The Sliding Sports Car



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***Video Segment "The Sliding Sports Car" (approximately one minute)***

***Show Video Segment "The Sliding Sports Car." Allow two - three minutes for the participants to compile notes.***

***Testimony on Video Segment "The Sliding Sports Car"***

***Select a representative participant to come forward to "testify."***

***Instruct participants as follows: "Officer, first tell us exactly why you signaled the driver to stop."***

***Make sure participant confines this stage of testimony strictly to what was observed prior to the stop command.***

***Next, instruct as follows: "Officer, now tell us exactly what you observed after you turned on the patrol vehicle's emergency lights."***

***Key points to be elicited concerning observations prior to the stop command (allow participants to refer to notes):***

- Weather/traffic conditions***
- Sports car slides through the stop sign***
- Crosses over the fog line into the bicycle lane***
- Weaves back across right lane and enters middle lane***
- Slow response to stop signal***
- Stops inappropriately (right tires drive on curb)***

***Solicit class comments concerning details or possible improvements to the participant's testimony.***

***If desired and appropriate, repeat the showing of Video segment "The Sliding Sports Car."***

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## The Impatient Driver



**Video Segment "The Impatient Driver" (approximately one minute, 20 seconds)**

**Show Video Segment "The Impatient Driver". Allow two - three minutes for the participants to compile notes.**

**Testimony on Video Segment "The Impatient Driver"**

**Select a representative participant to come forward to "testify."**

**Key Points to be elicited:**

- **Weather/traffic conditions**
- **Honks at other driver**
- **Passes on the left out of the driveway**
- **Violates the "No Left Turn" restriction**
- **Drives over the concrete island with left tires**

**Key points to be elicited concerning observations prior to the stop command (allow participant to refer to notes):**

- **Drifts into left lane and swerves back to right**
- **Slow response to stop command**
- **Drifts again into left lane and swerves back to right second time**
- **Stops with right front tire on curb**

**Instruct participant to testify first concerning everything observed prior to the stop command, and then to everything observed after the stop command.**

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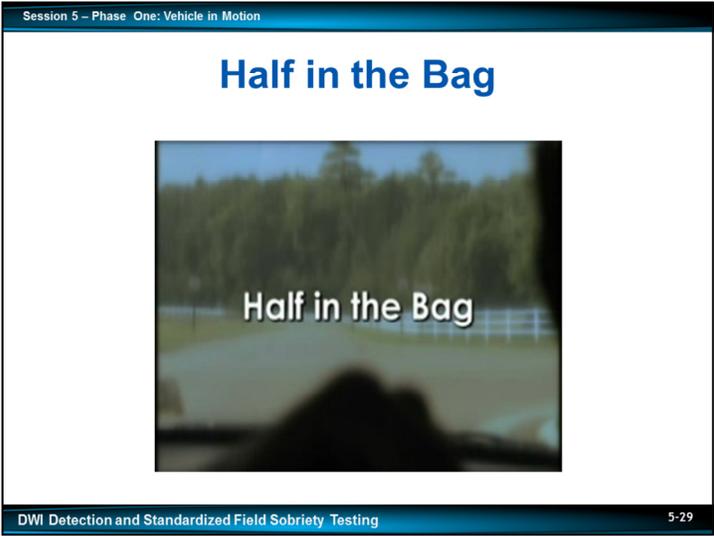
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***Video Segment "Half In The Bag" Show Video Segment No. 8. (approximately one minute)***

***Allow two - three minutes for the participants to compile notes.***

***Testimony on Video Segment "Half In the Bag"***

***Select a representative participant to come forward to "testify."***

***Key points to be elicited concerning observations prior to the stop command (allow participant to refer to notes):***

- Weather/Traffic conditions***
- Fail to stop for stop sign***
- Right turn from left turn lane***
- Wide right turn***
- Driver throws trash at road sign***
- Weaves across lane line***

***Instruct participant to testify first concerning everything observed prior to the stop command and then to everything observed after the stop command.***

***Key points to be elicited concerning observations subsequent to stop command:***

- Slow response to the stop command***
- Drives onto the curb two times prior to stopping***

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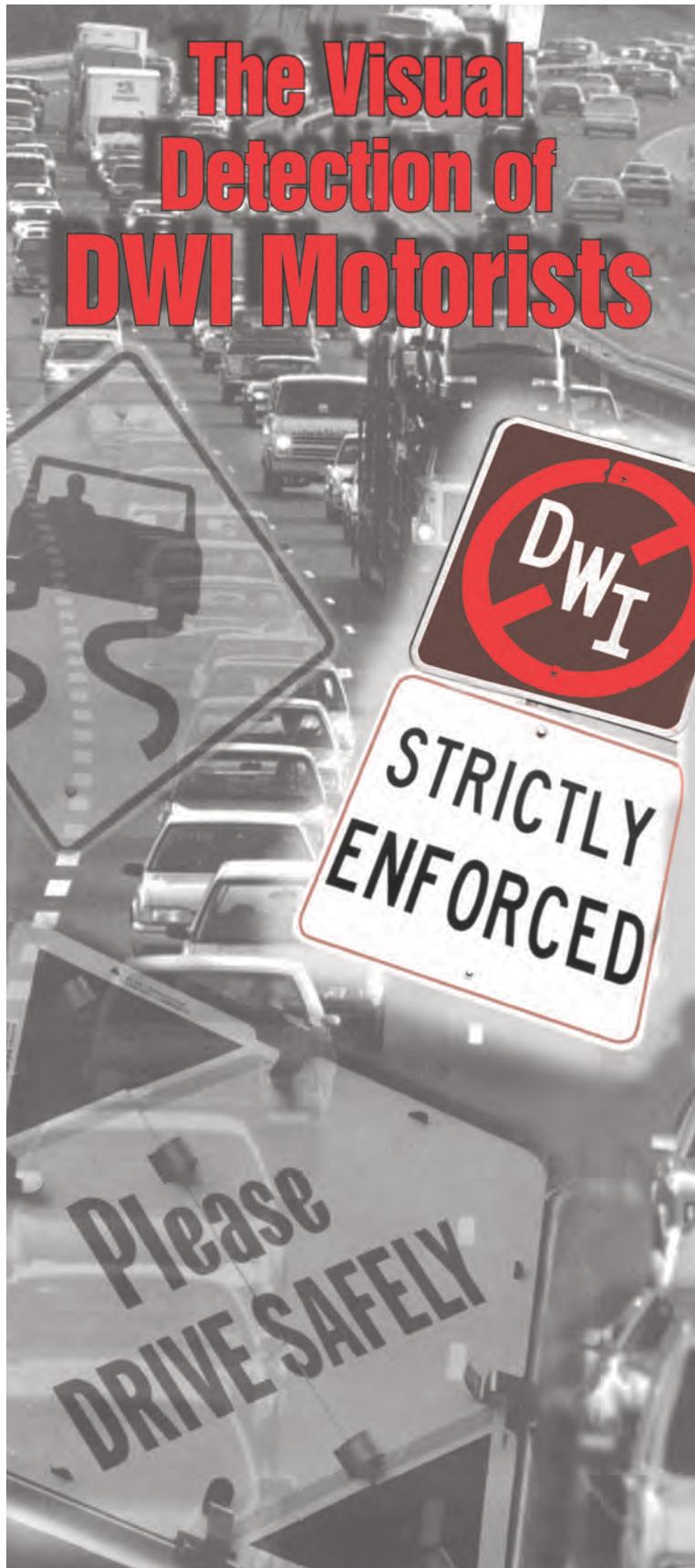
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# The Visual Detection of DWI Motorists



# The Visual Detection of DWI Motorists



U.S. Department of Transportation  
**National Highway Traffic Safety  
Administration**



DOT HS 808 677

## INTRODUCTION

More than a million people have died in traffic crashes in the United States since 1966, the year of the National Traffic and Motor Vehicle Safety Act, which led to the creation of the National Highway Traffic Safety Administration (NHTSA).

During the late 1960's and early 1970's more than 50,000 people lost their lives each year on our nation's streets, roads and highways. Traffic safety has improved considerably since that time: the annual death toll has declined substantially, even though the numbers of drivers, vehicles, and miles driven all have increased. When miles traveled are considered, the likelihood of being killed in traffic during the 1960's was three to four times what it is today.

The proportion of all crashes in which alcohol is involved also has declined. The declines in crash risk and the numbers of alcohol-involved crashes are attributable to several factors, including the effectiveness of public information and education programs, traffic safety legislation, a general aging of the population, and law enforcement efforts.

NHTSA research contributed to the improved condition, in part, by providing law enforcement officers with useful and scientifically valid information concerning the behaviors that are most predictive of impairment. Continued enforcement of Driving While Intoxicated (DWI) laws will be a key to saving lives in the future. For this reason, NHTSA sponsored research leading to the development of a new DWI detection guide and training materials, including a new training video. Many things have changed since 1979, but like the original training materials, the new detection guide describes a set of behaviors that can be used by officers to detect motorists who are likely to be driving while impaired.

Building upon the previous NHTSA study, researchers interviewed officers from across the United States and developed a list of more than 100 driving cues that have been found to predict blood alcohol concentrations (BAC) of 0.08 percent or greater. The list was reduced to 24 cues during 3 field studies involving hundreds of officers and more than 12,000 enforcement stops. The driving behaviors identified by the officers are presented in the following four categories:

- 1) Problems in maintaining proper lane position**
- 2) Speed and braking problems**
- 3) Vigilance problems**
- 4) Judgment problems**

The cues presented in these categories predict that a driver is DWI at least 35 percent of the time. For example, if you observe a driver to be weaving or weaving across lane lines, the probability of DWI is more than .50 or 50 percent. However, if you observe either of the weaving cues and any other cue listed in this booklet, the probability of DWI jumps to at least .65 or 65 percent. Observing any two cues other than weaving indicates a probability of DWI of at least 50 percent. Some cues, such as swerving, accelerating for no reason, and driving on other than the designated roadway, have single-cue probabilities greater than 70 percent. Generally, the probability of DWI increases substantially when a driver exhibits more than one of the cues.

This booklet contains:

- **The DWI Detection Guide**
- **A summary of the research that led to the guide**
- **Explanations of the 24 driving cues**
- **A description of post-stop cues that are predictive of DWI**

The research suggests that these training materials will be helpful to officers in:

- **Detecting impaired motorists**
- **Articulating observed behaviors on arrest reports**
- **Supporting officers' expert testimony**

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## DWI DETECTION GUIDE

Weaving plus any other cue:  $p =$  at least .65

Any two cues:  $p =$  at least .50

### Problems Maintaining Proper Lane Position $p = .50-.75$

- Weaving
- Weaving across lane lines
- Straddling a lane line
- Swerving
- Turning with a wide radius
- Drifting
- Almost striking a vehicle or other object

### Speed and Braking Problems $p = .45-.70$

- Stopping problems (too far, too short, or too jerky)
- Accelerating or decelerating for no apparent reason
- Varying speed
- Slow speed (10+ mph under limit)

### Vigilance Problems $p = .55-.65$

- Driving in opposing lanes or wrong way on one-way
- Slow response to traffic signals
- Slow or failure to respond to officer's signals
- Stopping in lane for no apparent reason
- Driving without headlights at night
- Failure to signal or signal inconsistent with action

### Judgment Problems $p = .35-.90$

- Following too closely
- Improper or unsafe lane change
- Illegal or improper turn (too fast, jerky, sharp, etc.)
- Driving on other than the designated roadway
- Stopping inappropriately in response to officer
- Inappropriate or unusual behavior (throwing, arguing, etc.)
- Appearing to be impaired

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### Post Stop Cues $p \geq .85$

- Difficulty with motor vehicle controls
- Difficulty exiting the vehicle
- Fumbling with driver's license or registration
- Repeating questions or comments
- Swaying, unsteady, or balance problems
- Leaning on the vehicle or other object
- Slurred speech
- Slow to respond to officer or officer must repeat
- Providing incorrect information, changes answers
- Odor of alcoholic beverage from the driver

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$p \geq .50$  when combined with any other cue:

- Driving without headlights at night
- Failure to signal or signal inconsistent with action

The probability of detecting DWI by random traffic enforcement stops at night has been found to be about 3 percent (.03).

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## PROBLEMS IN MAINTAINING PROPER LANE POSITION

Maintaining proper lane position can be a difficult task for an impaired driver. For example, we have all, at one time, seen vehicles **weaving**. Weaving is when the vehicle alternately moves toward one side of the lane and then the other. The pattern of lateral movement can be fairly regular, as one steering correction is closely followed by another. In extreme cases, the vehicle's wheels even **cross the lane lines** before a correction is made. You might even observe a vehicle **straddling a center or lane line**. That is, the vehicle is moving straight ahead with either the right or left tires on the wrong side of the lane line or markers.



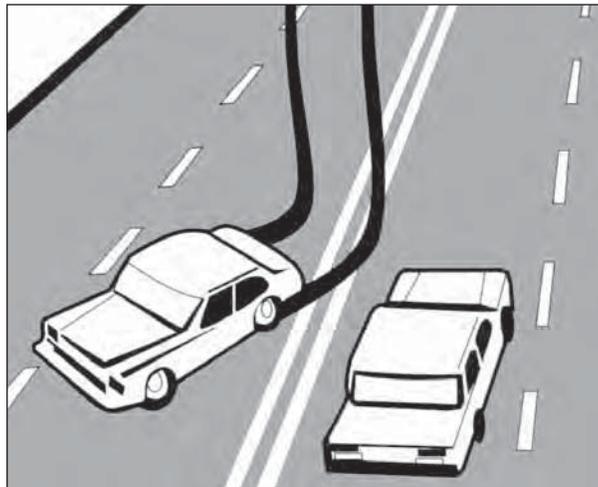
**Weaving**

**Drifting** is when a vehicle is moving in a generally straight line, but at a slight angle to the lane. The driver might correct his or her course as the vehicle approaches a lane line or other boundary or fail to correct until after a boundary has been crossed. In extreme cases, the driver fails to correct in time to avoid a collision.



**Drifting**

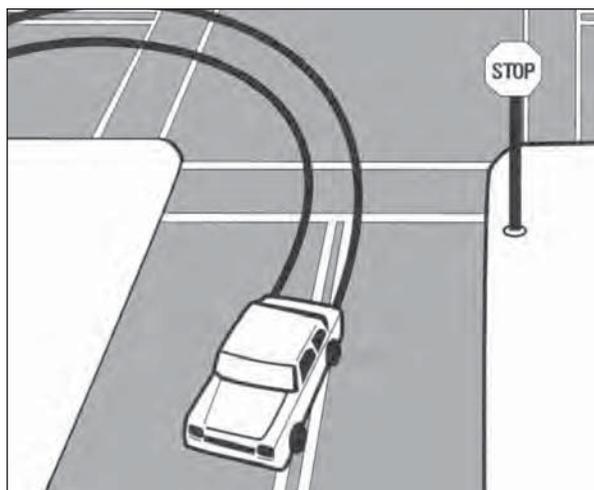
Course corrections can be gradual or abrupt. For example, you might observe a vehicle to **swerve**, making an abrupt turn away from a generally straight course, when a driver realizes that he or she has drifted out of proper lane position or to avoid a previously unnoticed hazard.



**Swerving**

A related DWI cue is **almost striking a vehicle or other object**. You might observe a vehicle, either at slow speeds or moving with traffic, to pass unusually close to a sign, barrier, building, or other object. This cue also includes almost striking another vehicle, either moving or parked, and causing another vehicle to maneuver to avoid a collision.

**Turning with a wide radius or drifting during a curve** is the final cue in this category of driver behaviors. A vehicle appears to drift to the outside of the lane or into another lane through the curve or while turning a corner. Watch for this cue, and stop the driver when you see it. Many alcohol-involved crashes are caused by an expanding turn radius or drifting out of lane position during a curve.

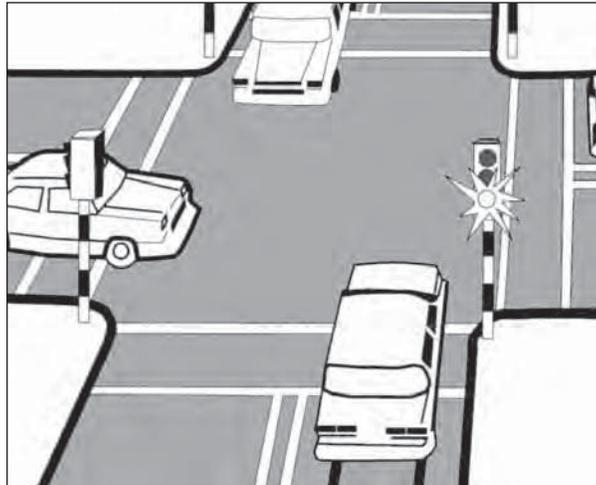


**Turning With a Wide Radius**

## SPEED AND BRAKING PROBLEMS

The research showed that braking properly can be a difficult task for an impaired driver. For example, there is a good chance the driver is DWI if you observe any type of **stopping problem**. Stopping problems include:

- **Stopping too far from a curb or at an inappropriate angle**
- **Stopping too short or beyond a limit line**
- **Jerky or abrupt stops**



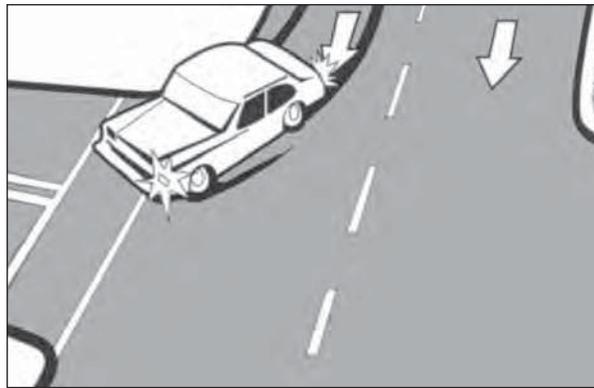
**Stopping Beyond a Limit Line**

Impaired drivers also can experience difficulty maintaining an appropriate speed. There is a good chance the driver is DWI if you observe a vehicle to:

- **Accelerate or decelerate rapidly for no apparent reason**
- **Vary its speed, alternating between speeding up and slowing down**
- **Be driven at a speed that is 10 miles per hour (mph) or more under the limit**

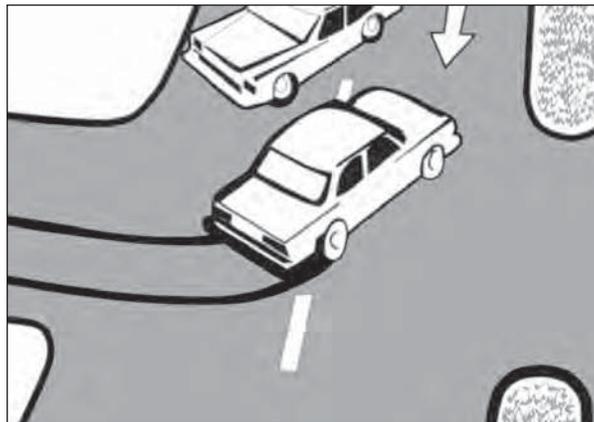
## VIGILANCE PROBLEMS

Vigilance concerns a person's ability to pay attention to a task or notice changes in surroundings. A driver whose vigilance has been impaired by alcohol might forget to turn on his or her headlights when required. Similarly, impaired drivers often forget to signal a turn or lane change, or their signal is inconsistent with their maneuver, for example, signaling left but turning right.



**Signaling Inconsistent With Driving Actions**

Alcohol-impaired vigilance also results in motorists driving into opposing or crossing traffic and turning in front of oncoming vehicles with insufficient headway.



**Driving Into Opposing or Crossing Traffic**

Driving is a complex task that requires accurate information about surrounding traffic conditions. Failing to yield the right of way and driving the wrong way on a one way street are dangerous examples of vigilance problems.

A driver whose vigilance has been impaired by alcohol also might respond more slowly than normal to a change in a traffic signal. For example, the vehicle might remain stopped for an unusually long period of time after the signal has turned green. Similarly, an impaired driver might be unusually slow to respond to an officer's lights, siren, or hand signals.

The most extreme DWI cue in the category of vigilance problems is to find a vehicle stopped in a lane for no apparent reason. Sometimes when you observe this behavior the driver will be just lost or confused, but more than half of the time the driver will be DWI—maybe even asleep at the wheel.

#### JUDGMENT PROBLEMS

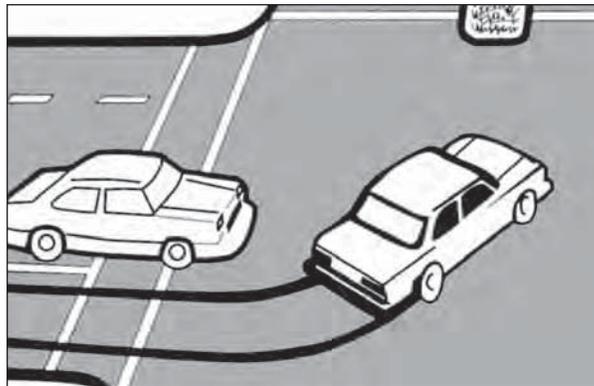
Operating a motor vehicle requires continuous decision making by the driver. Unfortunately, judgment abilities can be affected by even small amounts of alcohol. For example, alcohol-impaired judgment can cause a driver to follow another vehicle too closely, providing an unsafe stopping distance.

Alcohol-impaired judgment also can result in a driver taking risks or endangering others. If you observe a vehicle to make improper or unsafe lane changes, either frequently or abruptly or with apparent disregard for other vehicles, there is a good chance the driver's judgment has been impaired by alcohol.

Similarly, impaired judgment can cause a driver to turn improperly. For example, misjudgments about speed and the roadway can cause a driver

to take a turn too fast or to make sudden corrections during the maneuver. These corrections can appear to the observer as jerky or sharp vehicle movements during the turn.

Alcohol-impaired judgment can affect the full range of driver behaviors. For example, the research found that impaired drivers are less inhibited about making illegal turns than unimpaired drivers.

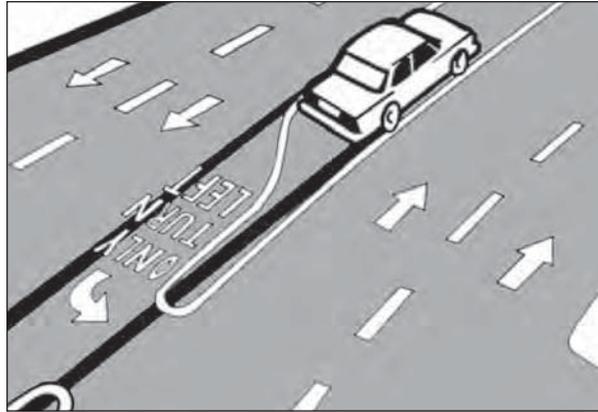


**Turning Illegally**

Driving on other than the designated roadway is another cue exhibited by alcohol-impaired drivers. Examples include driving at the edge of the roadway, on the shoulder, off the roadway entirely, and straight through turn-only lanes.

In some cases, impaired drivers stop inappropriately in response to an officer, either abruptly as if they had been startled or in an illegal or dangerous manner.

In fact, the research has shown that there is a good chance a driver is DWI if you observe the person exhibit *any inappropriate or unusual behavior*. Unusual behavior includes throwing something from the vehicle, drinking in the vehicle, urinating at the roadside, arguing with another motorist, or otherwise being disorderly. If you observe inappropriate or unusual behavior, there is a good probability that the driver is DWI.



**Driving on Other Than the Designated Roadway**

The final cue is actually one or more of a set of indicators related to the personal behavior or appearance of a driver. These indicators include, gripping the steering wheel tightly, driving with one's face close to the windshield, slouching in the seat, and staring straight ahead with eyes fixed. Some officers routinely scrutinize the faces of drivers in oncoming traffic, looking for the indicators of impairment. If you observe a driver who **appears to be impaired**, the research showed that there is an excellent probability that you are correct in your judgment.



**Appearing To Be Impaired**

## SUMMARY

To summarize, the DWI cues related to **problems in maintaining proper lane position** include:

- **Weaving**
- **Weaving across lane lines**
- **Straddling a lane line**
- **Drifting**
- **Swerving**
- **Almost striking a vehicle or other object**
- **Turning with a wide radius or drifting during a curve**

The DWI cues related to **speed and braking problems** include:

- **Stopping problems (too far, too short, too jerky)**
- **Accelerating for no reason**
- **Varying speed**
- **Slow speed**

The DWI cues related to **vigilance problems** include:

- **Driving without headlights at night**
- **Failure to signal a turn or lane change or signaling inconsistently with actions**
- **Driving in opposing lanes or the wrong way on a one-way street**
- **Slow response to traffic signals**
- **Slow or failure to respond to officer's signals**
- **Stopping in the lane for no apparent reason**

The DWI cues related to **judgment problems** include:

- **Following too closely**
- **Improper or unsafe lane change**
- **Illegal or improper turn (too fast, jerky, sharp, etc.)**
- **Driving on other than the designated roadway**
- **Stopping inappropriately in response to an officer**
- **Inappropriate or unusual behavior**
- **Appearing to be impaired**

## POST-STOP CUES

In addition to the driving cues, the following post-stop cues have been found to be excellent predictors of DWI.

- **Difficulty with motor vehicle controls**
- **Difficulty exiting the vehicle**
- **Fumbling with driver's license or registration**
- **Repeating questions or comments**
- **Swaying, unsteady, or balance problems**
- **Leaning on the vehicle or other object**
- **Slurred speech**
- **Slow to respond to officer or officer must repeat questions**
- **Providing incorrect information or changes answers**
- **Odor of alcoholic beverage from the driver**

DOT HS 808 677  
March 2010

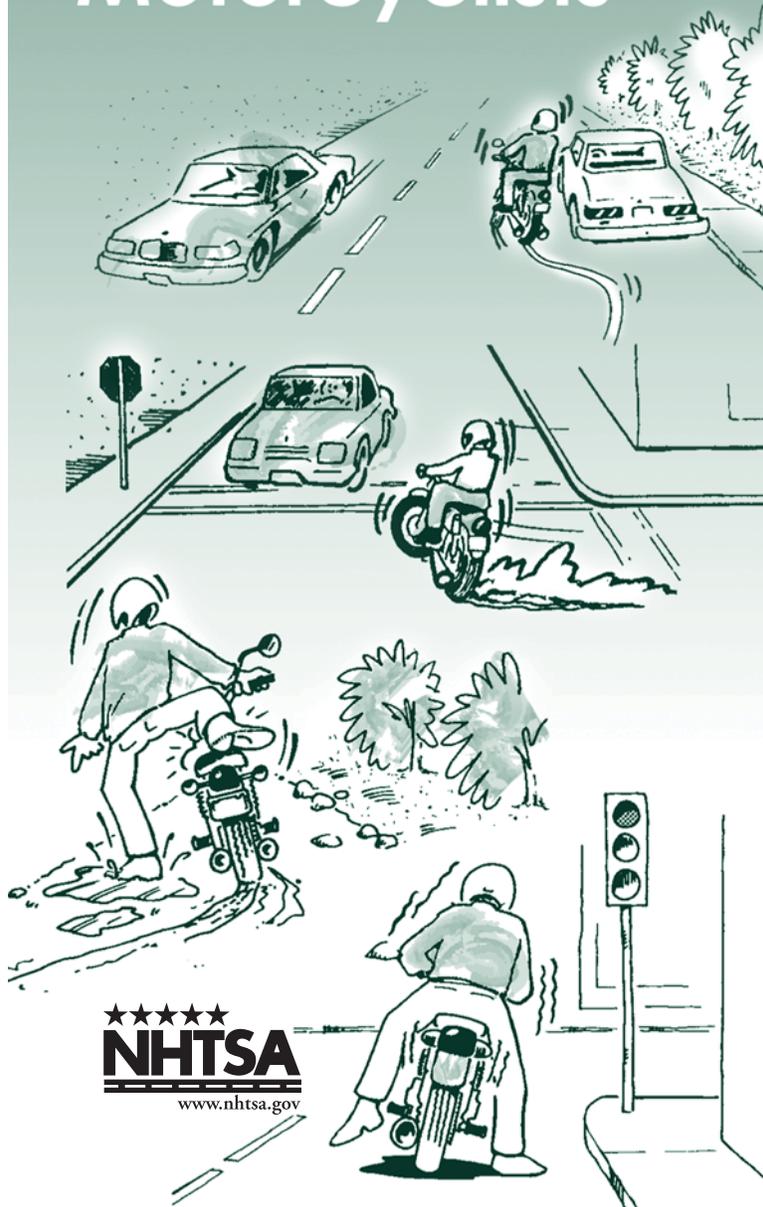


U.S. Department of Transportation  
**National Highway Traffic Safety  
Administration**



National Highway Traffic Safety Administration

# The Detection of DWI Motorcyclists



★★★★★  
**NHTSA**  
[www.nhtsa.gov](http://www.nhtsa.gov)

## Motorcycle DWI Detection Guide

NHTSA has found that the following cues predicted impaired motorcycle operation.

### 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
- Wrong way

## The Detection of DWI Motorcyclists

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### Introduction

The National Highway Traffic Safety Administration (NHTSA) estimated that in 2011, about 29 percent of motorcycle operators involved in fatal crashes had a blood alcohol concentration (BAC) of .08 grams per deciliter (g/dL) or higher.

Clearly, enforcing impaired driving laws is a key to reducing the number of alcohol-related motorcyclist fatalities. *But which cues should be used to detect impaired motorcyclists?*

NHTSA sponsored research to develop a set of behavioral cues to be used by law enforcement personnel to detect motorcyclists who are operating their vehicles while intoxicated. The researchers began by interviewing experienced patrol officers from across the country to determine what behavioral cues have been used to detect impaired motorcyclists. A few, primarily motorcycle officers, suggested cues that reflected considerable understanding of the mental and physical requirements of riding a motorcycle. Others believed the cues to be identical to those used to detect impaired drivers. But some officers, even those with many years of experience, reported they believe there are no cues that can be used to distinguish DWI from unimpaired motorcycle operation.

In addition to interviewing law enforcement personnel, the research team developed a database of 1,000 motorcycle DWI arrest reports. The research team focused on officers' narratives and motorcyclists' behaviors that motivated the stops, and correlated those behaviors with BAC. Analysis of the interviews and arrest report data resulted in an inventory of about 100 cues that have been observed by officers in relation to impaired operation of motorcycles.

The researchers, working closely with law enforcement personnel, conducted two major field studies involving more than 50 sites throughout the United

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States. Officers recorded information about every enforcement stop they made of a motorcyclist. Those field studies permitted the researchers to identify the most effective cues and to calculate the probabilities those cues were predictive of DWI. This brochure highlights the results of that research.

Fourteen cues were identified that best discriminate between DWI and unimpaired motorcycle operation. These cues have been labeled as “Excellent Cues” and “Good Cues,” based on the study’s results. The *excellent* cues predicted impaired motorcycle operation at least 50 percent of the time. The *good* cues predicted impaired motorcycle operation 30 to 49 percent of the time. The special coordination and balance requirements of riding a two-wheeled vehicle provided most of the behaviors in the “Excellent” category of cues.

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## Important Information

Law enforcement officers across the United States have used the cues described in this brochure to help detect impaired motorcycle operators. The cues can be used at any hour of the day and night, and they apply to all two-wheeled motor vehicles.

The cues described and illustrated in this brochure (and on a training video) are the behaviors that are most likely to discriminate between impaired and normal operation of a motorcycle. Cases that involve speeding, however, require additional clarification. Motorcyclists stopped for excessive speed are likely to be driving while intoxicated only about 10 percent of the time (i.e., 10 times out of 100 stops for speeding). But because motorcyclists tend to travel in excess of posted speed limits, speeding is associated with a large portion of all motorcycle DWI arrests. In other words, while only a small proportion of speeding motorcyclists are likely to be considered DWI, the large number of motorcyclists who are speeding results in a large number of DWIs, despite the relatively small probability.

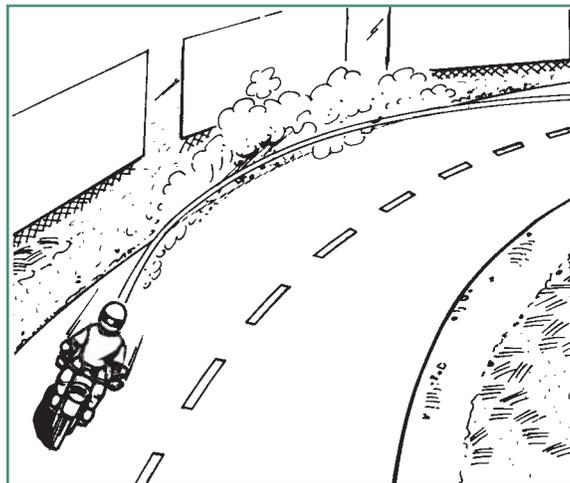
This research will be helpful to officers in:

- Detecting impaired motorcyclists
- Articulating observed behaviors on arrest reports
- Supporting officer's expert testimony

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## Drifting During Turn or Curve

Earlier studies have shown that the most common cause of single-vehicle, fatal motorcycle crashes is the failure to negotiate curves, with the motorcycle continuing in a straight line until it strikes a stationary object. This type of crash is usually caused by alcohol-impaired balance and coordination. In less extreme cases, the motorcycle's turn radius expands during the maneuver. The motorcycle appears to drift outside of the lane or into another lane, through the curve, or while turning a corner. If you see a motorcycle drifting during a turn or curve, do the rider a favor and pull him or her over – our study showed there is a better than average possibility that the motorcyclist is a DWI offender.

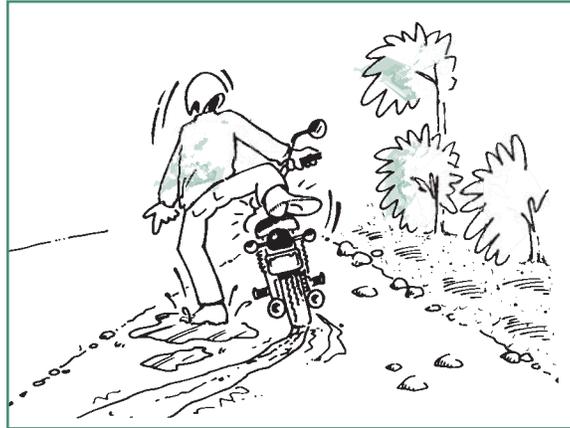


## Trouble With Dismount

Parking and dismounting a motorcycle can be a useful field sobriety test. The motorcyclist must turn off the engine and locate and deploy the kickstand. The operator must then balance his or her weight on one foot while swinging the other foot over the seat to dismount. But first, the

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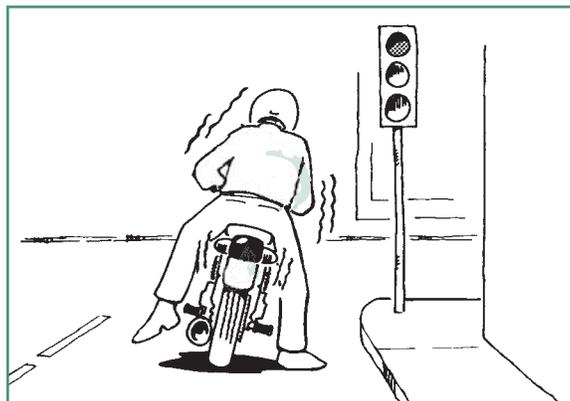
operator must decide upon a safe place to stop the bike. Problems with any step in this sequence can be evidence of alcohol impairment.



Not every motorcyclist you observe experiencing some difficulty with a dismount is riding under the influence, but study results indicated that more than 50 percent of them were DWI offenders. In other words, having a problem dismounting is a reliable cue to DWI.

### Trouble With Balance at Stop

One typical practice for motorcycle riders at a stop is for the motorcyclist to place one foot on the ground to keep the bike upright, while leaving the other foot

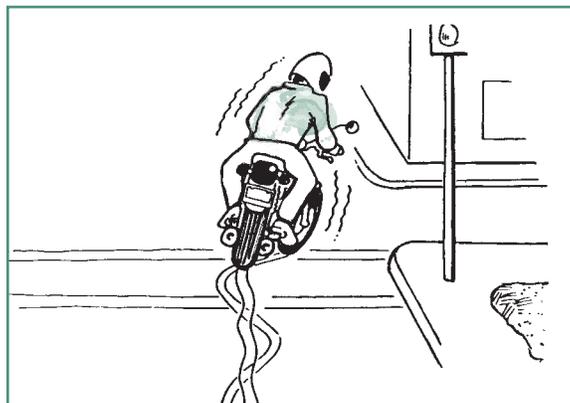


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covering the brake pedal. Some riders favor placing both feet on the ground for stability. Riders whose balance has been impaired by alcohol often have difficulty with these tasks. They might be observed as having shifted their weight from side-to-side, that is, from one foot to another, to maintain balance at a stop. From a block away, an officer might notice a single taillight moving from side to side in a gentle rocking motion. If you observe a motorcyclist having trouble with balance at a stop, there is a better than average chance that the operator is a DWI offender.

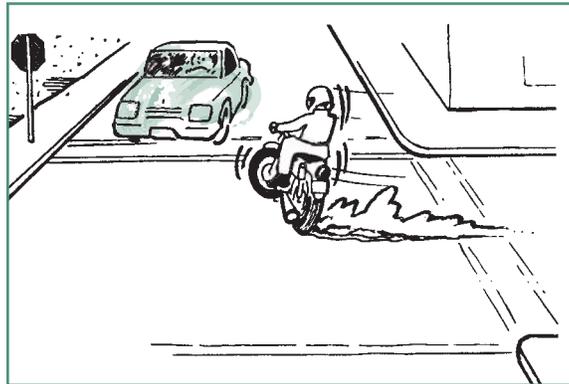
## Turning Problems

The research also identified four turning problems that indicate rider impairment:

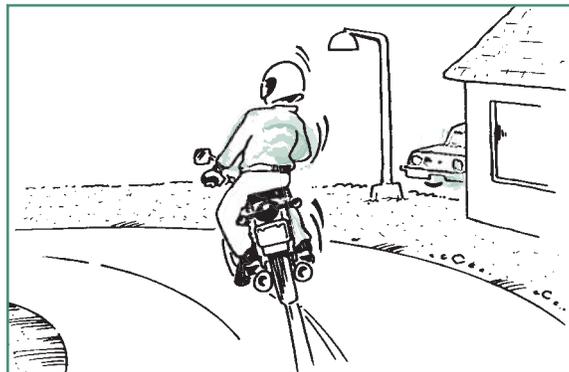


- **Unsteady During Turn or Curve.** The gyroscopic effects of a motorcycle's wheels tend to keep a motorcycle "on track" as long as speed is maintained. As a motorcycle's speed decreases, the demands placed on the operator's balancing capabilities increases. As a result, an officer might observe a motorcycle's front wheels or handlebars wobbling as an impaired rider attempts to maintain balance at slow speeds or during a turn.

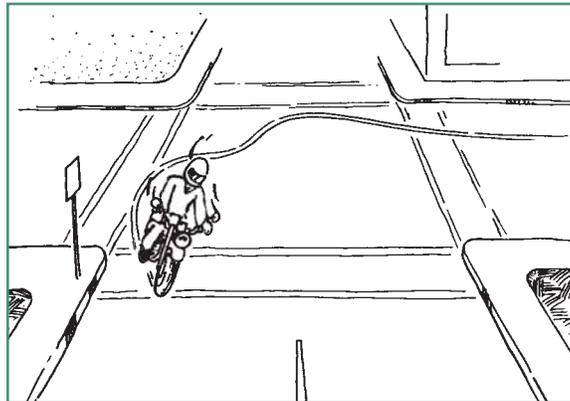
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- **Late Braking During Turn.** The next turning problem is “late braking during a turn or on a curve.” A motorcyclist normally brakes prior to entering a turn or curve, so the motorcycle can accelerate through the maneuver for maximum control. An impaired motorcyclist might misjudge the speed or distance to the corner or curve, requiring an application of the brakes during the maneuver.



- **Improper Lean Angle During Turn.** A third turning problem occurs when a motorcyclist normally negotiates a turn or curve by leaning into the turn. When a rider’s balance or speed decision-making is impaired, the rider frequently attempts to sit upright through the maneuver. As a result, a trained observer can detect an “improper lean angle.”

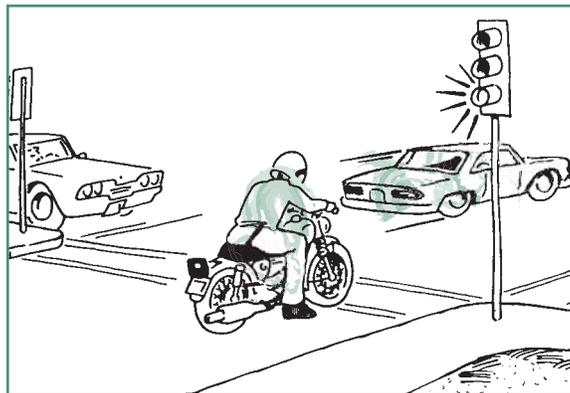


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- **Erratic Movements During Turn.** The fourth turning problem is “erratic movements.” These are defined as an inconsistent action or a sudden correction of a motorcycle maneuver during a turn or curve that can also indicate impaired driving. If you observe a motorcyclist who is unsteady during a turn or curve, brakes late, assumes an improper lean angle, or makes erratic movements during a turn or curve, there is a better-than-average chance that the motorcyclist is driving while impaired.



### Inattentive to Surroundings

Vigilance concerns people’s ability to pay attention to a task or notice changes in their surroundings. A motorcyclist whose vigilance has been impaired by



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alcohol consumption might fail to notice that the traffic light has changed from red to green.

A vigilance problem also is evident when motorcyclists are inattentive to their surroundings or are seemingly unconcerned with detection by law enforcement. For example, there is cause for suspicion of DWI when a motorcyclist fails to periodically scan the area around the bike when in traffic, a wise defensive riding measure to guard against potential encroachment by other vehicles. There is further evidence of impairment if a motorcyclist fails to respond to an officer's emergency lights or hand signals.

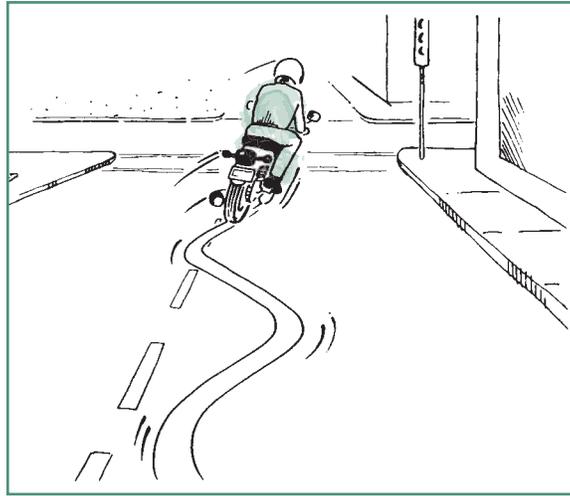
If you observe a motorcyclist to be inattentive to the surroundings, there is a better than average chance that the motorcyclist is a DWI violator.

## Inappropriate or Unusual Behavior

There is a category of cues referred to as "inappropriate or unusual behavior." This category of cues includes behaviors such as operating a motorcycle while holding an object in one hand or under an arm, carrying an open container of alcohol, dropping something from a moving motorcycle, urinating at the roadside, arguing with another motorist, or otherwise being disorderly. If you observe inappropriate or unusual behavior by a motorcyclist, there is a better than average chance that the motorcyclist is a DWI offender.

## Weaving

You are probably familiar with weaving as a predictor of DWI. If you see an automobile weaving there is a better than average chance the driver has exceeded the legal alcohol limits, but if you observe a motorcycle to be weaving, the probability of DWI is



even greater – weaving is an excellent cue. Weaving involves excessive movement within a lane or across lane lines, but does not include movements necessary to avoid road hazards.

### Erratic Movements While Going Straight

If you observe a motorcyclist making erratic movements or sudden corrections while attempting to ride in a straight line, study results indicated there is



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a good probability that the rider is a DWI violator. In fact, during the study erratic movements while going straight were observed 30 to 49 percent of the time in relation to impaired driving.

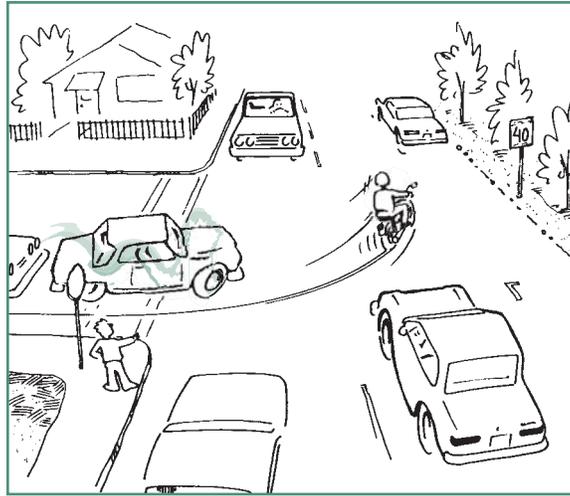
### Operating without Lights at Night

Operating a motorcycle without lights at night is dangerous and can be another indicator of operator impairment. Study results showed that if you detect a motorcyclist riding at night without lights, there is a good chance that the operator is a DWI offender.



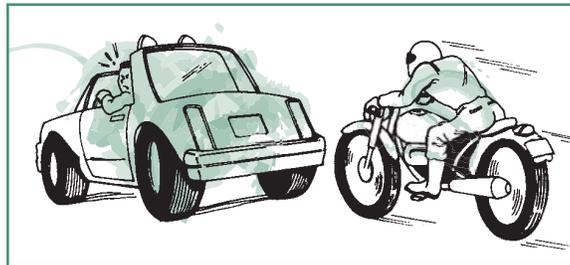
### Recklessness

Motorcyclists tend to ride faster than automobiles so speeding is not necessarily a good predictor of DWI for motorcyclists. On the other hand, recklessness or riding too fast for the conditions was found to be a good indicator of operator impairment.



### Following Too Closely

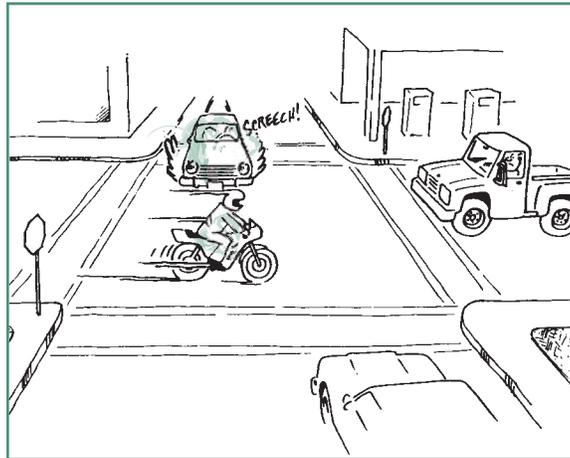
Following too closely, which is an unsafe following distance, is another indication of impaired operator judgment. During the study, this cue was found to be a good predictor of DWI by motorcycle riders.



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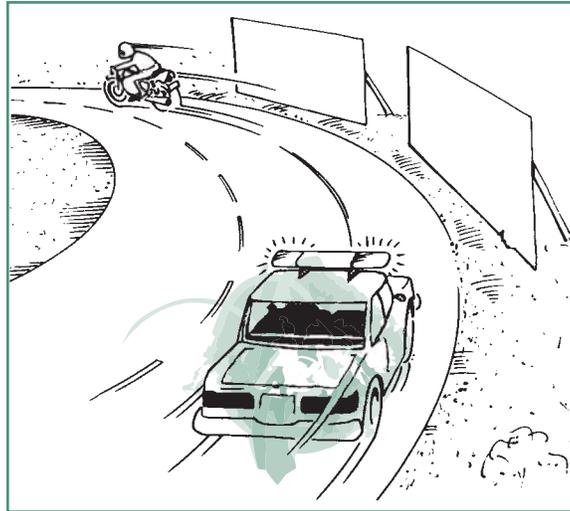
## Running Stop Light or Sign

Failure to stop at a red light or stop sign can indicate either impaired vigilance capabilities (i.e., did not see the stop light or sign), or impaired judgment (i.e., decided not to stop). Whatever the form of impairment, if you observe a motorcyclist running a stop light or sign, there is a good chance that he or she is a DWI offender.



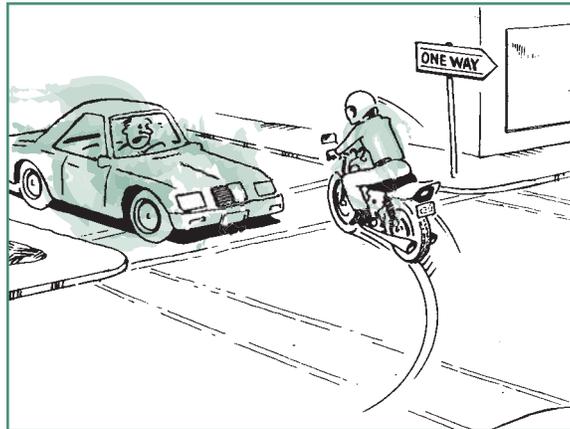
## Evasion

Evasion, or fleeing an officer, is a recurring problem. If a motorcyclist attempts to evade an officer's enforcement stop, study results indicate there is a good chance he is a DWI violator as well.



### Wrong Way

Obviously, riding into opposing traffic is dangerous. Study results showed that when you find a motorcycle going the wrong way in traffic, there is a good chance that the operator is under the influence. This includes going the wrong way on a one-way street, and crossing a center divider line to ride into opposing traffic.



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## Motorcycle DWI Detection Guide

NHTSA has found that the following cues predicted impaired motorcycle operation.

### Excellent Cues (50% or greater probability)

- Drifting during turn or curve
- Trouble with dismount
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### 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
- Wrong way

This brochure and related training materials are based on NHTSA Technical Report DOT HS 807 839, The Detection of DWI Motorcyclists, which is available upon request from NHTSA's Safety Countermeasures Division (NTI-121), 1200 New Jersey Avenue SE., Washington, DC 20590.

DOT HS 807 856  
revised March 2013



U.S. Department  
of Transportation  
**National Highway  
Traffic Safety  
Administration**



9396a-102914-v3

DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Session 6 – Phase Two:  
Personal Contact



February 2018

# Session 6

## Phase Two: Personal Contact



## Learning Objectives

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



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***Briefly review the objectives, content, and activities of this session.***

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

### CONTENT SEGMENTS

- A. Overview: Tasks and Decision
- B. Typical Investigation Clues of the Driver Interview
- C. Recognition and Description of Investigation Clues
- D. Interview/Questioning Techniques
- E. Recognition and Description of Clues Associated with the Exit Sequence

### LEARNING ACTIVITIES

- Instructor-Led Presentations
- Video Presentation
- Instructor-Led Demonstrations
- Participant Presentations

Session 6-Phase Two: Personal Contact

## Phase Two: Personal Contact

Interview and Observation of the Driver

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DWI Detection and Standardized Field Sobriety Testing 6-4

### 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 all drivers stopped on suspicion of DWI be instructed to exit. It is important to note 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.

***Point out block No. 1 on the slide.***

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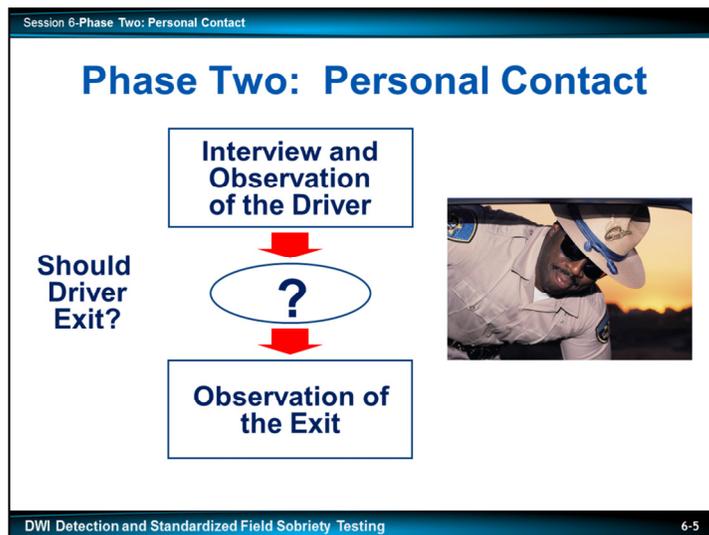
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You may have developed a strong suspicion the driver is impaired prior to the face-to-face observation and interview. You may have developed this suspicion by observing something unusual while the vehicle was in motion or during the stopping sequence. 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.

**Ask participants to suggest situations where this might be the case.**

For example, you may have stopped the vehicle for an equipment/registration violation or where no unusual driving was evident. In some cases, Phase One will have been absent. For example, you may first encounter the driver and vehicle after a crash or when responding to a request for motorist assistance.

Regardless of the evidence that may have come to light during Detection Phase One, your initial face-to-face contact with the driver usually provides the first definite indications the driver is impaired.

### *Decision*

Based upon your face-to-face interview and observation of the driver, and upon your previous observations of the vehicle in motion and the stopping sequence, you must decide whether there is sufficient reason to instruct the driver to step from the vehicle.

For some law enforcement officers, this decision is automatic since their agency's policy dictates the driver always be told to exit the vehicle, regardless of the cause for the stop. Other agencies, however, treat this as a discretionary decision to be based on what the officer sees, hears, and smells during observation and interview with the driver while the driver is seated in the vehicle. If you decide to instruct the driver to exit, closely observe the driver's actions during the exit from the vehicle and note any evidence of impairment.

**Ask participants to suggest circumstances under which it would be appropriate not to instruct the driver to exit. Ask participants to suggest circumstances under which it would be appropriate to instruct the driver to exit.**

**Remind participants they must always practice appropriate officer safety tactics while the driver exits the vehicle.**

# Personal Contact

What do you see?



## B. Typical Investigation Clues of the Driver Interview

Face-to-face observation and interview of the driver allows you to use three senses to gather evidence of alcohol and/or other drug influence:

- The sense of sight
- The sense of hearing
- The sense of smell

**Write "see – hear – smell" on dry erase board.**

### *Sight*

There are a number of things you might see during the interview that would be describable clues or evidence of alcohol and/or other drug influence. Among them are:

**Ask participants to suggest typical things an officer might see during the interview that would be describable clues or evidence of alcohol and/or other drug influence.**

**What do you see?**

- **Bloodshot eyes**
- **Soiled clothing**
- **Fumbling fingers**
- **Alcohol containers**
- **Drugs or drug paraphernalia**
- **Bruises, bumps or scratches**
- **Unusual actions**

**After most major sight clues have been suggested display the next slide.**

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## What Do You Hear?

- Slurred speech
- Admission of drinking
- Inconsistent responses
- Unusual statements
- Abusive language
- Anything else

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*What do you hear?*

- Slurred speech
- Admission of drinking
- Inconsistent responses
- Unusual statements
- Abusive language
- Anything else





## Phase Two: Task One Face to Face Observation and Interview of Suspect

Requires the ability to:

- Recognize the sensory evidence of alcohol and/or other drug influence
- Describe that evidence clearly and convincingly

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Proper face-to-face observation and interview of the driver demands two distinct but related abilities:

- The ability to recognize the sensory evidence of alcohol and/or other drug influence
- The ability to describe that evidence clearly and convincingly

Developing these abilities requires practice.

### **C. Recognition and Description of Investigation Clues**

A basic purpose of the face-to-face observation and interview of the driver is to identify and gather evidence of alcohol and/or other drug influence. This is the purpose of each task in each phase of DWI detection.

During the face-to-face observation and interview stage, it is not necessary to gather sufficient evidence to arrest the driver immediately for DWI.

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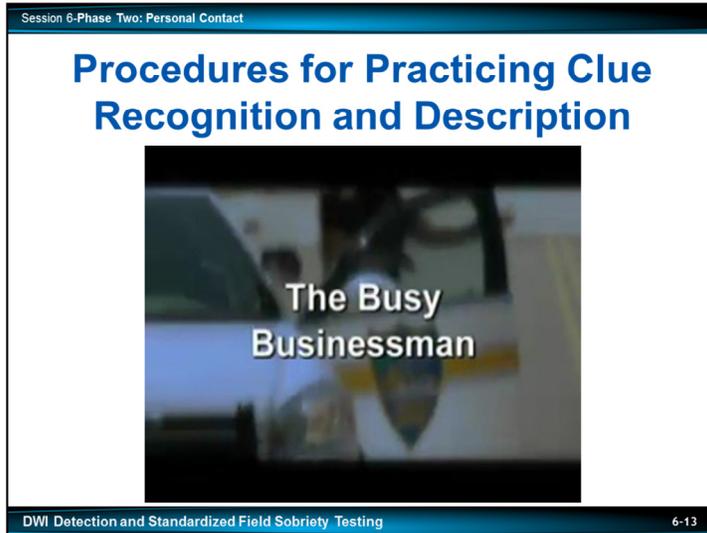
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*Procedures for Practicing Clue Recognition and Description*

***One or more participants will be called upon to "testify" concerning what was seen and heard. Class will constructively critique the testimony.***

***Make sure all participants understand the procedures.***

***The next video segment deals strictly with the face-to-face observation and interview of a driver.***

You will have to base your description of the driver's possible impairment strictly on what you see and hear during the face-to-face contact.

Both senses provide some critically important evidence, not only in this video segment but in all face-to-face contacts.

***Participants can use the standard note taking guide to compile notes during the video.***

***When the video segment ends, participants will be given a few minutes to gather their thoughts and compile notes on what they have seen and heard.***

***Video Segment "The Busy Businessman" (approximately one minute, 10 seconds)***

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## Testimony on *The Busy Businessman*

What was seen?

What was heard?

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*Testimony on Video Segment "The Busy Businessman"*

**Select two participants to come forward together to testify.**

**Key points to be elicited concerning what was seen:**

- **Weather/Traffic conditions**
- **Driver produces wrong document**

**Instruct participants to testify strictly to what was seen. Solicit class comments concerning details or possible improvements to the first participant's testimony.**

**Key points to be elicited concerning what was heard:**

- **Driver does not lower window all the way**
- **Hair is disheveled**
- **Hands wrong document initially**
- **Fails to let go of driver license**
- **Forgets registration, has to be reminded**

**Instruct the second participant to testify strictly to what was heard.**

**Solicit class comments concerning details or possible improvements to the second participant's testimony.**

**Replay video (as appropriate) to compare with second participant's testimony.**

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Session 6-Phase Two: Personal Contact

## Interview/Questioning Techniques

- Two things simultaneously
- Interrupting or distracting questions
- Unusual questions



DWI Detection and Standardized Field Sobriety Testing 6-15

### 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.

***Ask participants to suggest possible evidence of impairment that might be observed during the production of the license and registration.***

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## Questions that Divide Attention

- What day is it?
- Where are you coming from?
- Be alert for the driver who:
  - Ignores question
  - Forgets to resume search
  - Supplies grossly incorrect answer

The second technique would be to ask questions that require the driver to divide attention between searching for the license or registration and answering a new question. While the driver is responding to the request for license, registration, or both, you ask unrelated questions; "What day is it?" or "Where are you coming from?"

Possible evidence of impairment may be disclosed by the actions of the driver after this question has been posed. Be alert for the driver who:

- Ignores the question and concentrates only on the license or registration search
- Forgets to resume the search after answering the question
- Supplies a grossly incorrect answer to the question

**Ask class to suggest possible evidence of impairment that might be disclosed by these types of questions. Continue to probe until all major possibilities have been mentioned.**

**Ask class to suggest other questions that might be put to a driver during the retrieval of the driver's license.**

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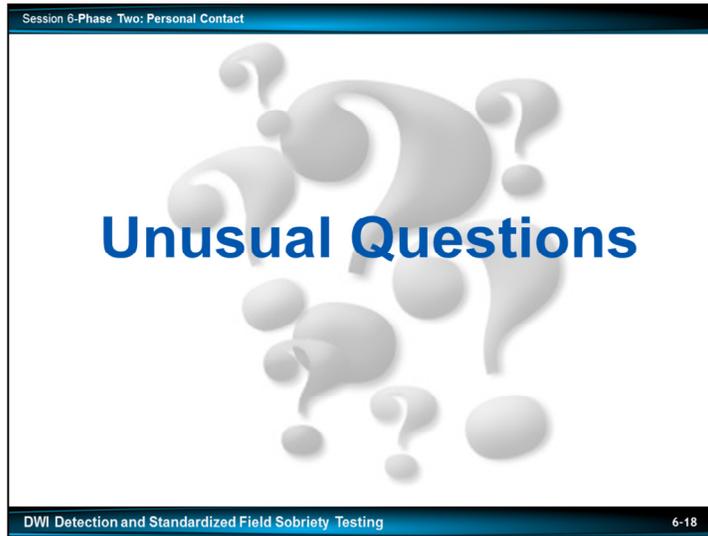
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The third technique, asking unusual questions, is employed after you have obtained the driver's license and registration. Using this technique, you seek verifying information through unusual questions. For example, while holding the driver's license, you might ask the driver, "What is your middle name?" "Where are you going?" "Where are you coming from?" etc.

***Ask class to suggest other unusual questions that might serve as simple, pre-exit techniques.***

There are many such questions which the driver normally would be able to answer easily, but which might prove difficult if the driver is impaired simply because they are unusual questions. Unusual questions require the driver to process information; this can be especially difficult when the driver does not expect to have to process information. For example, a driver may respond to the question about the middle name by giving a first name. In this case the driver ignored the unusual question and responded instead to a usual -- but unasked -- question.

***Asking for two things simultaneously and searching for documents while answering questions assesses the ability to divide attention, while asking unusual questions tests the driver's mental faculties.***

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# The Exit

## What do you see?

- Angry, unusual reaction
- Can't follow instructions
- Can't open door
- Leaves car in gear
- "Climbs" out of car
- Leans against car
- Keeps hand on car



### E. Recognition and Description of Clues Associated With the Exit Sequence

Your decision to instruct the driver to step from the vehicle usually is made after you have developed a suspicion the driver is impaired. Even if that suspicion may be very strong, the driver is usually not under arrest when you give the instruction.

How the driver steps and walks from the vehicle and actions or behavior during the exit sequence may provide important evidence of impairment. Be alert to the driver who:

***Ask participants to suggest typical things that might be seen with an impaired driver during the exit sequence.***

- Shows angry or unusual reactions
- Cannot follow instructions
- Cannot open the door
- Leaves the vehicle in gear
- Climbs out of vehicle
- Leans against vehicle
- Keeps hands on vehicle for balance

***When participants identify items on this list, reveal the bottom portion of the slide.***

Proper face-to-face observation and interview of a driver requires the ability to recognize the sensory evidence of alcohol and/or other drug influence and the ability to describe that evidence clearly and convincingly. Developing these abilities takes practice.

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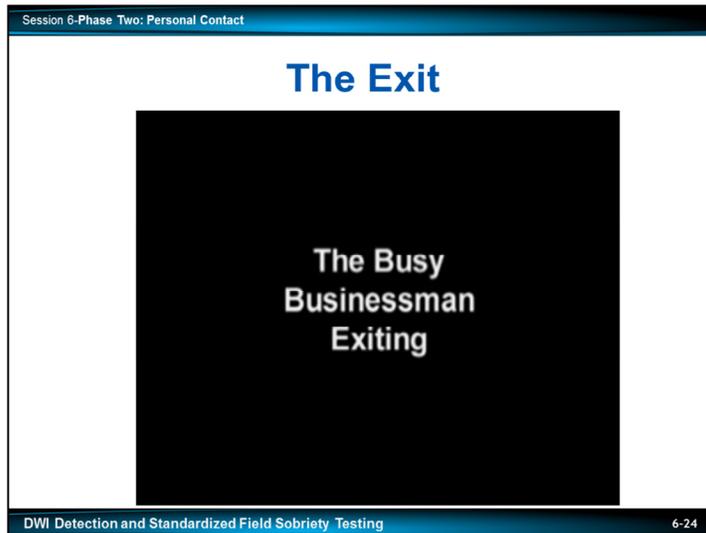
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**Video Segment “The Busy Businessman Exiting” (approximately 1 minute)**

**Show Video “The Busy businessman Exiting”.**

**Testimony on Video Segment “The Busy Businessman Exiting”**

**Select a participant to testify.**

**Key points prior to the exit:**

- **Angry response**

**Solicit class comments concerning testimony**

**Key points during the exit:**

- **Driver says no mechanical problems**
- **Driver admits to looking at papers while driving (distracted driving)**
- **Forgets to remove seatbelt**
- **Uses both hands to exit vehicle (right hand on door, left hand on side of vehicle)**
- **Uses vehicle to steady himself while walking to rear of vehicle**
- **Driver drops wallet**

Remember, you may instruct a driver to exit the vehicle as a means of ensuring your own safety. Safety considerations take precedence over all other considerations.

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# QUESTIONS?

## Test Your Knowledge

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:
  - A.
  - B.
  - C.

### Test Your Knowledge

1. The two major evidence gathering tasks of Phase Two are **1) face-to-face interview of the driver**  
**2) observation of the exit**
2. The major decision of Phase Two is **do I have enough suspicion of DWI to instruct the suspect to exit the vehicle?**
3. Among the describable clues an officer might see during the Phase Two interview are:
  - A. **Bloodshot eyes**
  - B. **Soiled clothing**
  - C. **Fumbling fingers**

**Other acceptable answers: alcohol containers, drugs or drug paraphernalia, bruises, bumps or scratches, unusual actions**

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DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Session 7 – Phase Three:  
Pre-Arrest Screening



February 2018

# Session 7

## Phase Three: Pre-Arrest Screening



## Learning Objectives

- Describe role of psychophysical and preliminary breath tests
  - Define and describe concepts of divided attention and nystagmus
  - Discuss advantages and limitations of preliminary breath testing
  - Discuss arrest decision process
- 

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

- Describe the role of psychophysical and preliminary breath tests
- Define and describe the concepts of divided attention and nystagmus
- Discuss the advantages and limitations of preliminary breath testing
- Discuss the arrest decision process

### CONTENT SEGMENTS

- Overview: Tasks and Decision
- Gaze Nystagmus - Definition
- Horizontal Gaze Nystagmus – Definition, Concepts, Demonstration
- Vertical Gaze Nystagmus – Definition, Concepts, Demonstration
- Divided Attention Tests: Concepts, Examples, Demonstration
- Advantages and Limitations of Preliminary Breath Testing
- The Arrest Decision

### LEARNING ACTIVITIES

- Instructor-Led Presentation
- Instructor-Led Demonstrations
- Video Presentation









Session 7 - Phase Three: Pre-Arrest Screening

## HGN

- **Reliable**
- **Involuntary**
- **Noticeable**
- **As BAC increases, eyes begin to jerk sooner as they move to the side**
- **CNS Depressants, Inhalants, and Dissociative Anesthetics cause HGN**

DWI Detection and Standardized Field Sobriety Testing 7-8

**C. Horizontal Gaze Nystagmus – Definition, Concepts, Demonstration**

HGN is the most reliable field sobriety test. Especially when used in combination with the divided attention tests, it will help law enforcement officers correctly identify subjects who are impaired. Involuntary jerking of the eyes becomes readily noticeable when a person is impaired by alcohol and certain drug categories. As a person's blood alcohol concentration (BAC) increases, the eyes will begin to jerk sooner as they move to the side.

HGN refers to an involuntary jerking occurring as the eyes gaze toward the side. In addition to being involuntary, the person experiencing the nystagmus is usually unaware the jerking is happening. In administering the HGN test, the officer has the subject follow the motion of a small stimulus with the eyes only. The stimulus may be the tip of a pen or penlight, or an eraser on a pencil, whichever contrasts with the background.

In addition to alcohol, drugs such as Central Nervous System (CNS) Depressants, Inhalants, and Dissociative Anesthetics cause HGN.

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Session 7 - Phase Three: Pre-Arrest Screening

## Nystagmus Indications

- **Six maximum clues**
- **Maximum three clues per eye**
- **88% accurate detecting subjects  $\geq 0.08$  BAC**

DWI Detection and Standardized Field Sobriety Testing 7-9

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- 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 BAC 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

Based upon research using SFST-experienced personnel, HGN is 88% accurate at detecting subjects at or above 0.08 BAC.

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**Choose a participant to come forward to serve as a demonstration subject.**

To test for HGN, the subject is instructed to stand with feet together, hands at sides, hold the head still, and follow the motion of a stimulus with the eyes only.

**Ask participant if they have any eye problems or eye abnormalities. If the participant is wearing glasses, have participant remove them.**

The object may be the tip of a pen or penlight or the eraser on a pencil, which contrasts with the background.

**The stimulus should be held approximately 12 - 15 inches (30 - 38 cm) from the subjects' nose.**

Each eye is checked, beginning with the subject's left. A subject's height might restrict ability to clearly see nystagmus. Subject may be placed in sitting position to accommodate a better view.

**Demonstrate the administration of the HGN test using a participant.**

Two or more "passes" are made before each eye to look for each of the clues of nystagmus.

**Allow participant to return to seat.**

**Show HGN Video (approximately two minutes)**

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## Divided Attention

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



### 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 a person needs to drive safely. A good, structured field sobriety test is simple and divides the subject's attention. Examples of divided attention tests include Walk and Turn (WAT) and One Leg Stand (OLS).

***Remind participants of the many tasks subjects must perform in order to operate a vehicle safely.***

Session 7 - Phase Three: Pre-Arrest Screening

## Typical Simultaneous Capabilities Required for Driving

- Information processing
- Short-term memory
- Judgment/decision making
- Balance
- Steady, sure reactions
- Clear vision
- Small muscle control
- Coordination of limbs

DWI Detection and Standardized Field Sobriety Testing 7-14

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Typical simultaneous capabilities required for driving:

- Information processing
- Short-term memory
- Judgment and decision making
- Balance
- Steady, sure reactions
- Clear vision
- Small muscle control
- Coordination of limbs

***Briefly give examples/indications of how these capabilities relate to driving.***

Any test that requires a person to demonstrate two or more of these capabilities simultaneously is potentially a good psychophysical test.

***Some of the best psychophysical tests are those that exercise the same mental and physical capabilities a person needs to drive safely.***

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Session 7 - Phase Three: Pre-Arrest Screening

## WAT

- Validated by NHTSA
- 79% accurate detecting 0.08 BAC
- Do NOT deviate from SFST instructions
- Two stages:
  - Instruction Stage
  - Walking Stage

DWI Detection and Standardized Field Sobriety Testing 7-17

*Walk and Turn*

WAT is a test that has been validated through extensive research sponsored by the National Highway Traffic Safety Administration (NHTSA).

Based upon research using SFST-experienced personnel, WAT is 79% accurate at detecting subjects at or above 0.08 BAC.

***Officers should be reminded of the rigid standards the scientific community must follow in order to validate laboratory research (i.e., the development of psychophysical test for DWI detection) and the differences between validated testing and standardized testing. Officers administering SFSTs at roadside are expected: 1) to be reasonable and prudent in their decision to test; and 2) not to deviate from the SFST administrative instructions described later in this course.***

WAT is a divided attention test consisting of two stages:

- Instruction stage
- Walking stage

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Session 7 - Phase Three: Pre-Arrest Screening

## OLS Test Clues

1. Sways while balancing
2. Uses arms to balance
3. Hopping
4. Puts foot down

DWI Detection and Standardized Field Sobriety Testing 7-26

OLS is also administered and interpreted in a standardized manner. Officers carefully observe the subject's performance and look for four specific clues:

1. Sways while balancing
2. Uses arms to balance
3. Hopping
4. Puts foot down

Inability to complete the OLS test occurs when the subject is in danger of falling or otherwise cannot complete the test.

***If time permits, explain and demonstrate other divided attention tests that may be used by participants' respective departments.***

***Other examples of simple divided attention tests. Typical tests:***

- ***Finger-to-Nose(FTN)***
- ***Modified Romberg Balance (MRB) Test***

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Session 7 - Phase Three: Pre-Arrest Screening

## PBT

- Stage in pre-arrest screening
- Demonstrate association of alcohol with observable evidence
- Impairment established through sensory evidence
- Does not indicate level of impairment

DWI Detection and Standardized Field Sobriety Testing 7-27

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### F. Advantages and Limitations of Preliminary Breath Testing

Preliminary breath testing (PBT), like psychophysical testing, is a stage in the pre-arrest screening of a DWI subject. Usually the subject is not yet under arrest when requested to submit to the PBT.

The basic purpose of PBT is to demonstrate the association of alcohol with the observable evidence of the subject's impairment. The subject's impairment is established through sensory evidence: what the officer sees, hears, and smells.

The PBT provides the evidence that alcohol is the chemical basis of impairment by yielding an on-the-spot indication of the subject's BAC. The PBT provides direct indication of the BAC level. **It does not indicate the level of the subject's impairment.** Impairment varies widely among individuals with the same BAC level.

***The subject's impairment is established through what the officer sees, hears, and smells.***

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Session 7 - Phase Three: Pre-Arrest Screening

## PBT Advantages

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

DWI Detection and Standardized Field Sobriety Testing 7-29

*PBT Advantages*

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

- Corroborate other evidence by demonstrating 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 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 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 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

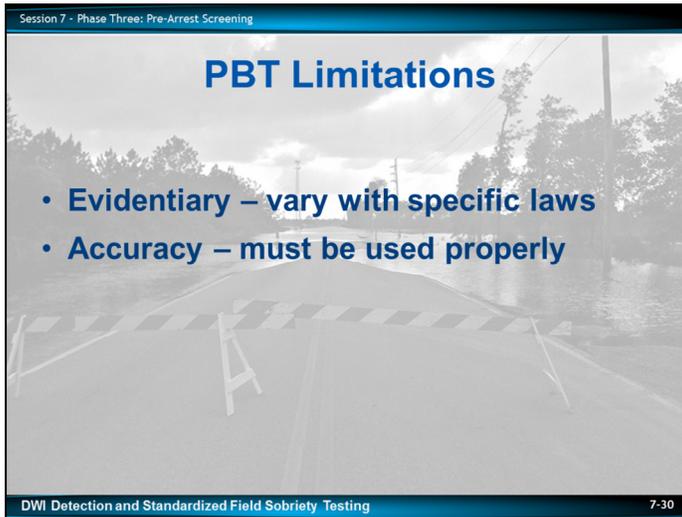
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*PBT Limitations*

***The potential 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 statute and your local State's or district attorney to clarify this point for your participants.***

***Explain the specific circumstances under which PBT results may and may not be admissible as evidence in your State. Explain the weight or probative value of PBT evidence, when admissible.***

PBT may have both evidentiary limitations and accuracy limitations. Evidentiary limitations vary with specific laws. In some States, PBT results are admissible as evidence; in other States they are not admissible. Where the results are admissible, there may be differences in the weight or value they are given. Consult your State PBT law, your supervisor, or your local prosecutor, as necessary, for clarification.

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

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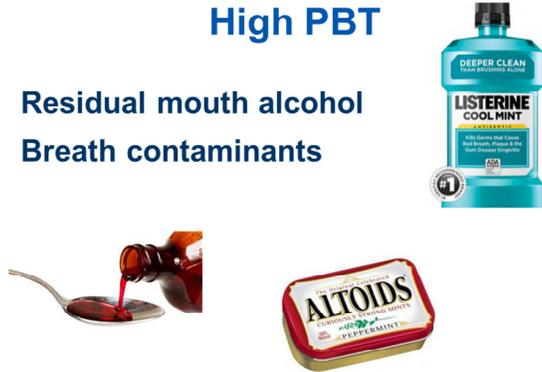
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Session 7 - Phase Three: Pre-Arrest Screening

## Possible Factors Affecting High PBT

- Residual mouth alcohol
- Breath contaminants



DWI Detection and Standardized Field Sobriety Testing 7-31

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 leftover 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 PBTs 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.

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### **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
- PBTs

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 a DWI offense has been committed, you should arrest the subject.

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DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Session 8 – Concepts and Principles of the  
Standardized Field Sobriety Tests (SFSTs)



February 2018

## Session 8

### Concepts and Principles of the Standardized Field Sobriety Tests (SFSTs)



## Learning Objectives

- Discuss development and validity of research and standardized elements, clues, and interpretation of the three SFSTs
- Discuss different types of nystagmus and their effects on HGN test



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***Briefly review the objectives, content and activities of this session.***

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 (SFSTs)
- Discuss the different types of nystagmus and their effects on the Horizontal Gaze Nystagmus (HGN) test

## Learning Objectives

- Discuss and properly administer the three SFSTs
  - Discuss and properly recognize clues of the three SFSTs
  - Describe and properly record results of the three SFSTs on standard note-taking guide
  - Identify limitations of the three SFSTs
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- Discuss and properly administer the three SFSTs
  - Discuss and properly recognize the clues of the three SFSTs
  - Describe in a clear and convincing manner and properly record the results of the SFSTs on a standard note-taking guide
  - Identify the limitations of the three SFSTs

### CONTENT SEGMENTS

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

### LEARNING ACTIVITIES

- Instructor-Led Demonstration
- Participant Practice Session
- Demonstration



## Original Research Objectives

- Evaluate currently-used physical coordination tests
- Develop more sensitive tests
- Standardize tests

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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

***Point out to participants the National Highway Traffic Safety Administration (NHTSA) contracted with the Southern California Research Institute (SCRI) in 1975 to develop these field tests. SCRI published the following three reports:***

***California: 1977 (Lab)***

***California: 1981 (Lab and Field)***

***Maryland, District of Columbia, Virginia, North Carolina, 1983 (Field)***

Beginning in late 1975, extensive scientific research studies were sponsored by the National Highway Traffic Safety Administration (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)
- 
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## Volunteers Were Subjected to Six Tests

- One Leg Stand
- Finger-to-Nose
- Finger Count
- Walk and Turn
- Tracing
- Nystagmus



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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 (OLS)
2. Finger-to-Nose (FTN)
3. Finger Count
4. Walk and Turn (WAT)
5. Tracing (a paper and pencil exercise)
6. Nystagmus (called alcohol gaze nystagmus in final report)

Laboratory research indicated three of these tests, when administered in a standardized manner, were highly accurate and reliable tests for distinguishing blood alcohol concentrations (BACs) at or above 0.10; HGN, WAT, and OLS.

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

***Emphasize other field sobriety tests (including FTN, Finger Count, Tracing, etc.) can be effectively used to assess impairment.***

While many field sobriety tests are valid tests, the SFSTs have been validated through numerous research studies.

***Explain the difference between valid and validated.***

***VALID - Conforming to accepted principles. Producing accurate and reliable results; effective.***

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











## “Correct” and “Incorrect” Arrest Decisions



For purposes of this study, a correct decision was when the person was above the per se limit and was arrested, or the person was below the per se limit and was released.

The remaining subjects, incorrect arrest decisions, fall into two other categories. Members of the first group were not arrested but tested above the per se limit for BAC. The Colorado Study noted a number (approximately 33%) of these individuals were considered alcohol tolerant and performed well on the SFSTs even though their BACs were above the 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.

For purposes of this study, the subjects who were arrested, but their BAC was below the per se limit, were also considered incorrect arrests. Many States stipulate in their statute a driver is considered DWI if they are either above the per se limit for BAC or have lost the normal use of their mental or physical faculties. Even though these arrests 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.

***Emphasize it is important for the officer who is trained in SFST to prepare themselves to understand and explain these statistics in layman terms in order to effectively articulate them to a jury in a courtroom.***

Each of these studies have shown the SFSTs are scientifically validated and are a reliable method for distinguishing between impaired and unimpaired drivers.

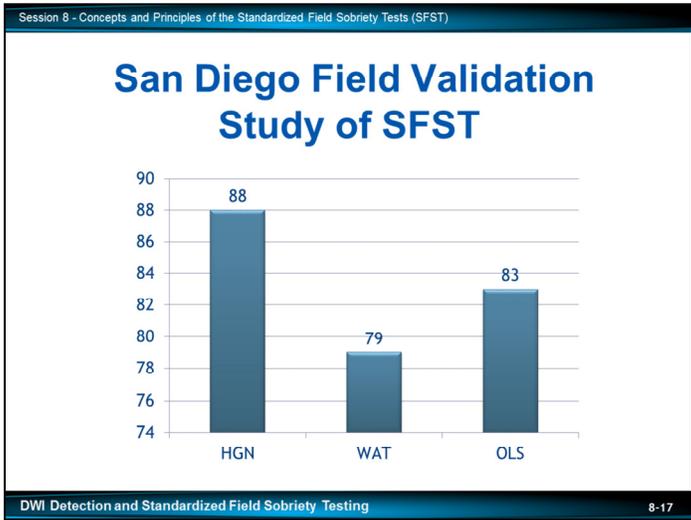
It is important for the officer who is trained in SFST to prepare themselves to understand and explain these statistics in layman terms in order to effectively articulate them to a jury in a courtroom.

Remember, if you do not know the answer to a defense question you can say, "I DON'T KNOW."









- 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-tests to support arrest decisions at above or below 0.08. It strongly suggests the SFSTs also identify BACs at 0.04 and above.

<b>Results: Three SFST 1990's Field Studies</b>	
Study.....	% Correct
Colorado .....	86% Arrest/Release Decisions
Florida .....	95% Arrest Decisions
San Diego .....	91% Arrest Decisions

***These percentages were obtained from experienced SFST personnel. With experience, properly administering and interpreting the SFSTs in a systematic and standardized manner, officers can obtain results similar to the studies mentioned above.***

It is necessary to emphasize this validation applies only when:

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

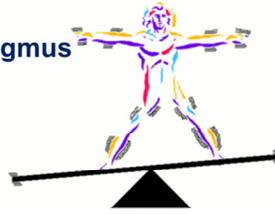
If any one of the SFST elements is changed, the validity may be compromised.





## Vestibular Nystagmus

- Rotational
- Post Rotational
- Caloric
- Positional Alcohol Nystagmus



Vestibular Nystagmus is caused by movement or action to the vestibular system.

***Point out the vestibular system is a sense organ located in the inner ear. It provides information to the brain, and consequently to the eyes, about position and movement of the head to maintain orientation and balance of the body.***

Types of Vestibular Nystagmus:

- Rotational Nystagmus occurs when the person is spun around or rotated rapidly, causing the fluid in the inner ear to be disturbed. If it were possible to observe the eyes of a rotating person, they would be seen to jerk noticeably.
- Post Rotational Nystagmus is closely related to Rotational Nystagmus: when the person stops spinning, the fluid in the inner ear remains disturbed for a period of time and the eyes continue to jerk.

Neither Rotational nor Post Rotational Nystagmus will interfere with the HGN test because of the conditions under which they occur.

***To illustrate rotational and post rotational, swirl a half glass of water several times. Stop swirling glass, water will continue to spin for a short period of time.***

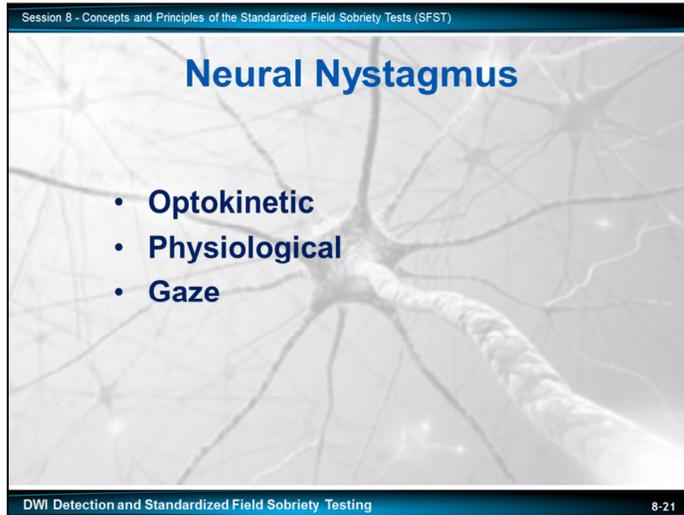
- Caloric Nystagmus occurs when fluid motion in the canals of the vestibular system is stimulated by temperature as by putting warm water in one ear and cold in the other.
- Positional Alcohol Nystagmus (PAN) occurs when a foreign fluid, such as alcohol, that alters the specific gravity of the blood is in unequal concentrations in the blood and the vestibular system. This causes the vestibular system to respond to gravity in certain head positions, resulting in nystagmus.

In the original HGN study, research was not conducted for performing HGN on people lying down. Current research demonstrates HGN can be performed on someone in this position.

***There are two types of PAN:***

***PAN I – occurs when the alcohol concentration in the blood is greater than the inner ear fluid. PAN I occurs while BAC is increasing.***

***PAN II – occurs when the alcohol concentration in the inner ear fluid is greater than in the blood. An example of PAN II is the spinning of a room when a person lies down after consuming alcohol. This occurs while BAC is decreasing.***



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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 HGN test will not be influenced by Optokinetic Nystagmus when administered properly. During the HGN 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.

***Point out during the HGN test, the subject is required to focus the eyes on a penlight, pencil, or similar object that moves smoothly and relatively slowly across the field of view, thus Optokinetic Nystagmus will not occur.***

***When practical, remind participants to face the driver away from potential distractions that could be raised later.***

- 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 SFSTs because it's tremors are usually invisible.

***Emphasize Physiological Nystagmus will have no impact on our SFSTs because its tremors are usually invisible.***

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

- Equal Pupil Size
- Resting Nystagmus
- Equal Tracking



### *Medical Impairment*

The examinations 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 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.

***Demonstrate how to check for Equal Pupil Size, Resting Nystagmus, and Equal Tracking.***

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.

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## HGN Medical Impairment Assessment Procedures

Check eyes for:

- Equal Pupil Size
- Resting Nystagmus
- Equal Tracking



### *Procedures to Assess Possible Medical Impairment*

Prior to administration of HGN, the eyes are checked for Equal Pupil Size, Resting Nystagmus, and Equal Tracking (can they follow an object together). If the eyes do not track together, or if the pupils are noticeably unequal in size, the chance of medical disorders or injuries causing the nystagmus may be present. If the eyes track together, continue with the test and document the results.

Officers are reminded to ask questions about the subject’s eye and general health conditions prior to administering the HGN test. If a subject responds or volunteers information that he or she is blind in one eye or has an artificial eye, and the subject has equal tracking, the officer should make note of the abnormality and proceed with the HGN test. If there are any abnormal findings on the pre-test checks, the officer may choose not to continue with the testing. If HGN testing is continued, officers are reminded this does not follow the standardized protocol and should acknowledge such in any report. If HGN testing is conducted on a person with a blind eye, typical inconsistent findings could be related to the blind eye not being able to see or track the stimulus, or when the normal eye can no longer see the stimulus, e.g., when checking Distinct and Sustained Nystagmus at Maximum Deviation on the blind eye side.

**Source: “Eye Tests on a Suspect with a Blind Eye” Karl Citek, OD, PhD, FAAO, Pacific University College of Optometry, Sept. 2014**

***For most HGN testing, the normal eye can see the stimulus and the movement of either eye should be consistent with what is expected. When the normal eye can no longer see the stimulus, most commonly when assessing Distinct and Sustained Nystagmus at Maximum Deviation on the blind eye side, normal tracking may be disrupted and eye movements not consistent with nystagmus may be observed.***

## HGN Testing: Three Clues

- Lack of Smooth Pursuit
- Distinct and Sustained Nystagmus at Maximum Deviation
- Onset of Nystagmus Prior to 45 Degrees

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### *Procedures of Horizontal Gaze Nystagmus Testing: The Three Clues*

The test you will use at roadside is HGN – 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.

***Inform the participants CNS Depressants, Inhalants, and Dissociative Anesthetics can cause HGN.***

- 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., 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

***Unimpaired people also may exhibit a slight jerking of the eye at maximum deviation, but this will not be evident or sustained for more than a few seconds.***

- 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 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.

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## Administrative Procedures

1. Check for eyeglasses
2. Verbal instructions
3. Position stimulus (12-15 inches and slightly above eye level)
4. Check for Equal Pupil Size and Resting Nystagmus
5. Check for Equal Tracking

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HGN and VGN 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 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

1. Check for eyeglasses
2. Verbal instructions
3. Position stimulus (12-15 inches and slightly above eye level)
4. Check for Equal Pupil Size and Resting Nystagmus
5. Check for Equal Tracking

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## HGN Procedures

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

### *Administrative Procedures for HGN*

It is important to administer the HGN test systematically using the following steps to ensure nothing is overlooked.

There are 10 steps in the systematic administration of the HGN 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.

***Point out eyeglasses may impede the subject's peripheral vision and may also impede the officer's ability to observe the eye carefully.***

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.

***Remind participants nystagmus is not a vision test.***

Step 2: Verbal Instructions

Give the subject the appropriate verbal instructions:

***Point out 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

***Emphasize these are the major points that must be conveyed during the verbal instructions.***

Sep 3: Position the Stimulus

Position the stimulus approximately 12 - 15 inches (30 - 38 cm) in front of subject's nose and slightly above eye level to commence the test.

Resting Nystagmus may be observed at this time. Officers should note whether the subject displays Resting Nystagmus.



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

## HGN Procedures

6. Check for Lack of Smooth Pursuit
7. Check for Distinct and Sustained Nystagmus at Maximum Deviation
8. Check for Onset of Nystagmus Prior to 45 Degrees

DWI Detection and Standardized Field Sobriety Testing 8-35

Step 6: Lack of Smooth Pursuit

Check the left eye for lack of the "Smooth Pursuit" clue. If the eye is observed to jerk while moving, that is one clue.

Check the right eye for lack of the "Smooth Pursuit" clue and compare.

**Remind participants to make at least two complete passes in front of the eyes to check this clue.**

Step 7: Check the right and left eye for the "Distinct and Sustained Nystagmus at Maximum Deviation" clue. If the jerkiness is distinct and sustained, that is one clue.

**Emphasize the jerking must be definite, distinct and sustained in order to score this clue. Remind participants to check each eye at least twice for this clue.**

**Check the right eye for the "Distinct and Sustained Nystagmus at Maximum Deviation" clue and compare.**

**Point out in most cases no white should be showing in the corner of the eye when observing this clue.**

Step 8: Onset of Nystagmus Prior to 45 Degrees

Check the left eye for the "Onset of Nystagmus Prior to 45 Degrees" clue. If the jerking begins prior to 45 degrees, that is one clue.

**Remind participants to check each eye at least twice for this clue. Point out, for many subjects, nystagmus clues will appear in the sequence listed.**

Check the right eye for "Onset of Nystagmus Prior to 45 Degrees" clue and compare.

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

## HGN Procedures

**9. Total the clues**  
**10. Check for Vertical Gaze Nystagmus**

DWI Detection and Standardized Field Sobriety Testing 8-36

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Step 9: Total the clues

Maximum number of clues possible for each eye: 3

Total maximum number of clues possible for both eyes: 6

***Also, point out the subject's performance may not be exactly identical in both eyes. As BAC increases, many people first show inability of smooth pursuit, then show distinct jerkiness at maximum deviation, and finally show an onset within 45 degrees. However, that may not always be true.***

Step 10: Check for Vertical Nystagmus

It is possible all three clues definitely will be found in one eye, while only two (or sometimes only one) will show up in the other eye. It is always necessary to check both eyes and to check them independently. Notwithstanding, it is unlikely the eyes of someone under the influence of alcohol will behave totally different. Thus, if one eye shows all three clues distinctly while the other eye gives no evidence of nystagmus, the person may be suffering from one of the pathological disorders covered previously.

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## Test Interpretation

Look for three clues of nystagmus in each eye:

- Lack of Smooth Pursuit
- Distinct and Sustained Nystagmus at Maximum Deviation
- Onset of Nystagmus Prior to 45 Degrees

### *Test Interpretation*

You should look for three clues of nystagmus in each eye.

- Lack of Smooth Pursuit (The eye cannot follow a moving object smoothly)
- Distinct and Sustained Nystagmus at Maximum Deviation (nystagmus is distinct and sustained when the eye is held at maximum deviation for a minimum of four seconds)
- Onset of Nystagmus Prior to 45 Degrees

Based on recent research, if you observe four or more clues it is likely the subject's BAC is at or above 0.08. Using this criterion, you will be able to classify about 88% of your subjects accurately. This was determined during laboratory and field testing and helps you weigh the various SFSTs as you make your arrest decision.

***This accuracy level was determined through the San Diego Study (“Validation of the Standardized Field Sobriety Test Battery at BACs Below 0.10 %”).***

***These percentages were obtained from experienced SFST personnel. With experience, properly administering and interpreting the SFSTs in a systematic and standardized manner, officers can obtain results similar to the studies mentioned above. Remind students this validation applies only when:***

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

## Three Clues of HGN

- Lack of Smooth Pursuit
- Distinct and Sustained Nystagmus at Maximum Deviation
- Onset of Nystagmus Prior to 45 Degrees

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### Three Clues of Horizontal Gaze Nystagmus

***It is important participants start with the subject's left eye first. Then check the right eye for the same clue. This procedure should be used for all three clues.***

When we administer the HGN test, we look for three specific clues as evidence of alcohol influence. We check each eye independently for each clue.

***Remind the participants to check each eye twice for each clue.***

For standardization, begin with the subject's left eye. Check for the first clue. Next, check right eye for same clue. Repeat this procedure for each clue starting with left eye, then right eye. Compare and document the results.

When we are checking an eye, it is good practice to administer the test by the numbers each time, to make sure no step is overlooked.

***EMPHASIZE OFFICER SAFETY IS OF KEY IMPORTANCE WHEN ADMINISTERING THESE TESTS.***

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

## Clue Number 1

### Lack of Smooth Pursuit



DWI Detection and Standardized Field Sobriety Testing 8-40

**Note:** *This video will loop continuously until you go to the next slide.*

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 (checking the subject's right eye), then back to center. Carefully watch the subject's left eye then right eye and determine if they are 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.

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

## Mechanics of Clue Number 1

- Move object steadily at a speed that takes approximately 2 seconds to bring the eye from center to side

DWI Detection and Standardized Field Sobriety Testing 8-41

*The Mechanics of Clue Number 1*

It is necessary to move the object smoothly in order to check the eye’s ability to pursue smoothly. The stimulus should be moved from center position, all the way out to the right (checking subject's left eye) where the eye can go no further, and then all the way back across subject's face all the way out to the left where the eye can go no further (checking subject's right eye) and then back to the center.

**Demonstrate.**

The object must be moved steadily, at a speed that takes approximately 2 seconds to bring the eye from center to side.

**Demonstrate.**

In checking for this clue, make at least two complete passes in front of the eyes.

**Demonstrate.**

If you are still not able to determine whether or not the eye is jerking as it moves, additional passes may be made in front of the eyes.

**Point out: the stimulus must be moved in a smooth, continuous manner without stopping at either side or the center while checking for this clue.**

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## Live Demonstration Clue Number 1



### *Live Demonstration of the Mechanics of Clue No. 1*

***Solicit a participant to participate in the live demonstration.***

- ***Station the participant subject in a position where the eyes can easily be seen by the class (It may be necessary to conduct the demonstration at two or more locations in the class to permit all to see.)***
- ***Position stimulus approximately 12 - 15 inches (30 - 38 cm) in front of nose, slightly higher than eye level***
- ***Articulate each step in the procedural mechanics aloud***
- ***Stimulus is moved smoothly from center all the way out to the right (checking subject's left eye), back across subject's face all the way to the left side (checking subject right eye) then back to center***
- ***Point out how the arm is held to ensure smooth movement***
- ***A second pass is conducted the same as the first***
- ***Point out each pass takes the eye as far to the side as it can go***
- ***On each pass, the arm is moved smoothly and the eye is taken as far to the side as possible***
- ***Point out it takes approximately 2 seconds to move the object from center to the side as far as the eye can go***

***Solicit participants' questions concerning the procedural mechanics for Clue No. 1***

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

## Clue Number 2

### Distinct and Sustained Nystagmus at Maximum Deviation



DWI Detection and Standardized Field Sobriety Testing 8-45

**Note:** *This video will loop continuously until you go to the next slide.*

*Clue No. 2: Distinct and Sustained Nystagmus at Maximum Deviation*

Once you have completed the check for Lack of Smooth Pursuit, you will check the eyes for distinct and sustained nystagmus when the eye is held at maximum deviation, beginning with the subject's left eye.

*The Mechanics of Clue Number 2*

Once again, position the stimulus approximately 12 - 15 inches (30 - 38 cm) in front of subject's nose and slightly above eye level.

**Demonstrate.**

Move the stimulus off to the right (checking subject's left eye) until the eye has gone as far as possible.

**Demonstrate holding the stimulus steadily off to the side.**

Hold the stimulus steady at that position for a minimum of four (4) seconds and carefully watch the eye.

**Point out four (4) seconds is a relatively long period of time. You cannot simply hold the eye to the side for an instant and expect to observe distinct jerking.**

Then, move the stimulus back across the subject's face all the way out to the left (subject's right eye).

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## Clue Number 2

### Distinct and Sustained Nystagmus at Maximum Deviation



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Four seconds will not cause fatigue nystagmus. This type of nystagmus may begin if a subject's eye is held at maximum deviation for more than 30 seconds.

Hold the stimulus steady and carefully watch the eye.

If the person is impaired, the eye is likely to exhibit definite, distinct and sustained jerking when held at maximum deviation for a minimum of 4 seconds.

**Emphasize this point.**

In order to "count" this clue as evidence of impairment, the nystagmus must be distinct and sustained for a minimum of 4 seconds.

If you think you see only slight nystagmus at this stage of the test or if you have to convince yourself nystagmus is present, then it isn't really there.

**ONCE AGAIN, EMPHASIZE OFFICER SAFETY.**

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## Live Demonstration Clue Number 2



### *Live Demonstration of the Mechanics of Clue No. 2*

- ***Stimulus initially positioned approximately 12 - 15 inches (30 -38 cm) in front of the participant subject's nose, slightly higher than eye level***
- ***Stimulus moved to the side, drawing the eye to its maximum deviation***
- ***Hold the stimulus steady at that point for a minimum of 4 seconds, to determine whether or not there is distinct and sustained nystagmus***
- ***Then, move the stimulus back across the subject's face all the way out to the left (subject's right eye)***
- ***Station the participant subject in a position where eyes can readily be seen by the class (It may be necessary to conduct the demonstration at two or more locations in the class.)***
- ***Hold the stimulus steady and carefully watch the eye***
- ***Articulate each step in the procedural mechanics aloud***
- ***Hold the stimulus steady at that point for a minimum of 4 seconds to determine whether or not there is distinct and sustained nystagmus***

***Solicit a participant to participate in the live demonstration.***

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

## Clue Number 3

### Onset of Nystagmus Prior to 45 Degrees



DWI Detection and Standardized Field Sobriety Testing 8-49

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**Note: This video will loop continuously until you go to the next slide.**

*Clue No. 3: Onset of Nystagmus Prior to 45 Degrees*

Once again, position the stimulus approximately 12 - 15 inches (30 - 38 cm) in front of subject's nose and slightly above eye level.

**EMPHASIZE OFFICER SAFETY.**

The angle of onset of nystagmus is simply the point at which the eye is first seen jerking.

Examples: With someone at a very high BAC (0.20+), the jerking might begin almost immediately after the eye starts to move toward the side. For someone at 0.08 BAC, the jerking might not start until the eye has moved nearly to the 45 degree angle.

Generally speaking, the higher the BAC, the sooner the jerking will start as the eye moves toward the side.

If the jerking begins prior to 45 degrees, that person's BAC could be 0.08 or above.

**REMIND PARTICIPANTS THE ADMINISTRATION OF HGN IS NOT TO BE USED TO ESTIMATE SPECIFIC BAC LEVEL.**

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## 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 (left eye) at the speed that would take approximately 4 seconds for the stimulus to reach a 45 degree angle.

***Demonstrate stopping the stimulus, and holding it steady.***

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

***Demonstrate movement at that speed.***

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 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.

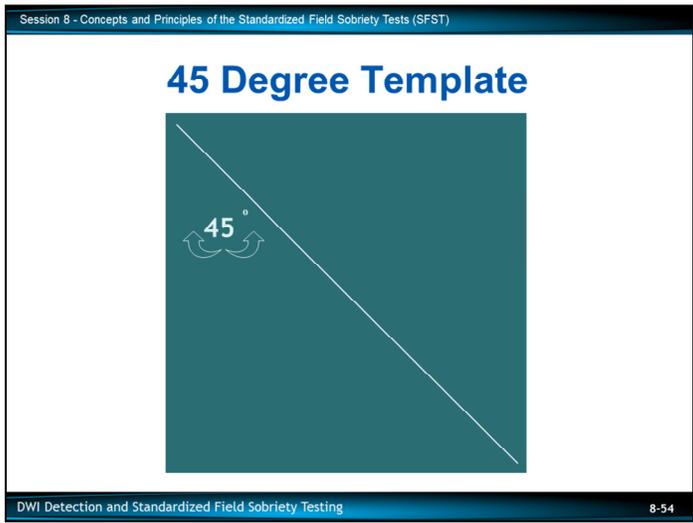
***Point out nystagmus doesn't go away once the eye stops moving. If the officer actually has found the point of onset, the eye will continue to jerk when the stimulus is held steady.***

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

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







*Training Aid: The 45 Degree Template*

A training aid has been provided to help you practice estimating a 45 degree angle.

***Instruct participants to remove their copies of the template from their participant manuals which is located at the back of Session 8 in Attachments.***

- The outline of a square, with its diagonal line, gives us a 45 degree angle
- This outline, or template, is provided for practice only
- It is not to be used with actual DWI subjects

***Demonstrate proper placement of the template.***

To use the template, have your training partner hold the corner of the square under the nose.

***Demonstrate placement of the pencil or penlight.***

When you line up your stimulus with the diagonal line, your partner will be looking along a 45 degree angle.

***Participant practice with 45 degree Template. Practice in groups of two or three, taking turns. Instruct participants to begin by lining the stimulus up with the diagonal, so they can become familiar with the position of an eye at a 45 degree angle.***

***Point out the amount of white showing in the corner of an eye at 45 degrees.***

***Next, instruct each participant to attempt to locate the 45 degree point without using the template, then to raise the template to check the accuracy of the estimate.***

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

## HGN Test Criterion

4 or more clues indicates  
BAC above 0.08 (88% accurate)



DWI Detection and Standardized Field Sobriety Testing 8-56

*Test Interpretation*

Based upon the original developmental research into HGN, the criterion for this test is 4.

If a person exhibits at least 4 out of the possible 6 clues, the implication is a BAC above 0.08.

Using this criterion, the test is 88% accurate.

***Remind participants the SFST field evaluation study conducted in San Diego in 1998 indicated “HGN alone provides valid indications to support arrest decisions at 0.08 BAC.”***

***These percentages were obtained from experienced SFST personnel. With experience, properly administering and interpreting the SFSTs in a systematic and standardized manner, officers can obtain results similar to the studies mentioned above. Remind students this validation applies only when:***

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

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## Vertical Gaze Nystagmus



### D. Vertical Gaze Nystagmus (VGN)

The VGN test is simple to administer. During the VGN 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

***Point out VGN was not examined in the original research that led to the validation of the SFSTs (HGN, WAT, and OLS).***

***Select a participant or another instructor to serve as a subject and demonstrate the Vertical Nystagmus test.***

***Remind the participants to make two checks for VGN.***

Participant led demonstration.

***Practice in groups of two or three, taking turns.***

***Coaching and critiquing participants practice.***

***Instruct each participant to practice conducting the test for VGN, using another participant as the subject.***

***Common mistakes to note and correct:***

- ***Incorrect position of stimulus (Not at maximum elevation)***
- ***Failure to hold stimulus at maximum deviation for four seconds***

For VGN to be recorded, it must be distinct and sustained for a minimum of four seconds at maximum elevation.

VGN may be present in subjects under the influence of high doses of alcohol for that individual, and some other drugs.



## Walk and Turn

### Divided Attention Test Mental Task and Physical Task

Instruction stage  
Walking stage



#### *Test Conditions*

Whenever possible, the WAT test should be conducted on a reasonably dry, hard, level, non-slippery surface. There should be sufficient room for subjects to complete nine heel-to-toe steps. Recent field validation studies have indicated varying environmental conditions have not affected a subject's ability to perform this test.

Standardizing this test for every type of road condition is unrealistic. The original research study recommended this test be performed on a dry, hard, level, non slippery surface and relatively safe conditions. If not, the research recommends:

- 1) subject be asked to perform the test elsewhere, or
- 2) only HGN be administered

The original SCRI studies suggested individuals over 65 years of age or people with back, leg, or inner ear problems had difficulty performing this test. Less than 1.5% of the test subjects in the original studies were over 65 years of age. Also, the SCRI studies suggest individuals wearing heels more than 2 inches high should be given the opportunity to remove their shoes. Officers should consider all factors when conducting SFSTs.

***Stress to participants to consider age along with environmental factors, location, injury, or physical ailments while administering this test. The importance of the totality of all factors should not be overlooked.***

***Point out subjects with heels two inches or more or any other form of unusual footwear (i.e., flip flops, platform shoes, etc.) should be afforded the opportunity to remove that footwear prior to the test.***

***Remind participants prior to administering psychophysical tests to ask the subject if they have any physical problems or disabilities.***



## Administrative Procedures Instruction Stage

### Verbal instructions

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

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#### *Instruction Stage: Initial Positioning and Verbal Instructions*

For standardization in the performance of this test, have the subject assume the heel-to-toe stance by giving the following verbal instructions, accompanied by demonstrations:

Place your left foot on the line (real or imaginary).

***Demonstrate placement of left foot.***

Place your right foot on the line ahead of the left foot, with the heel of your right foot against the toe of the left foot.

***Demonstrate placement of both feet.***

Place your arms down at your sides.

***Demonstrate placement of arms at sides.***

Maintain this position until I have completed the instructions. Do not start to walk until told to do so. Do you understand the instructions so far? (Make sure subject indicates understanding.)

***Emphasize officer must receive some affirmative response before continuing.***

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

## Administrative Procedures Walking Stage

- **Nine heel-to-toe steps, turn, nine heel-to-toe steps**
- **Turn procedures:**
  - **Turn around on line**
  - **Several small steps**

DWI Detection and Standardized Field Sobriety Testing 8-65

*Demonstrations and Instructions for the Walking Stage*

***A straight line must be available for this and subsequent demonstrations.***

***A 10 - 12 foot strip of masking tape on the floor of the classroom will prove suitable.***

Explain the test requirements by giving instructions, accompanied by demonstrations:  
When I tell you to start, take nine heel-to-toe steps on the line, turn, and take nine heel-to-toe steps down the line.

***Demonstrate a minimum of three heel-to-toe steps.***

When you turn, keep the front (lead) foot on the line, and turn by taking a series of small steps with the other foot, like this.

***Demonstrate the turn and a minimum of three heel-to-toe return steps***

While you are walking, keep your arms at your sides, watch your feet at all times, and count your steps out loud.

Once you start walking, don't stop until you have completed the test.

Do you understand the instructions? (Make sure subject understands.)

Instruct the person to begin the test.

***Instructor's demonstration (repeat if necessary).***

***Instruct the participants there may be instances when the officer may have to remind the suspect the first step taken from the heel-to-toe position is step one.***

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## WAT Test Clues

- **Cannot keep balance while listening to instructions**



### *Test Interpretation*

You may observe a number of different behaviors when a subject performs this test. Original research demonstrated the behaviors listed below are likely to be observed in someone with a BAC at or above 0.08. Look for the following clues each time this test is given:

- Cannot keep balance while listening to the instructions. Two tasks are required at the beginning of this test. The subject must balance heel-to-toe on the line, and at the same time, listen carefully to the instructions. Typically, the person who is impaired can do only one of these things. The subject may listen to the instructions, but not keep balance. Record this clue if the subject does not maintain the heel-to-toe position throughout the instructions. (Feet must actually break apart or step off the line.) Do not record this clue if the subject sways or uses the arms to balance but maintains the heel-to-toe position.

***Instructor may break away from the heel-to-toe stance at this point.***

***Demonstrate actions that constitute "Cannot keep balance while listening to instructions" and demonstrate other actions that do not justify recording this clue.***

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

## WAT Test Clues

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



DWI Detection and Standardized Field Sobriety Testing 8-67

- 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.

***Emphasize this clue can't be recorded unless subject was told not to start walking until directed to do so.***

***Stress these first two clues, like all clues in this test, can be accumulated only once.***

***Demonstrate.***

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

***Emphasize it is because of this clue that it is important to inform the subject not to stop walking once the test begins.***

***Also emphasize a stop should be clear and deliberate and it could be attributed to a number of things, i.e., trying to regain balance, problems with divided attention, or problems remembering the instructions. For this clue, officers may need to articulate the suspected reason for the stop in their report.***

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

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## WAT Test Clues

- Steps off line
- Uses arms for 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 for balance. The subject raises one or both arms six or more inches from the sides in order to maintain balance.

***Point out a movement of the arms of six or more inches from the side is required to record this clue.***

***Demonstrate each of these clues.***

***Point out it is often possible to note two of these clues simultaneously. Examples: (Demonstrate)***

- 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.

***Inform the participants there may be times when the suspect takes a wrong number of steps or begins the heel-to-toe walk with the wrong foot resulting in a turn on the right foot instead of the left. If this occurs the suspect would normally be assessed a clue for an incorrect number of steps and not assessed a clue for an improper turn if the turn was made using a series of small steps as instructed and the suspect did not lose his/her balance while attempting the turn. This scoring is consistent with the original research and training conducted by the SCRI and with the administration and scoring of the WAT test in the San Diego Field Study.***

***Demonstrate various ways of turning incorrectly (i.e., pivots, spins).***

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

***Emphasize it is the number of steps the subject physically takes that matters here. Mistakes in the verbal count do not justify recording this clue.***

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

## WAT Test Clues Summary

**SFSTs are a tool to assist you in seeing visible signs of impairment and are not a pass/fail test.**

DWI Detection and Standardized Field Sobriety Testing 8-69

If subject can't do the test, record observed clues and document the reason for not completing the test, e.g., subject's safety.

***Emphasize officers should be prepared to explain in court why the subject could not complete the test.***

Remember the SFSTs are a tool to assist you in seeing visible signs of impairment and are not a pass/fail test.

Subject gets into a "leg lock" position (legs crossed, unable to move.)

If the subject has difficulty with the test (for example, steps off the line), continue from that point, not from the beginning. This test may lose its sensitivity if it is repeated several times.

Observe the subject from a safe distance and limit your movement which may distract the subject during the test. **Always consider officer safety.**

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## WAT 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.

***This accuracy level was determined through the San Diego Study ("Validation of the Standardized Field Sobriety Test Battery at BACs Below 0.10 %"). These percentages were obtained from experienced SFST personnel. With experience, properly administering and interpreting the SFSTs in a systematic and standardized manner, officers can obtain results similar to the studies mentioned above. Remind students this validation applies when:***

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

### *Review of Divided Attention Definition*

WAT is a field sobriety test based on the important concept of divided attention.

***Pose this question: "What driving skills are assessed during the WAT test?" Lead the discussion, as these items were previously identified in Session 7.***

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.

## WAT Test Criterion

### Instruction Stage



#### *Instruction Stage*

**Select a participant to participate as a subject in the demonstration. Use precise language to direct the participant subject to assume the instructions stance. Tell the participant subject to assume the instructions stance. Make sure directions are understood. Tell the participant subject not to start walking until told to do so. Tell the participant subject of the requirement to take nine heel-to-toe steps, to turn, and to take another nine heel-to-toe steps. Demonstrate several heel-to-toe steps. Tell the participant subject of the required turn procedures. Demonstrate the proper turn. Demonstrate the turn. Give the participant subject the final verbal instructions:**

- **Keep watching feet**
- **Count steps out loud**
- **Arms at sides**
- **Don't stop walking until test is completed**

**Ask participant subject if instructions are understood. Clarify any parts that are not understandable.**

**At this point, do not instruct the participant subject to execute the test. Rather, thank the participant subject for participating and allow the participant to return to the seat. Solicit participants' questions concerning the test administrative procedures.**

#### *Test Demonstrations*

**Choose a participant to serve as a demonstration subject. Conduct a complete test of the participant subject, carefully carrying out all of the administrative procedures. Refer to the WAT administrative procedures in the Participant Manual. Have the participant subject actually perform the walking stage of the test.**

**Discuss the participant subject's performance in terms of the test scoring factors. Refer to the WAT clues in the Participant Manual. If time permits, conduct another demonstration using another participant subject.**

**Have the participants divide into pairs and practice the WAT Test.**



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

# OLS



DWI Detection and Standardized Field Sobriety Testing 8-73

*Test Conditions*

OLS requires a reasonably dry, hard, level, and non slippery surface. Subject's safety should be considered at all times.

Standardizing this test for every type of road condition is unrealistic. The original research study recommended this test be performed on a dry, hard, level, non slippery surface and relatively safe conditions. If not, the research recommends:

- 1) subject be asked to perform the test elsewhere, or
- 2) only HGN be administered

However, recent field validation studies have indicated that varying environmental conditions have not affected a subject's ability to perform this test.

The original SCRI studies suggested individuals over 65 years of age, people with back, leg or inner ear problems, or people who are overweight by 50 or more pounds may have difficulty performing this test. Less than 1.5% of the test subjects in the original studies were over 65 years of age. There was no data containing the weight of the test subjects included in the final report. Also, the SCRI studies suggest individuals wearing heels more than 2 inches high should be given the opportunity to remove their shoes.

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## 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.

***Demonstrate this position.***

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.

***Demonstrate a count, as follows: "one thousand one, one thousand two, one thousand three, etc."***

***Officer should not look at his/her foot when conducting the demonstration - OFFICER SAFETY.***

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

Do you understand?

***Make sure subject indicates understanding and answer any questions the subject may have about the test.***

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.

***Although not part of the administrative procedures, if the subject puts the foot down, give instructions to pick the foot up again and continue counting from the point at which the foot touched the ground.***

## OLS Test Clues

- **Sways while balancing**
- **Uses arms for balance**

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### *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 OLS 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 OLS test is administered.

The subject sways while balancing – This refers to side to side or back and forth motion of the body, or a swaying motion of the foot, while the subject maintains the OLS position.

***Emphasize swaying means a distinct, noticeable side to side or front to back movement of the elevated foot or of the subject's body.***

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

***Demonstrate swaying.***

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

***Point out a movement of the arms of six inches or more from the side is sufficient to record this clue.***

***Demonstrate uses arms for balance.***

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## OLS Test Clues

- Hopping
- Puts foot down

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Hopping – Subject is able to keep one foot off the ground, but resorts to hopping in order to maintain balance.

***Demonstrate hopping.***

Puts foot down – The subject is not able to maintain the OLS position, putting the foot down one or more times during the 30 second count.

***Demonstrate putting the foot down.***

If the subject puts the foot down, give instructions to pick the foot up again and continue counting from the point at which the foot touched.

***Test should be discontinued after 30 seconds.***

***Point out it is possible to note two clues simultaneously.***

***Examples (Demonstrate):***

- ***Hopping and swaying***
- ***Foot down and arms raised***

If subject can't do the test, record observed clues and document the reason for not completing the test, e.g. subject's safety.

***Emphasize officers should be prepared to explain in court why the subject could not complete the test.***

Remember time is critical in this test. The original SCRI research has shown a person with a BAC above 0.10 can maintain balance for up to 25 seconds, but seldom as long as 30.

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

## OLS Test Criterion

2 or more clues indicates BAC at or above 0.08 (83% accurate)



DWI Detection and Standardized Field Sobriety Testing 8-79

Based on recent research, if an individual shows two or more clues or fails to complete the OLS, there is a good chance the BAC is at or above 0.08. Using that criterion, you will accurately classify 83% of the people you test as to whether their BAC's are at or above 0.08.

***This accuracy level was determined through the San Diego Study ("Validation of the Standardized Field Sobriety Test Battery at BACs Below 0.10 %"). These percentages were obtained from experienced SFST personnel. With experience, properly administering and interpreting the SFSTs in a systematic and standardized manner, officers can obtain results similar to the studies mentioned above. Remind students this validation applies only when:***

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

Observe the subject from a safe distance and minimize movement during the test so as not to interfere. If the subject puts the foot down, give instructions to pick the foot up again and continue counting from the point at which the foot touched the ground. If the subject counts very slowly, terminate the test after 30 seconds.

*Review of Divided Attention Definition*

OLS is another field sobriety test that employs divided attention.

The subject's attention is divided among such simple tasks as balancing, listening, and counting out loud.

Although none of these is particularly difficult in itself, the combination can be very difficult for someone who is impaired.

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

## Taking Field Notes on the SFSTs

**IV Pre-Arrest Screening**

- Equal Tracking  Yes  No
- Equal Pupils  Yes  No
- Resting Nyst.  Yes  No

**Horizontal Gaze Nystagmus**

- Lack of Smooth Pursuit
- Dist. and Sust. Nystagmus at Maximum Deviation
- Nystagmus Onset Prior to 45 Degrees
- Vertical Gaze Nystagmus (circle one)
- Other \_\_\_\_\_

**Left Right**

Y	N

**Walk and Turn**

Instruction Stage

- Cannot keep balance
- Starts too soon

Walking Stage

- Stops walking
- Misses heel-to-toe
- Steps off line
- Uses arms for balance
- Actual steps taken

First Nine Steps


Second Nine Steps


Improper Turn (Describe) \_\_\_\_\_

Cannot do Test (Explain) \_\_\_\_\_

Other: \_\_\_\_\_

DWI Detection and Standardized Field Sobriety Testing 8-81

### G. Taking Field Notes on the Standardized Field Sobriety Tests

For purposes of the arrest report and courtroom testimony, it is not enough to report the number of clues on the three tests.

The numbers are important to the police officer in the field because they help determine whether there is probable cause to arrest.

But to secure a conviction, more descriptive evidence is needed.

The officer must be able to describe how the subject performed on the tests and what the subject did.

The standard note taking guide is designed to help develop a clear description of the subject's performance on the tests.

***Instruct the participants to take out a copy of the note taking guide to follow along with this discussion.***

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

## HGN

**Horizontal Gaze Nystagmus**

	Left	Right
• Lack of Smooth Pursuit	<input type="checkbox"/>	<input type="checkbox"/>
• Dist. & Sust. Nystagmus at Maximum Deviation	<input type="checkbox"/>	<input type="checkbox"/>
• Nystagmus Onset Prior to 45 Degrees	<input type="checkbox"/>	<input type="checkbox"/>
• Vertical Gaze Nystagmus(circle one)	Y or N	
Other _____		

DWI Detection and Standardized Field Sobriety Testing
8-83

**Sections of the note taking guide will be on display throughout the discussion.**

Complete the entire procedure for both eyes, checking "yes" or "no" for each clue.

Check box (✓) if the clue is present.

For standardization, test the subject's left eye first.

Then, check for the same clue in the right eye.

If clue is not present, leave box blank.

After both eyes have been completely checked, total the number of HGN clues observed.

Complete the check for VGN.

If present, circle Y. If not present, circle N.

In the section labeled "other", record any facts, circumstances, conditions or observations that may be relevant to this procedure.

Examples of additional evidence of impairment emerging while checking for nystagmus:

- Subject unable to keep head still
- Subject swaying noticeably
- Subject utters incriminating statements

**Give examples of facts, circumstances, etc., that should be noted in this section of the note taking guide (i.e., Resting Nystagmus).**

**Ask participants to give additional examples of facts, circumstances, etc., that should be noted.**

Examples of conditions that may interfere with subject's performance while checking for nystagmus: Wind, dust, etc. (irritating subject's eyes).

NOTE: Try to face subject away from flashing or strobe lights that could cause visual or other distractions that could impede the test.

Visual or other distractions impeding the test.

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

## WAT

**Walk and Turn**

**Instruction Stage**

- Cannot keep balance
- Starts too soon

**Walking Stage**

- Stops walking
- Misses heel-to-toe
- Steps off line
- Uses arms for balance
- Actual steps taken

**First Nine Steps**

**Second Nine Steps**

Improper Turn (Describe) \_\_\_\_\_  
 Cannot do Test (Explain) \_\_\_\_\_  
 Other: \_\_\_\_\_

DWI Detection and Standardized Field Sobriety Testing 8-84

***This slide will be left on display throughout the discussion of WAT scoring.***

The section on the WAT test appears at the top of the guide's back side. First two clues are checked only during the instruction stage. In the boxes provided, either record the number or enter a check (✓) or a number to indicate the number of times the clue appears during the instruction stage.

Example: if subject loses balance twice during the instruction stage, place two check marks (✓) or a "2" in the box.

***Remind participants the clue "loses balance during instructions" is recorded only if the subject's feet "break apart".***

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

***Emphasize participants should not leave a box blank if the clue doesn't appear, they should indicate that by writing "N/A".***

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?

***Remind participants, if subject stops walking even once, that will count as one clue; but in order to prepare a clear, descriptive arrest report, it is best to document how many times subject paused while walking.***

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

## WAT (Continued)

**Walk and Turn**

**Instruction Stage**

- Cannot keep balance
- Starts too soon

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**Walking Stage**

- Stops walking
- Misses heel-to-toe
- Steps off line
- Uses arms for balance
- Actual steps taken

**First Nine Steps**


**Second Nine Steps**


Improper Turn (Describe) \_\_\_\_\_

Cannot do Test (Explain) \_\_\_\_\_

Other: \_\_\_\_\_

DWI Detection and Standardized Field Sobriety Testing
8-85

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 for balance, give some indication of how often or how long this happens. Example: subject raised arms from sides three times. Place three check marks (✓) or a "3" in the box.

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

**Record the actual number of steps taken. "Incorrect number of steps" is the validated clue.**

For the next clue, "Improper Turn," record a description of the turn.

- Example: turned incorrectly
- Example: stumbled, to left
- Example: wrong direction
- Example: no small steps
- If the turn is correct, note: N/A

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

At end of the test, examine each factor and determine the total number of clues recorded.

**Remind participants, even if a clue shows up more than once, each clue is counted only once.**

In the section labeled "other", record any facts, circumstances, conditions, or observations that may be relevant to this test.

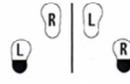
Examples of additional evidence of impairment emerging during WAT test.



## OLS Field Notes

ONE LEG STAND		
L	R	
		Sways while balancing
		Uses arms to balance
		Hopping
		Puts foot down

OTHER: \_\_\_\_\_



Type of Footwear

***This slide will be left on display throughout the discussion of OLS clue.***

Record the subject's performance separately.

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

***Point out, by recording when things happen as well as what happens, a more descriptive arrest report can be prepared.***

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 (✓) or a number 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.

***Demonstrate the proper documentation for observed clues.***

For example, suppose, 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 for 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 reason(s) the test was stopped.

## OLS Field Notes (Continued)

ONE LEG STAND		
L	R	
		Sways while balancing
		Uses arms to balance
		Hopping
		Puts foot down



Type of Footwear

OTHER: \_\_\_\_\_

**Remind participants, even if a clue shows up more than once, each clue is counted only once. Remind participants "number" of clues is utilized only for administrative purposes and for courtroom testimony a complete description of each clue observed is essential.**

In the section labeled "Type of Footwear", record the type of footwear worn.

In the section labeled "other", record any facts, circumstances, conditions, or observations that may be relevant to this test.

Examples of additional evidence of impairment emerging during OLS test:

- Subject verbally miscounts 30 seconds
- Subject utters incriminating statements

**Ask participants to give additional examples of facts, circumstances, etc., that should be noted.**

**Give examples of facts, circumstances, etc., that should be noted in this section of the note taking guide (i.e., untied shoelaces, removed footwear, etc.).**

**Examples of conditions that may interfere with subject's performance of OLS:**

- **Wind/Weather conditions**
- **Subject's age**
- **Weight**
- **Subject's footwear**

**Subjects with heels 2" or higher should be given the opportunity to remove their footwear.**

**Point out subjects with heels two inches or more or any other form of unusual footwear (i.e., flip flops, platform shoes, etc.) should be afforded the opportunity to remove that footwear prior to the test.**

**Solicit participants' questions concerning field note taking.**

At end of the test, examine each factor and determine how many clues have been recorded.

Remember, each clue may appear several times, but still only constitutes one clue.

Officers who are video recording the SFSTs may choose to document any observed clues by voicing them into the recording as the clues are observed.



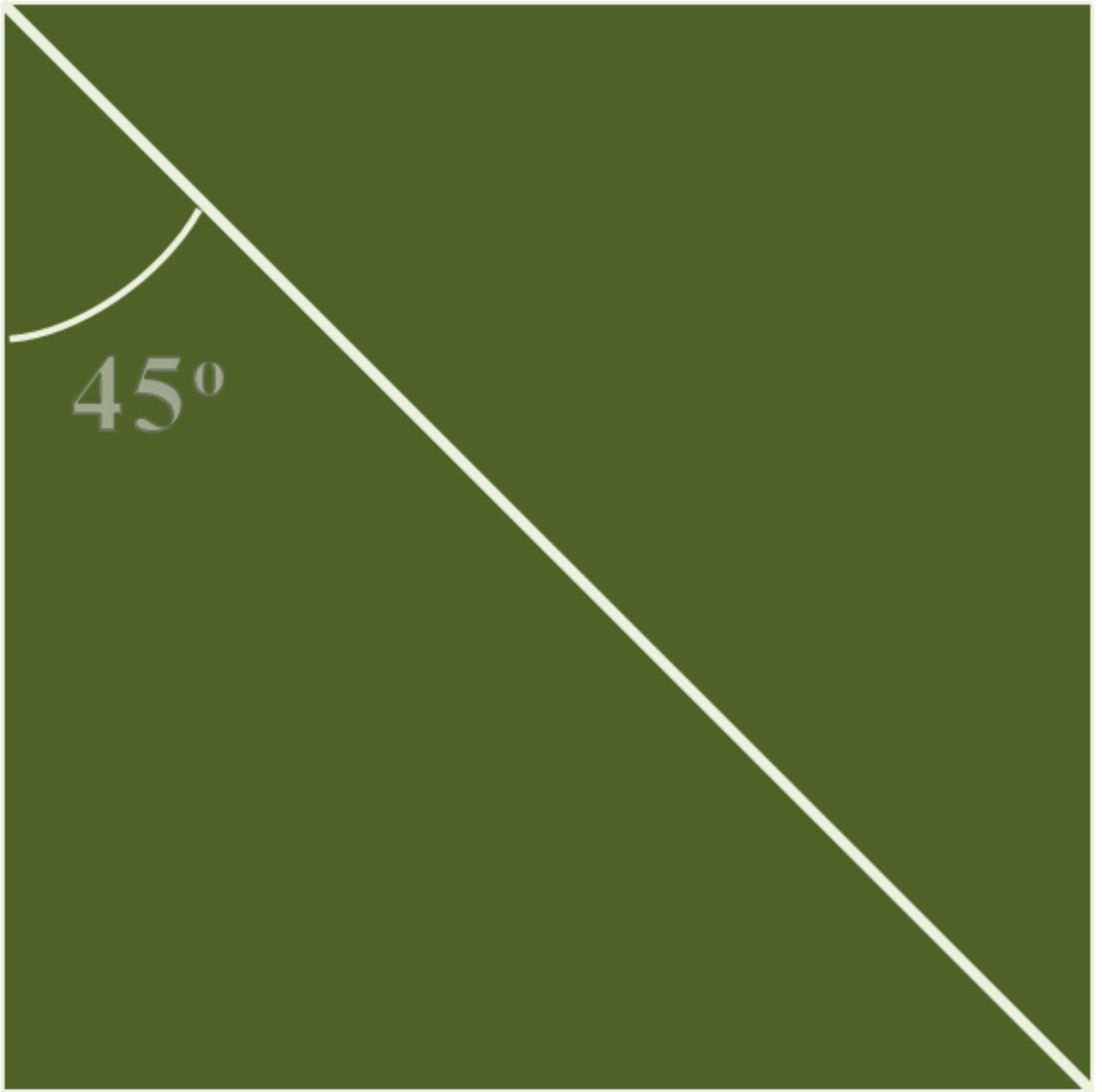












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DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Session 9 – Test Battery Demonstrations



February 2018

# Session 9

## Test Battery Demonstrations



## Learning Objective

- Demonstrate appropriate administrative procedures for SFSTs



***Briefly review the objective, content, and activities of this session.***

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

- Demonstrate the appropriate administrative procedures for the Standardized Field Sobriety Tests (SFSTs)

### CONTENT SEGMENTS

A. Live Classroom Demonstrations

### LEARNING ACTIVITIES

Instructor-Led Presentation

***Explain in this session participants will have the opportunity to observe several demonstrations of the three SFSTs. The instructors will conduct some of these demonstrations. Other demonstrations will be provided on video.***







DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Session 10 – “Dry Run” Practice Session



February 2018

# Session 10

## "Dry Run" Practice Session



Session 10 - "Dry Run" Practice Session

## Learning Objective

- **Demonstrate proper administration of the three SFSTs**



DWI Detection and Standardized Field Sobriety Testing 10-3

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***Briefly review the objective, content, and activities of this session.***

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

- Demonstrate the proper administration of the three Standardized Field Sobriety Tests (SFSTs)

#### CONTENT SEGMENTS

- A. Procedures and Group Assignments
- B. Live Administration of SFSTs
- C. Hands on Practice

#### LEARNING ACTIVITIES

- Instructor-Led Presentation
- Participant Practice Session
- Instructor-Led Presentation

***Explain participants will work with each other taking turns administering the SFSTs to each other. When they are not administering a test or serving as the test subject, they are expected to observe the test administrator and subsequently help critique their performance.***

***The Participant Proficiency Examination should be used to help you monitor a fellow participant's performance as a test administrator.***

# Procedures and Group Assignments

## Practice procedures

- HGN and VGN
- WAT
- OLS
- Participants record each other's performance

### **A. Procedures and Group Assignments**

***Assign participants to work in teams of three or four. Make team assignments. Each participant will conduct a complete series of tests using a fellow team member as a subject. Make sure all participants understand the practice procedures:***

- ***Horizontal Gaze Nystagmus (HGN) and Vertical Gaze Nystagmus (VGN)***
- ***Walk and Turn (WAT)***
- ***One Leg Stand (OLS)***

***Team members who are not immediately participating in a series of tests (either as test administrator or as test subject) are expected to take notes on test administrator's performance and to offer constructive criticism.***

***Once one team member has administered a complete series of tests, other members of the team follow in turn.***

***Participants should use the checklist to record each other's performance.***

***Practice is to continue until every participant has administered a complete series of the three tests at least once.***

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## PARTICIPANT PROFICIENCY EXAMINATION

### STANDARDIZED FIELD SOBRIETY TESTS

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.

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DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Session 11 – “Testing Subjects” Practice:  
First Session



February 2018

# Session 11

## "Testing Subjects" Practice: First Session



## Learning Objectives

- Properly administer SFSTs
- Properly observe and record subject's performance utilizing standard note-taking guide
- Properly interpret subject's performance
- Properly use and maintain SFST Field Arrest Log



***Briefly review the objectives, content, and activities of this session.***

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

- Properly administer the Standardized Field Sobriety Tests (SFSTs)
- Properly observe and record subject's performance utilizing the standard note-taking guide
- Properly interpret the subject's performance
- Properly use and maintain the SFST Field Arrest Log

### CONTENT SEGMENTS

- A. Procedures
- B. Hands on Practice
- C. Use and Maintenance of SFST Field Arrest Log
- D. Session Wrap Up

### LEARNING ACTIVITIES

Instructor-Led Presentations  
 Participant Practice Session  
 Instructor-Led Presentation  
 Instructor-Led Discussion

***Explain participants will work as teams to administer SFSTs to volunteers who have consumed alcoholic beverages. Some of these volunteers will have BACs above 0.08, others will be below that level. Participants will carefully note and record the volunteers' performance and attempt to distinguish those above 0.08 from those below 0.08.***

***Participants will also learn to record observations on a SFST Field Arrest Log.***

## Procedures

- Same teams as dry run
- Each team member administers one complete series of tests to at least one drinking volunteer
- Prepare descriptive written test record on each volunteer tested
- Other team members observe and record performance

### **A. Procedures**

***Participants work in the same teams constituted for the Dry Run Practice Session.***

***Make sure all participants understand the practice procedures. Each team will test at least as many drinking volunteers as the team has members.***

- ***Example: If a team has four members, that team will administer a complete set of tests to at least four volunteers***

***Each team member will administer one complete series of tests to at least one drinking volunteer. If time permits, teams will test additional volunteers.***

- ***Emphasize each team is to prepare a descriptive, written test record on each volunteer tested (using the standard note-taking guide)***

***While one participant is administering tests to a volunteer, the other team members will observe and record the volunteer's performance.***

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**C. Use and Maintenance of SFST Field Arrest Log (The International Association of Chiefs of Police (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.

***Point out log should be used to record the results of all SFSTs administered. Emphasize the logs may be used as evidence in court.***

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

It is highly recommended by the IACP and the National Highway Traffic Safety Administration (NHTSA), that officers utilize an SFST log for the following reasons:

- Records training proficiency
- Records field proficiency
- Documents the officer's experience

All of these combined helps to establish the officer's credibility in administering the SFSTs and may be used as evidence in court.

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**Sample Dry Erase Board Array for Tabulating Results**

<b>“Designated Subjects”</b>	<b>Horizontal Gaze Nystagmus</b>	<b>Walk and Turn</b>	<b>One Leg Stand</b>	<b>Arrest?</b>
“A”				
“B”				
“C”				
“D”				
“E”				
“F”				
“G”				
“H”				
“I”				
“J”				



**ALCOHOL WORKSHOP PARTICIPANT STATEMENT OF INFORMED CONSENT**

I, \_\_\_\_\_, hereby agree to participate in the alcohol  
(Print Name)

workshop conducted on \_\_\_\_/\_\_\_\_/\_\_\_\_ by \_\_\_\_\_.  
(Agency/Department)

I understand that I will consume alcohol, and may become impaired or intoxicated. I specifically agree that my participation as a volunteer drinker in this program makes it imperative that I refrain from driving for at least twelve hours following completion of the program.

I understand that, while participating in the program, I will be required to submit to breath tests to determine my blood alcohol concentration. I also understand that I will be required to submit to psychophysical examinations and other non-intrusive clinical tests to assess the extent of my impairment.

I represent that I am in good physical health, and that I am not an alcoholic. I attest that I am not now under the influence of alcohol or any other drug. I attest that I have not consumed any drug, medication, or other substance that would make my consumption of alcohol at this time inadvisable. I affirm that there exists no condition that should preclude my participation in this alcohol workshop as a volunteer drinker.

I have been informed of the purpose of this workshop, namely, to assist in training police officers to recognize and investigate persons impaired by alcohol and other drugs. I acknowledge that I may refuse to consume any or all of the alcohol offered to me during this workshop. I also consent to being photographed or video recorded, by instructors, for training purposes only.

\_\_\_\_\_  
Signature

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Witness

**VOLUNTEER DRINKER QUESTIONNAIRE**

VOLUNTEER: \_\_\_\_\_

DATE: \_\_\_\_\_

LOCATION: \_\_\_\_\_

Wearing Glasses?      Yes       No

Wearing Contacts?      Yes       No

Eye Problems? \_\_\_\_\_

Sick or Injured? \_\_\_\_\_

Diabetic? \_\_\_\_\_

Epileptic? \_\_\_\_\_ Other: \_\_\_\_\_

Physical Defects? \_\_\_\_\_

Under Doctor's Care? \_\_\_\_\_

Taking Any Medications or Drugs?    Yes    No    What: \_\_\_\_\_

Been Drinking?    Yes     No       What: \_\_\_\_\_    When: \_\_\_\_\_

Last Sleep? \_\_\_\_\_

Number of Hours? \_\_\_\_\_

Last Ate – Time: \_\_\_\_\_    What: \_\_\_\_\_

Age \_\_\_\_\_      Eye Color \_\_\_\_\_

Height \_\_\_\_\_      Sex    M     F

Weight \_\_\_\_\_      Build \_\_\_\_\_

### DOSING CHART

MIX: \_\_\_\_\_

TOTAL NUMBER OZ    ETOH \_\_\_\_\_    TYPE \_\_\_\_\_    PROOF \_\_\_\_\_

	BEFORE DRINKING	PRE-TESTNG	POST TESTING
Lack of Smooth Pursuit	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Maximum Deviation	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Angle of Onset			
Pupil Size	MM	MM	MM
Pulse	BPM	BPM	BPM
Blood Pressure	/	/	/
BAC/Time	/	/	/

DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Session 11-A – Dry Lab



February 2018

# Session 11-A

## Dry Lab



## Learning Objectives

- Properly administer SFSTs
- Properly observe and record subject's performance utilizing standard note-taking guide
- Properly interpret subject's performance
- Properly use and maintain SFST Field Arrest Log



### ***Briefly review the objectives, content, and activities of this session.***

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

- Properly administer the Standardized Field Sobriety Tests (SFSTs)
- Properly observe and record subject's performance utilizing the standard note-taking guide
- Properly interpret the subject's performance
- Properly use and maintain the SFST Field Arrest Log

### CONTENT SEGMENTS

- Procedures
- Hands on Practice
- Use and Maintenance of SFST Field Arrest Log
- Session Wrap Up

### LEARNING ACTIVITIES

Instructor-Led Presentations  
 Participant Practice Session  
 Instructor-Led Presentation  
 Instructor-Led Discussion

***Explain participants will view the administration of SFSTs to volunteers who have consumed alcoholic beverages. Some of these volunteers will have BACs above 0.08. Others will be below that level. Participants will carefully note and record the video subjects' performance and attempt to distinguish those above 0.08 from those below 0.08.***

***Participants will also learn to record observations on a SFST Field Arrest Log.***



## Procedures

- Class will be divided into two groups
- One half will watch video subjects
- Other half will practice administration of SFSTs
- At conclusion of video, participants will switch roles

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### **B. Hands on Practice**

***Divide class into two groups.***

***Each team member will administer the complete SFSTs on another participant under the direct supervision of an instructor.***

***It is recommended half the class perform the SFSTs under the direction of instructor while the remainder of the class views, records, and interprets the NHTSA/IACP-approved videos for this session. Once completed, the groups switch roles. Refer participants to the Proficiency Examination Checklist located in Session 10.***

***EACH team member viewing the videos must determine if the subject should or should not be arrested.***

***Emphasize each officer is to prepare a descriptive, written test record on each video subject using the field note-taking guide (located in Session 4).***

***Emphasize teams will not be informed of the volunteers' BACs until the session "Wrap-up." If time permits, participants will administer additional tests to each other.***

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**C. Use and Maintenance of SFST Field Arrest Log (the International Association of Chiefs of Police (IACP) strongly recommends the use of this log)**

***If options using video subjects are used, maintaining the SFST Field Arrest Log is strongly recommended. (Sessions 11-A or 14-A)***

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

***Point out log should be used to record the results of all SFSTs administered.***

***Emphasize: The logs may be used as evidence in court.***

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

It is highly recommended by the IACP and the National Highway Traffic Safety Administration (NHTSA), that officers utilize an SFST log for the following reasons:

- Records training proficiency
- Records field proficiency
- Documents the officer's experience

All of these combined helps to establish the officer's credibility in administering the SFSTs and may be used as evidence in court.

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**The Use of Video in Training for  
Standardized Field Sobriety Tests (SFST)**

**A. James McKnight and Elizabeth A. Langston**

**National Public Services Research Institute  
8201 Corporate Drive, Suite 220  
Landover, MD 20785**

**September 1993**

**TECHNICAL REPORT**

**NHTSA Contract No. DTNH22-92-C-05109**

**Prepared for  
U.S. Department of Transportation  
National Highway Traffic Safety Administration  
400 7th Street, S.W.  
Washington, D.C. 20590**

Technical Report Documentation Page

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9. Performing Organization Name and Address National Public Services Research Institute, 8201 Corporate Drive, Suite 220, Landover, MD 20745		8. Performing Organization Report No.
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16. Abstract  
 The NHTSA training program to certify law enforcement officers in administration of SFSTs includes two “workshops” in which trainees administer sobriety tests to alcohol-dosed subjects has led to consideration of video as an alternative training method. A preliminary study showed that Certified SFST examiners scoring videotaped performance of alcohol-dosed subjects obtained the same results as examiners scoring the subjects directly. An experiment was therefore undertaken to compare three alternative methods of conducting training during the workshops: live alcohol-dosed subjects (alcohol), video-recorded performances of alcohol-dosed subjects (video), and a combination of the video and alcohol methods (video/alcohol). A total of 133 SFST trainees were randomly assigned to the three training methods. The results disclosed extremely small and statistically nonsignificant differences among the three workshop methods in the proficiency with which trainees administered and scored the SFST with alcohol-dosed subjects in a final performance test. It was concluded that video provides an acceptable alternative to live dosed subjects in training law enforcement officers to administer SFSTs.

17. Key Words  
 Alcohol, Drinking and Driving,  
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## **The Role of Video Training**

The use of videos in Sessions XIA and XIVA is not intended to imply that video can serve as a “substitute” for training with live dosed subjects. However, a combination of practical and moral obstacles to use of alcohol-dosed subjects in training has threatened to prevent the administration of SFST courses in many jurisdictions. Here the choice is not between video and alcohol workshops but between video and no instruction at all. The results of this study clearly resolve that decision.

**REMINDER: Only the NHTSA/IACP options videos are approved for this instruction.**

## **The Conclusions of this Study**

From the results of this study, the following conclusions may be offered:

1. Video administration of the SFST of alcohol-dosed subjects can be used as an alternative to the use of live alcohol-dosed subjects in either or both of the current training “workshops” without altering the ability of trainees to administer or score the test.
2. Current SFST training leads to significant gains in knowledge of administration procedures and scoring criteria. However, gains in scoring the Walk and Turn and One Leg Stand are minimal owing to the objectivity of the scoring criteria.
3. The only significant differences among approaches to teaching the workshop involve the direction of trainee scoring errors on the Walk and Turn and One Leg Stand, where trainees from the video workshop tend to report slightly fewer impairment clues than certified examiners, while those participating in either or both alcohol workshops tend to report more clues.

## **REFERENCES**

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Russ, N. W.; Geller, E. S. Evaluation of a server intervention program for preventing drunk driving. Final Report No. DD-3 ed.; Blacksburg, VA: Virginia Polytechnic Institute and State University, Department of Psychology; 1986. 56 pages.

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Sample Dry Erase Board Array for Tabulating Results

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



### Video Score Sheet

SUSPECT'S NAME: \_\_\_\_\_ OFFICER'S NAME: \_\_\_\_\_

Pupil Size: <input type="checkbox"/> Equal <input type="checkbox"/> Unequal	Tracking: <input type="checkbox"/> Equal <input type="checkbox"/> Unequal	Unequal Pupil Size: Explain:	
Resting Nystagmus <input type="checkbox"/> Yes <input type="checkbox"/> No	Eyelids: <input type="checkbox"/> Normal <input type="checkbox"/> Droopy		
Lack of Smooth Pursuit	Left Eye	Right Eye	Vertical Nystagmus <input type="checkbox"/> Yes <input type="checkbox"/> No
Distinct Nystagmus At Maximum Deviation			Eyes: <input type="checkbox"/> Normal <input type="checkbox"/> Bloodshot <input type="checkbox"/> Watery
Onset of Nystagmus Prior To 45 Degrees			

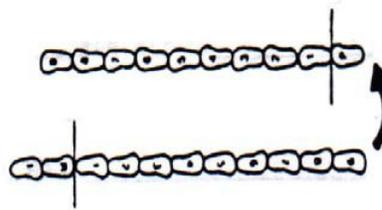
#### HGN CLUES

Observed	Actual

#### WALK AND TURN TEST

Cannot keep balance\_ Starts too soon \_\_\_\_\_

#### WALK AND TURN



Stops Walking

Misses Heel-to-Toe

Steps Off Line

Uses Arms

Actual Steps Taken

1 <sup>st</sup> Nine	2 <sup>nd</sup> Nine

Observed	Actual

Improper Turn (Describe)	Cannot Do Test (explain)
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Team Information

Team No: \_\_\_\_\_

Arrest Decision:

Yes: \_\_\_\_\_

No: \_\_\_\_\_

BAC:

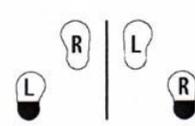
Above 0.10: \_\_\_\_\_

Below 0.10: \_\_\_\_\_

Above 0.08: \_\_\_\_\_

Below 0.08: \_\_\_\_\_

#### ONE LEG STAND



L

R

Sways while balancing

Uses arms to balance

Hopping

Puts foot down

#### ONE LEG STAND

Observed	Actual

**SFST Option Video Subject Results – CD/Video Day 1**

Subject's Name: <b><u>Bob</u></b> BAC: <b><u>.155</u></b>		
HGN Clues	<b>6</b>	Lack of smooth pursuit present in each eye, Distinct and sustained nystagmus at maximum deviation present in each eye, Onset of nystagmus present in each eye, vertical nystagmus present in each eye.
WAT	<b>2</b>	Missed heel to toe, uses arms to balance.
OLS	<b>0</b>	None
Teaching points/Comments: Left leg is slightly bent, which will improve the subject's ability to perform the test without demonstrating clues		

Subjects Name: <b><u>Brandon</u></b> BAC: <b><u>.073</u></b>		
HGN Clues	<b>4</b>	Lack of smooth pursuit in each eye, Distinct and sustained nystagmus at maximum deviation present in each eye.
WAT	<b>3</b>	Loses balance during instructional stage, Used arms to balance, Stopped walking.
OLS	<b>0</b>	None
Teaching points/Comments: None		

Subjects Name: <b><u>Jason</u></b> BAC: <b><u>.000</u></b>		
HGN Clues	<b>0</b>	None
WAT	<b>0</b>	None
OLS	<b>0</b>	None
Teaching points/Comments: None/Placebo		

Subjects Name: <b><u>Carl</u></b> BAC: <b><u>.134</u></b>		
HGN Clues	<b>5</b>	Lack of smooth pursuit in each eye, Distinct and sustained nystagmus at maximum deviation in each eye, Onset of nystagmus in left eye only.
WAT	<b>4</b>	Lost balance during instructional stage, Uses arms to balance, Stepped off line, Misses heel to toe.
OLS	<b>1</b>	Swaying
Teaching points/Comments: Subject looked beyond stimulus at maximum deviation , not allowing clue to be observed in that eye.		

<b>Subjects Name: <u>Suzanne</u></b>		<b>BAC: <u>.074</u></b>
HGN Clues	<b>4</b>	Lack of smooth pursuit in each eye, Distinct and sustained nystagmus at maximum deviation in each eye.
WAT	<b>0</b>	None
OLS	<b>1</b>	Hopping
Teaching points/Comments: Give opportunity to remove shoes, especially those with high heels		

<b>Subjects Name: <u>Christina</u></b>		<b>BAC: <u>.093</u></b>
HGN Clues	<b>5</b>	Lack of smooth pursuit in each eye, Distinct and sustained nystagmus at maximum deviation in each eye, Onset of nystagmus in right eye. Vertical nystagmus present.
WAT	<b>3</b>	Stepped off line, Uses arms to balance, Stopped while walking,.
OLS	<b>1</b>	Swaying
Teaching points/Comments: None		

<b>Subjects Name: <u>Keith</u></b>		<b>BAC: <u>.140</u></b>
HGN Clues	<b>6</b>	Lack of smooth pursuit in each eye, Distinct and sustained nystagmus at maximum deviation present in each eye, Onset of nystagmus present in each eye.
WAT	<b>4</b>	Lost balance during instructional stage, Uses arms to balance, Steps off line, Misses heel to toe.
OLS	<b>3</b>	Sways, Puts foot down, Uses arms to balance, Stopped test
Teaching points/Comments: Consider stopping the psychophysical tests for the safety of the subject.		

<b>Subjects Name: <u>Josh</u></b>		<b>BAC: <u>.132</u></b>
HGN Clues	<b>6</b>	Lack of smooth pursuit present in each eye, Distinct and sustained nystagmus at maximum deviation present in each eye, onset of nystagmus present in each eye.
WAT	<b>2</b>	Stepped off line, Misses heel to toe.
OLS	<b>0</b>	None
Teaching points/Comments: None		

DWI Detection  
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Session 12 – Processing the Arrested Subject,  
Report Writing, and Preparation for Trial



February 2018

## Session 12

### Processing the Arrested Subject, Report Writing, and Preparation for Trial



## Learning Objectives

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



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***Briefly review the objectives, content, and activities of this session.***

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

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

## Learning Objectives

- **Discuss the essential elements of a DWI report**
- **Successfully complete a narrative arrest report**
- **Discuss the importance of trial preparation**



- 
- Discuss the essential elements of a DWI report
  - Successfully complete a narrative arrest report
  - Discuss the importance of trial preparation

### CONTENT SEGMENTS

- A. The Processing Phase
- B. Narrative DWI Arrest Report
- C. Case Preparation and Pretrial Conference
- D. Guidelines for Direct Testimony

### LEARNING ACTIVITIES

Instructor-Led Presentations  
Video Presentation  
Instructor-Led Demonstrations  
Participant Presentations



## Testimony

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



Since testimony constitutes the majority of time spent in trial, it is imperative, 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 you completely understand the question and organize your response before you answer. NEVER answer a question 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.**

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## Successful Prosecution

- Organize and present relevant evidence
- All evidence must be compiled during three phases of detection



The successful prosecution of a DWI case often depends upon the officer's ability to organize and present all relevant evidence of each element of the DWI violation. Keep in mind virtually all of this evidence must be compiled during the three phases of detection – vehicle in motion, personal contact, and pre-arrest screening. The officer must be able to establish the level of impairment at the time the violation occurred, therefore, observations are critical. Subsequent evidence of impairment, such as chemical test result(s) and/or the evidence gathered during a drug evaluation, will be admissible only when a proper arrest has been made. The efforts expended in detecting, apprehending, investigating, and testing/evaluating the DWI offender will be of little value if there is not sufficient evidence to prove every element of the violation.

No matter how much evidence you collect, if it is not presented clearly, completely, and convincingly in court, the case may be lost. Therefore, it is essential officers develop the ability to write a clear, complete, and concise report describing their observations and results. Additionally, the officer must be able to articulate that information to the judge/jury.

***Ask the class to suggest types of evidence that would likely be important in a DWI arrest. After most examples have been elicited, show slide.***

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## Types of Evidence

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



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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., Standardized Field Sobriety Tests (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.)

## Prosecutor

- Prove every element of offense
- Establish proper procedures were followed



The prosecutor must be able to establish and prove every element of the offense. The prosecutor also must establish the proper procedures were followed, including:

There was a reasonable suspicion or another valid reason for stopping/contacting the driver.

***Remind participants the definition of reasonable suspicion is “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 criminal activity is taking, has taken, or is about to take place.”***

***Discuss with participants State-specific definitions.***

The driver was operating or in actual physical control of the vehicle.

There was probable cause to arrest the driver.

***Remind participants the definition of probable cause - “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 an offense has been or is being committed.”***

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## Proper Arrest Procedures

- **Miranda warning**
- **Subsequent observations/interview of defendant**
- **Chemical test**

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- Proper regard was given to the defendant's Miranda rights
  - Subsequent observations/interview of the defendant provided additional evidence relevant to the offense
  - There was a proper request for a chemical test

The prosecutor's case will largely be based upon the thoroughness of the officer's investigation and the clarity of his/her testimony.

While it is true many items which are critical to the prosecution are documented on special forms, the officer must keep in mind the prosecutor may not have the time to search out relevant facts. The decision may be made to amend, reduce, or even dismiss the case on the basis of the arrest report alone.

It is essential the report clearly, completely, and accurately describe the total sequence of events from the point the driver was first observed, through the arrest, the chemical test, and subsequent release or incarceration.

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## Guidelines for Note Taking

- **Recognition and retention of facts**
- **Must establish each element of violation**
- **Recognize and recall facts and circumstances**
- **Rely on your own field notes**

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### *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 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.

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## Processing Tasks

- Inform driver of arrest
- “Pat down” or frisk
- Handcuff defendant
- Secure defendant in patrol vehicle
- Secure defendant’s vehicle, passengers, property



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***Remind participants to become thoroughly familiar with their agency's guidelines for processing individuals. Ask a participant to suggest how a procedural error during the processing phase might cause some evidence to be ruled inadmissible.***

The Processing Phase of a DWI Enforcement incident is the bridge between arrest and conviction of a DWI offender. Processing involves the proper assembly and organization of all of the evidence obtained during the detection phase. This ensures the evidence will be available and admissible in court. Processing also involves obtaining additional evidence, such as a chemical test or tests of the subject's breath, blood, etc.

Typically, the processing phase may involve the following tasks:

- Inform the driver they are under arrest
- “Pat down” or frisk the defendant
- Handcuff the defendant
- Secure the defendant in the patrol vehicle
- Secure the defendant’s vehicle, passengers, property

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## Processing Tasks

### Nighttime DWI Arrest

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***Video segment “Nighttime DWI Arrest”.***

***Hand out copies of DWI Investigation Field Note form. Show video segment “Nighttime DWI Arrest”. Allow participants 4 - 5 minutes to complete notes.***

***Inform participants the defendant is assumed to have demonstrated six clues of HGN.***

***Report writing exercise consists of two sections.***

***The first section employs a video to simulate the three phases of DWI Detection.***

***Video begins with initial observation of a vehicle in operation, proceeds through the stop command and the observation of the stop, continues through the observation and interview with the driver, the observation of the driver's exit from the vehicle, and the SFSTs.***

***The video used for the report writing exercise is somewhat longer than the videos viewed in previous sessions because this segment also includes the exit decision, observation of the exit, and the SFSTs.***

***Following the video, participants will have a minimum of 45 minutes to make notes and complete a narrative arrest report based on what was seen and heard in the video.***

***The standardized note-taking guide/narrative arrest report form may be used to record all evidence depicted in the video.***

***The report should include all the evidence portrayed in the video.***

***Instruct the participants in this exercise the subject refused to take the chemical test. They are to end their narrative report at the completion of the arrest.***

***Reports should be collected by instructors following the courtroom testimony exercise (if optional Session 13 Moot Court is delivered) or at such time designated by instructors.***

## Essentials of Prosecution's Case

- Reasonable suspicion for contact
- Probable cause for arrest
- Proper arrest procedures
- Post-arrest evidence
- Request for chemical test(s)/results
- Clear and concise report

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### B. Narrative DWI Arrest Report

Report writing is an essential skill for a police officer. Good report writing becomes second nature with practice. While there is no one best way to write an arrest report, it is critical the report be detailed regarding every phase of the detection and arrest process. It is helpful to follow a simple format. Departmental policies and/or special instructions or requirements of the prosecutor provide some guidance.

***Point out good report writing becomes second nature with practice.***

It is important for officers to understand the essential ingredients of the prosecution's case. Clarity and completeness of an officer's observations and relaying this information in a clear and concise report is critical. Additionally, an officer must be able to establish he/she had reasonable grounds for the arrest and followed proper arrest procedures. Proper arrest procedures include advising the defendant of their constitutional rights and gathering additional post-arrest evidence. The admissibility of chemical test evidence requires a proper request in accordance with your State's guidelines.

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## Writing the Report – Phase One

- Initial Observations
- Driving/Actual Physical Control
- Vehicle Stop



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***Instructor should emphasize the report is chronological and should document the three phases of DWI detection.***

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.

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 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.

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.

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## Writing the Report – Phase Two

- **Contact With Driver**
- **Exit the vehicle**
- **Preliminary Questions**



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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.

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.

Preliminary Questions – Record the preliminary questions you ask of the driver as well as their responses. Pay close attention to any inconsistent responses and any other physical signs of impairment. For example: driver responds “I’m just trying to get home” when asked “are you diabetic or epileptic?”

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## Writing the Report – Post Arrest

### ON SCENE:

- **Disposition of passengers**
- **Disposition of vehicle and property**
- **Witness' statements**
- **Transport defendant**

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### ON SCENE:

Disposition of Passengers – Make sure passengers are identified, interviewed, and safely released.

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. Document disposition of any property seized.

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.

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.

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## Writing the Report – Post Arrest

### POST SCENE:

- Implied consent/Miranda warning
- Evidentiary test(s)
- Notifications
- Citation/Complaint
- Book or release



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### POST SCENE:

Implied Consent/Miranda Warning – Document the admonishments given at the appropriate point in the investigation.

***Emphasize the specific timing of the Miranda warning may vary from State to State.***

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

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 the traffic citation/complaint was issued at the appropriate time, if applicable.

Book 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.

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## SFSTs



DWI Detection and Standardized Field Sobriety Testing

12-27

### SFSTs

- Horizontal Gaze Nystagmus (HGN) – Lack of Smooth Pursuit, Distinct and Sustained Nystagmus at Maximum Deviation, and Onset of Nystagmus Prior to 45 Degrees in both eyes
- Walk and Turn (WAT) – Could not maintain balance during instructions, improper turn, used arms for balance (2x), steps off line, and stops while walking
- One Leg Stand (OLS) – Raised right foot, put foot down on 1010 and 1014, raised left arm for balance, hopped, and reached the count of 1014 in 30 seconds

Any other observations? *i.e. swaying during instructions during OLS, did not look at foot during OLS, etc.*

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## Case Preparation

- Use field notes to document evidence
- Accurately note statements and other observations
- Review case with other officers
- Collect and preserve evidence
- Prepare required documents

### C. Case Preparation and Pretrial Conference

As was discussed in Session 4, case preparation begins with your first observation and contact with the driver. It is essential all relevant facts and evidence are mentally noted and later documented in field notes, narrative report, or other official forms.

#### *Guidelines for Case Preparation*

- Use field notes to document evidence
- Accurately note statements and other observations
- Review case with other officers who witnessed the arrest or otherwise assisted you and write down relevant facts
- Collect and preserve all physical evidence
- Prepare all required documents and a narrative report

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## Report Consistency

- Adequately explain inconsistencies
- Review records and reports
- Properly document evidence

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Remember, it is essential all reports be consistent. If differences occur, be sure to adequately explain them. The defense will try to impeach your testimony by pointing out seemingly minor inconsistencies.

***Point out it is essential reports are corroborative or, when differences occur, they be adequately explained. The defense will try to impeach your testimony over any inconsistencies.***

***Ask participants to identify relevant records/reports to be reviewed. Probe until appropriate items are identified.***

### *Preparation for Trial*

Upon receipt of a subpoena or other notification of a trial date, review all records and reports to refresh your memory. If appropriate, revisit the scene of the arrest. Compare notes with assisting officers to ensure all facts are clear.

During discovery, list all evidence and properly document it. Remember, evidence may be excluded if proper procedures are not followed.

***Point out evidence will not be admitted if these procedures are not followed.***

Attention to detail is very important.

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## Pretrial Conference

- Be prepared
- Discuss all evidence/conclusions
- Identify strengths and issues
- Review potential questions
- Identify defense challenges

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Successful prosecution is dependent upon the prosecutor's ability to present a clear and convincing case based on your testimony, physical evidence, and supporting evidence/testimony from other witnesses and/or experts.

***Point out a prosecutor should be able to elicit key points from an officer's testimony to bring out the facts necessary to convict the defendant.***

If at all possible, arrange a pretrial conference with the prosecutor. In preparation for the pretrial conference, you should review the entire case file. During the conference, discuss with the prosecutor all evidence and all bases for your conclusions. If there are strengths or issues in your case, bring them to the prosecutor's attention. Ask the prosecutor to review the questions that will be asked on the witness stand. Identify questions of which you do not have the answer to the prosecutor. Ask the prosecutor to review questions and challenges the defense attorney may use. Review your credentials and qualifications with the prosecutor.

If you cannot have a pretrial conference, try to identify the main points and weaknesses about the case and be sure to discuss these with the prosecutor during the few minutes you will have just before the trial.

***Point out there should be no surprises during the trial. Ask the participants to give examples of items to be discussed at a pretrial conference.***

***Point out due to a variety of reasons, prosecutors are not able to have pre-trial conferences. That does not mean they are unconcerned. Try to see it from their viewpoint.***

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## 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

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### D. Guidelines for Direct Testimony

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

- 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.

***Point out if officer testifies on subject matter that was excluded, it could result in suppression of the evidence or a mistrial.***

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 evidence of the defendant's impairment to speak for itself. Direct testimony should include all relevant information about this incident.

Always keep in mind 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.

***Solicit examples from the participants to include: bloodshot, watery eyes, odor of alcoholic beverage on breath, etc.***

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## Defense Challenges

- **Your observations/interpretations**
- **Your credentials**



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 your opinion is based on everything 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.

***Point out officers should not embellish their testimony...be careful not to open any doors for the defense.***

***Point out the defense attorney's job is to try to create a "reasonable doubt." Don't take it personally.***

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## Defense Challenges

- Your credibility
- SFSTs



The defense will ask questions to challenge your credibility. You may be asked several very similar questions in the hope your answers will be inconsistent. You may be asked questions designed to imply you had already formed your opinion before the defendant completed the SFSTs. 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.

***Point out if the defense can discredit your training and/or experience your testimony will have little weight with the jury. Emphasize arrest decisions should be based on the totality of the circumstances.***

You may be asked questions that suggest you deviated from your training. These questions may suggest you eliminated portions of the tests or gave incomplete or confusing instructions. One way you can refute these defense challenges is by administering the SFSTs as you were trained. If deviations to the protocol occur, it is important to explain why. Standardization ensures both consistency and credibility.

***Point out SFSTs should be administered according to the training. Avoid using “I didn’t do XYZ” versus “I couldn’t do XYZ.” If you deviated from the standard, “didn’t” implies it was your choice. “Couldn’t” implies you had no choice (i.e., inclement weather, gross impairment of the defendant, the defendant was not cooperative, physical injury, geographical location, etc.).***

You may be asked questions that suggest the SFSTs are not relevant. These questions will suggest SFSTs have no relationship to driving. For example, a defense attorney may suggest standing on one leg does not correlate with the ability to drive safely. The divided attention tests assess the same mental and physical capabilities a person needs to drive safely. These include:

- Information processing
- Short term memory
- Judgment and decision making
- Balance
- Steady, sure reactions
- Clear vision
- Small muscle control
- Coordination of limbs



## **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.

## Sample DWI Incident Report

Defendant: Jarod Primo  
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 northbound on State Road 113, a four-lane divided highway, traveling toward Woodland, California in Yolo County. I observed a white sport utility vehicle traveling ahead of me northbound in the right lane of SR 113. I noticed the S/V drift outside of its travel lane to the left, crossing the line divider the entire width of its left side tires. The vehicle corrected its path, returned to the right lane, and then drifted to the left again. The left side tires again crossed completely over the center line before the vehicle corrected and returned to the right lane. As I moved closer to the vehicle, I noticed there was no license plate displayed on the rear of the S/V. I signaled for the vehicle to stop by activating my emergency lights. The driver did not respond for approximately 700-800 feet, so I activated an audible siren to alert the driver. After a few more seconds, the driver reacted to my signal and exited the freeway at exit 34, County Road 25A and crossed over the fog line. At the foot of the ramp the S/V did not stop at the stop sign or signal his turn, but rolled through it during a right turn onto CR 25A. The S/V made another right turn and came to a stop on County Road 100 approximately 300 feet south of CR 25A.

### **Observations After the Stop:**

I approached the S/V on the passenger side and made contact with the driver who was the sole occupant. I immediately noticed the driver had red, bloodshot, watery eyes. I advised him of the reasons for the stop and asked if his vehicle had any mechanical problems. He stated, "no." I requested his driver's license, registration, and insurance. The driver handed me a visa credit card, which was removed from his wallet located in a storage pocket in the center of his vehicle dashboard. He did not attempt to produce his registration or insurance card. I asked him where he was coming from. He replied "Downtown," and that he had been "with some friends." I noticed his speech was slurred when he was speaking to me and I detected the odor of an alcoholic beverage that was greater when he spoke. I asked him where he was headed and he replied, "just going home." I informed him he had produced a credit card and asked again for him to produce his driver license. When he provided his driver license, I identified the driver by the photo on his California driver license (#CA1234567) as Jared Primo. I asked him how much alcohol he had consumed tonight and he replied "Just a couple of drinks." I asked him again for his registration and proof of insurance and he reached into his glove box and retrieved his vehicle registration.

I noticed his movements were uncoordinated as he leaned over and retrieved this document. I asked him to exit the vehicle and step to the front of his vehicle car. He asked "Why? What's going on?" I informed him I detected the odor of an alcoholic beverage coming from within the vehicle and I wanted to ensure he was safe to drive. He rolled his eyes and muttered "Whatever," but complied with my request. When he stepped from the vehicle he was unsteady on his feet and staggered slightly as he walked towards the front of the vehicle. I asked him several pre-field sobriety test questions. As I communicated with him, I continued to smell an odor of alcoholic beverage emitting from his breath. The defendant stated he had no mechanical problems with his vehicle, he was not sick or injured, and he had no physical problems. He stated he ate some pizza "a few hours ago," he was not aware of the location where we were stopped, and that he had consumed two beers between 2-3 hours ago when he was downtown. While questioning the defendant, he occasionally swayed forward and backward.

### **Field Sobriety Tests:**

This evaluation was performed on the west shoulder of CR 100 Drive, just south of CR 25A. The evaluation surface was level packed dirt. Lighting conditions consisted of patrol vehicle headlights, spotlights, overhead lights, and my flashlight. The weather was clear with a slight breeze and Primo was wearing athletic shoes.

### **Horizontal Gaze Nystagmus (explained):**

In checking Primo's eyes, I observed equal tracking in both eyes, equal pupil size in both eyes, and no resting nystagmus in either eye. 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 Primo's eyes. Vertical Gaze Nystagmus was not observed.

### **Walk and Turn (explained and demonstrated):**

Instruction Stage: Lost balance (feet broke apart) and swayed noticeably from side to side.

Walking Stage:

Raised left arm over 6 inches away from body to assist with balance at steps 3 and 5 during the first set of nine steps, and raised his right arm during the second set of steps from 3-8.

Missed heel to toe once (#6 during first set of nine steps).

Turn: Primo only took one step during the turn instead of several small steps as instructed.

### **One Leg Stand (explained and demonstrated):**

Primo raised his right foot and began counting. He put his foot down on counts 1010 and 1014. He used his arms for balance (6+ inches from body) and was swaying while balancing on many occasions. He hopped on 1013. He counted to 1014 during the thirty seconds of the test.

**Arrest:**

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

- Driving at night with no license plate
- Weaving out of his lane into another lane
- Driving to the right of the solid white fog line freeway
- Failing to stop for stop sign when exiting SR 113 at CR 25A
- I observed divided attention problems while retrieving his license/registration and insurance
- His red, bloodshot, watery eyes and slurred speech
- His admissions to consuming alcoholic beverages
- Staggering after exiting vehicle
- Odor of alcoholic beverage emitting from his breath
- I observed signs of impairment as he performed the standardized field sobriety tests

I arrested Primo for driving under the influence of an alcoholic beverage at 9:20 p.m. Primo was given the proper chemical testing advisement. He chose a breath test and was transported to the breath testing facility. He provided two breath samples of 0.095 and 0.092 at 9:50 p.m. and 9:52 p.m. He was then booked along with his property.

**Recommendations:**

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

**Vehicle Disposition:**

Primo's vehicle was stored by Reliable Towing.

DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Session 13 – Moot Court



February 2018

Session 13 -Moot Court

2 Hours

# Session 13

## Moot Court



DWI Detection and Standardized Field Sobriety Testing

13-2

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***While this session is optional, the experience provided to participants may prove valuable for testifying. It provides a practical application for the session objectives learned in Session 12. If this session is omitted, it does not affect the goals and objectives of the SFST curriculum in developing skills in DWI Investigation.***

## Learning Objectives

- Discuss need for competent courtroom testimony
- Demonstrate proper techniques of courtroom testimony



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***Briefly review the objectives, content, and activities of this session.***

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

- Discuss the need for competent courtroom testimony
- Demonstrate the proper techniques of courtroom testimony

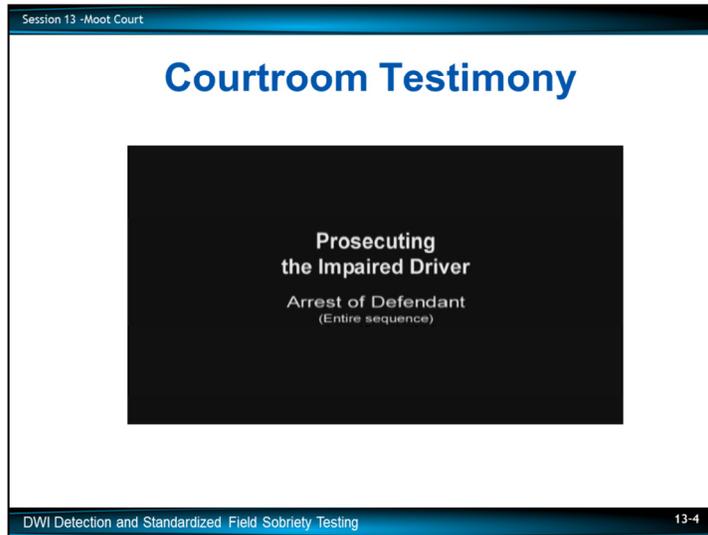
### CONTENT SEGMENTS

- A. Procedures
- B. Moot Court Exercise

### LEARNING ACTIVITIES

- Instructor-Led Presentations
- Participant's Courtroom Testimony Exercise
- Instructor-Led Discussion

***Explain participants will view a video of a simulated DWI arrest. Some participants subsequently will be selected to "testify" about the incident in a moot court. The purpose of this exercise is to have the participants demonstrate their ability to testify in a logical sequence to the evidence they collected during the three phases of DWI Detection with Report Writing video.***



**A. Procedures**

The purpose of this exercise is to have you demonstrate your ability to testify in a logical sequence to the evidence you collected during the three phases of DWI Detection with Report Writing video. **Advise participants they will be divided into groups to provide testimony regarding observations they make in the following video.**

**Do not reveal to the participants which topic they will be assigned until after the video has been shown.**

**Show video.**

**Assign participants into groups (minimum of 3 groups, one for each of the three SFSTs. Additional groups could include – initial observation of the vehicle in motion, observation of the stop, face-to-face interview, exit from the vehicle, etc.).**

**Attempt to solicit key indicators of impairment with primary focus on using the testimony skills discussed in this session.**

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DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Session 14 – “Testing Subjects” Practice:  
Second Session



February 2018

# Session 14

## "Testing Subjects" Practice: Second Session



## Learning Objectives

- Properly administer SFSTs
- Properly observe and record subject's performance utilizing field note-taking guide
- Properly interpret subject's performance



**See "Guidelines for Controlled Drinking Practice Session," in the Administrator Guide. Briefly review the objectives, content and activities of this session.**

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

- Properly administer the Standardized Field Sobriety Tests (SFSTs)
- Properly observe and record subject's performance utilizing the field note-taking guide
- Properly interpret the subject's performance

### CONTENT SEGMENTS

- Procedures
- Hands on Practice
- Session Wrap Up

### LEARNING ACTIVITIES

- Instructor-Led Presentations
- Participant Practice Session
- Instructor-Led Discussion

***Explain participants will work as teams to administer SFSTs to volunteers who have consumed alcoholic beverages. Some of these volunteers will have BACs above 0.08. Others will be below that level.***

***Participants will carefully note and record the volunteers' performance and attempt to distinguish those above 0.08 from those below 0.08.***

***Participants will also learn to record their observations on a SFST Field Arrest Log.***

## Administer SFSTs

- **Volunteers who have consumed alcohol**
- **Each team member will administer one complete series of tests to at least one drinking volunteer**
- **Each team prepares a descriptive, written test record on each volunteer tested**

### **A. Procedures**

***Participants work in the same teams constituted for the Dry Run Practice Session.***

***Make sure all participants understand the practice procedures. Each team will test at least as many drinking volunteers as the team has members. Example: If a team has four members, that team will administer a complete set of tests to at least four volunteers.***

***Each team member will administer one complete series of tests to at least one drinking volunteer.***

***If time permits, teams will test additional volunteers.***

***Emphasize each team is to prepare a descriptive, written test record on each volunteer tested (using the standard note-taking guide).***

***While one participant is administering tests to a volunteer, the other team members will observe and record the volunteer's performance.***

***As soon as the team has completed the SFSTs on a particular volunteer, the volunteer must be escorted by a monitor to the next scheduled team.***

***Define the sequence in which volunteers will circulate among teams.***

***Upon termination of this practice segment, monitors will escort the volunteer subjects to the Breath Testing Station.***

***Emphasize teams will not be informed of the volunteers' BACs until the session "Wrap Up".***

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**Sample Dry Erase Board Array for Tabulating Results**

<b>“Designated Subjects”</b>	<b>Horizontal Gaze Nystagmus</b>	<b>Walk and Turn</b>	<b>One Leg Stand</b>	<b>Arrest?</b>
<b>“A”</b>				
<b>“B”</b>				
<b>“C”</b>				
<b>“D”</b>				
<b>“E”</b>				
<b>“F”</b>				
<b>“G”</b>				
<b>“H”</b>				
<b>“I”</b>				
<b>“J”</b>				



**ALCOHOL WORKSHOP PARTICIPANT STATEMENT OF INFORMED CONSENT**

I, \_\_\_\_\_, hereby agree to participate in the alcohol  
(Print Name)

workshop conducted on \_\_\_\_/\_\_\_\_/\_\_\_\_ by \_\_\_\_\_.  
(Agency/Department)

I understand that I will consume alcohol, and may become impaired or intoxicated. I specifically agree that my participation as a volunteer drinker in this program makes it imperative that I refrain from driving for at least twelve hours following completion of the program.

I understand that, while participating in the program, I will be required to submit to breath tests to determine my blood alcohol concentration. I also understand that I will be required to submit to psychophysical examinations and other non-intrusive clinical tests to assess the extent of my impairment.

I represent that I am in good physical health, and that I am not an alcoholic. I attest that I am not now under the influence of alcohol or any other drug. I attest that I have not consumed any drug, medication, or other substance that would make my consumption of alcohol at this time inadvisable. I affirm that there exists no condition that should preclude my participation in this alcohol workshop as a volunteer drinker.

I have been informed of the purpose of this workshop, namely, to assist in training police officers to recognize and investigate persons impaired by alcohol and other drugs. I acknowledge that I may refuse to consume any or all of the alcohol offered to me during this workshop. I also consent to being photographed or video recorded, by instructors, for training purposes only.

\_\_\_\_\_  
Signature

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Witness

## VOLUNTEER DRINKER QUESTIONNAIRE

VOLUNTEER: \_\_\_\_\_

DATE: \_\_\_\_\_

LOCATION: \_\_\_\_\_

Wearing Glasses? Yes  No

Wearing Contacts? Yes  No

Eye Problems? \_\_\_\_\_

Sick or Injured? \_\_\_\_\_

Diabetic? \_\_\_\_\_

Epileptic? \_\_\_\_\_ Other: \_\_\_\_\_

Physical Defects? \_\_\_\_\_

Under Doctor's Care? \_\_\_\_\_

Taking Any Medications or Drugs? Yes No What: \_\_\_\_\_

Been Drinking? Yes  No  What: \_\_\_\_\_ When: \_\_\_\_\_

Last Sleep? \_\_\_\_\_

Number of Hours? \_\_\_\_\_

Last Ate – Time: \_\_\_\_\_ What: \_\_\_\_\_

Age \_\_\_\_\_ Eye Color \_\_\_\_\_

Height \_\_\_\_\_ Sex M  F

Weight \_\_\_\_\_ Build \_\_\_\_\_

### DOSING CHART

MIX: \_\_\_\_\_

TOTAL NUMBER OZ    ETOH \_\_\_\_\_    TYPE \_\_\_\_\_    PROOF \_\_\_\_\_

	BEFORE DRINKING	PRE-TESTNG	POST TESTING
Lack of Smooth Pursuit	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Maximum Deviation	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Angle of Onset			
Pupil Size	MM	MM	MM
Pulse	BPM	BPM	BPM
Blood Pressure	/	/	/
BAC/Time	/	/	/

DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Session 14-A – Dry Lab



February 2018

# Session 14-A

## Dry Lab



Session 14-A - Dry Lab

## Learning Objectives

- Properly administer SFSTs
- Properly observe and record subject's performance utilizing field note-taking guide
- Properly interpret subject's performance
- Properly use and maintain SFST Field Arrest Log



DWI Detection and Standardized Field Sobriety Testing 14-A-3

***Briefly review the objectives, content, and activities of this session.***

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

- Properly administer the Standardized Field Sobriety Tests (SFSTs)
- Properly observe and record subject's performance utilizing the field note-taking guide
- Properly interpret the subject's performance
- Properly use and maintain the SFST Field Arrest Log

### CONTENT SEGMENTS

- A. Procedures
- B. Hands on Practice
- C. Use and Maintenance of SFST Field Arrest Log
- D. Session Wrap Up

### LEARNING ACTIVITIES

- Instructor-Led Presentations
- Participant Practice Session
- Instructor-Led Presentation
- Instructor-Led Discussion

***Explain participants will view the administration of SFSTs to volunteers who have consumed alcoholic beverages. Some of these volunteers will have BACs above 0.08. Others will be below that level. Participants will carefully note and record the video subjects' performance and attempt to distinguish those above 0.08 from those below 0.08.***

***Participants will also learn to record observations on a SFST Field Arrest Log.***



## Procedures

- Class will be divided into two groups
- One half will watch video subjects
- Other half will practice administration of SFSTs
- At conclusion of video, participants will switch roles

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### **B. Hands on Practice**

*Divide class into two groups.*

*Each team member will administer a complete SFSTs on another participant under the direct supervision of an instructor.*

*It is recommended half the class perform the SFSTs under the direction of instructor while the remainder of the class views, records, and interprets the NHTSA/IACP-approved videos for this session. Once completed, the groups switch roles. Refer participants to the Proficiency Examination Checklist located in Session 10.*

*EACH team member viewing the videos must determine if the subject should or should not be arrested.*

*Emphasize each officer is to prepare a descriptive, written test record on each video subject using the field note-taking guide (located in Session 4).*

*Emphasize teams will not be informed of the volunteer's BACs until the session "Wrap-up."  
If time permits, participants will administer additional tests to each other.*

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**C. Use and Maintenance of SFST Field Arrest Log (the International Association of Chiefs of Police (IACP) strongly recommends the use of this log)**

***If options using video subjects are used, maintaining the SFST Field Arrest Log is strongly recommended.***

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

***Point out log should be used to record the results of all SFSTs administered.***

***Emphasize the logs may be used as evidence in court.***

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

It is highly recommended by the IACP and the National Highway Traffic Safety Administration (NHTSA), that officers utilize an SFST log for the following reasons

- Records training proficiency
- Records field proficiency
- Documents the officer's experience

All of these combined helps to establish the officer's credibility in administering the SFSTs and may be used as evidence in court.

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# QUESTIONS?

**The Use of Video in Training for  
Standardized Field Sobriety Tests (SFST)**

**A. James McKnight and Elizabeth A. Langston**

**National Public Services Research Institute  
8201 Corporate Drive, Suite 220  
Landover, MD 20785**

**September 1993**

**TECHNICAL REPORT**

**NHTSA Contract No. DTNH22-92-C-05109**

**Prepared for  
U.S. Department of Transportation  
National Highway Traffic Safety Administration  
400 7th Street, S.W.  
Washington, D.C. 20590**

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16. Abstract

The NHTSA training program to certify law enforcement officers in administration of SFSTs includes two “workshops” in which trainees administer sobriety tests to alcohol-dosed subjects has led to consideration of video as an alternative training method. A preliminary study showed that Certified SFST examiners scoring videotaped performance of alcohol-dosed subjects obtained the same results as examiners scoring the subjects directly. An experiment was therefore undertaken to compare three alternative methods of conducting training during the workshops: live alcohol-dosed subjects (alcohol), video-recorded performances of alcohol-dosed subjects (video), and a combination of the video and alcohol methods (video/alcohol). A total of 133 SFST trainees were randomly assigned to the three training methods. The results disclosed extremely small and statistically nonsignificant differences among the three workshop methods in the proficiency with which trainees administered and scored the SFST with alcohol-dosed subjects in a final performance test. It was concluded that video provides an acceptable alternative to live dosed subjects in training law enforcement officers to administer SFSTs.

17. Key Words

Alcohol, Drinking and Driving,  
Sobriety Tests

18. Distribution Statement

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## **The Role of Video Training**

The use of videos in Sessions XIA and XIVA is not intended to imply that video can serve as a “substitute” for training with live dosed subjects. However, a combination of practical and moral obstacles to use of alcohol-dosed subjects in training has threatened to prevent the administration of SFST courses in many jurisdictions. Here the choice is not between video and alcohol workshops but between video and no instruction at all. The results of this study clearly resolve that decision.

**REMINDER: Only the NHTSA/IACP options videos are approved for this instruction.**

## **The Conclusions of this Study**

From the results of this study, the following conclusions may be offered:

1. Video administration of the SFST of alcohol-dosed subjects can be used as an alternative to the use of live alcohol-dosed subjects in either or both of the current training “workshops” without altering the ability of trainees to administer or score the test.
2. Current SFST training leads to significant gains in knowledge of administration procedures and scoring criteria. However, gains in scoring the Walk and Turn and One Leg Stand are minimal owing to the objectivity of the scoring criteria.
3. The only significant differences among approaches to teaching the workshop involve the direction of trainee scoring errors on the Walk and Turn and One Leg Stand, where trainees from the video workshop tend to report slightly fewer impairment clues than certified examiners, while those participating in either or both alcohol workshops tend to report more clues.

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Sample Dry Erase Board Array for Tabulating Results

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



## Video Score Sheet

SUSPECT'S NAME: \_\_\_\_\_ OFFICER'S NAME: \_\_\_\_\_

Pupil Size: <input type="checkbox"/> Equal <input type="checkbox"/> Unequal	Tracking: <input type="checkbox"/> Equal <input type="checkbox"/> Unequal	Unequal Pupil Size: Explain:	
Resting Nystagmus <input type="checkbox"/> Yes <input type="checkbox"/> No	Eyelids: <input type="checkbox"/> Normal <input type="checkbox"/> Droopy		
Lack of Smooth Pursuit	Left Eye	Right Eye	Vertical Nystagmus <input type="checkbox"/> Yes <input type="checkbox"/> No
Distinct Nystagmus At Maximum Deviation			Eyes: <input type="checkbox"/> Normal <input type="checkbox"/> Bloodshot <input type="checkbox"/> Watery
Onset of Nystagmus Prior To 45 Degrees			

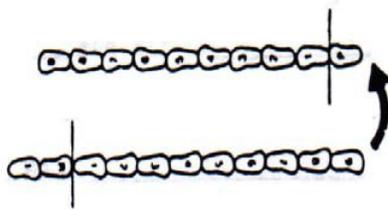
### HGN CLUES

Observed	Actual

### WALK AND TURN TEST

Cannot keep balance\_ Starts too soon \_\_\_\_\_

### WALK AND TURN



- Stops Walking
- Misses Heel-to-Toe
- Steps Off Line
- Uses Arms
- Actual Steps Taken

1<sup>st</sup> Nine    2<sup>nd</sup> Nine


Observed	Actual

Improper Turn (Describe)	Cannot Do Test (explain)
--------------------------	--------------------------

Team Information
Team No: _____
Arrest Decision:
Yes: _____
No: _____
BAC:
Above 0.10: _____
Below 0.10: _____
Above 0.08: _____
Below 0.08: _____

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

### ONE LEG STAND

Observed	Actual

**SFST Option Video Subject Results – CD/Video Day 2**

<b>Subjects Name: <u>Laura</u></b>		<b>BAC: <u>.141</u></b>
HGN Clues	<b>6</b>	Lack of smooth pursuit present in each eye, Distinct and sustained nystagmus at maximum deviation present in each eye, Onset of nystagmus prior to 45 degrees present in both eyes.
WAT	<b>3</b>	Used arms to balance, Stepped off line, Improper turn
OLS	<b>0</b>	None
Teaching points/Comments: None		

<b>Subjects Name: <u>Andrew</u></b>		<b>BAC: <u>.000</u></b>
HGN Clues	<b>2</b>	Distinct and sustained nystagmus at maximum deviation
WAT	<b>0</b>	None
OLS	<b>0</b>	None
Teaching points/Comments: Not uncommon to see to see distinct and sustained nystagmus at maximum deviation, Placebo		

<b>Subjects Name: <u>Joe</u></b>		<b>BAC: <u>.104</u></b>
HGN Clues	<b>6</b>	Lack of smooth pursuit present in each eye, Distinct and sustained nystagmus at maximum deviation present in each eye, Onset of nystagmus prior to 45 degrees present in each eye.
WAT	<b>0</b>	None
OLS	<b>1</b>	Puts foot down
Teaching points/Comments: Subject did not count as instructed by officer		

<b>Subjects Name: <u>Wayne</u></b>		<b>BAC: <u>.000</u></b>
HGN Clues	<b>0</b>	None
WAT	<b>0</b>	None
OLS	<b>0</b>	None
Teaching points/Comments: <b>Placebo</b>		



DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Session 15 – Review and  
Proficiency Examinations



February 2018

# Session 15

## Review and Proficiency Examinations



## Learning Objective

- **Demonstrate knowledge and proficiency in administering SFSTs**



***Briefly review the objectives, content and activities of this session.***

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

- Demonstrate knowledge and proficiency in administering the Standardized Field Sobriety Tests (SFSTs)

### CONTENT SEGMENTS

- Review of Horizontal Gaze Nystagmus (HGN)
- Review of Walk and Turn (WAT)
- Review of One Leg Stand (OLS)
- Video Demonstrations
- Proficiency Exam

### LEARNING ACTIVITIES

- Instructor-Led Presentations
- Instructor- and Participant-Led Demonstrations
- Video Demonstration (Second Showing (IF TIME PERMITS))
- Participant Proficiency Examination

***Explain the participant will review the administrative procedures for the three SFSTs. They will participate in and observe demonstrations of those tests in the classroom and they will view video demonstrations.***

***Near the end of this session, they will be examined to determine proficiency in administering the three tests. Study the Participant's Performance Checklist. They must perform each administrative step correctly to pass the proficiency examination.***





# Clue Number 1

## Lack of Smooth Pursuit



*Clue No. 1: Lack of Smooth Pursuit*

Position stimulus approximately 12-15 inches (30-38 cm) in front of subject's nose, slightly above eye level.

Start with the left eye.

**Demonstrate initial positioning of object.**

Move the stimulus smoothly all the way to the right (checking subject's left eye) then all the way to the left (across subject's nose) to the left (checking subject's right eye).

**Demonstrate.**

Make at least two complete passes.

Observe eyes for signs of nystagmus as they move side to side.

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## Clue Number 2

### Distinct and Sustained Nystagmus at Maximum Deviation



*Clue No. 2: Distinct and Sustained Nystagmus at Maximum Deviation*

**Select another participant to serve as a demonstration subject.**

Move the stimulus to the right until the subject's left eye reaches maximum deviation.

**Demonstrate.**

Verify no white is showing in the corner of the eye.

**Remind participants the nystagmus must be distinct. Very slight nystagmus at maximum deviation is common among some unimpaired people.**

Hold the stimulus steady for a minimum of four seconds and watch for distinct and sustained nystagmus.

Repeat for right eye.

**Remind participants to conduct a second pass the same as the first.**

Check each eye twice for each clue.

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## Clue Number 3

### Onset of Nystagmus Prior to 45 Degrees



*Clue No. 3: Onset of Nystagmus Prior to 45 Degrees*

**Select another participant to serve as a demonstration subject.**

Position stimulus approximately 12-15 inches (30-38 cm) in front of subject's nose, slightly above eye level.

**Demonstrate.**

Begin to make a slow pass in front of the left eye.

**Demonstrate.**

When you see nystagmus, stop the stimulus.

**Demonstrate.**

Hold the stimulus steady and verify the nystagmus continues.

**Remind participants in most individuals there will be some white showing in the corner of the eye at 45 degrees.**

Verify there is still some white showing in the corner of the eye. **(Although rare, there may be times when a person's eye may be at a 45 degree angle and no white in the corner of the eye is visible.)**

Repeat for right eye

**Remind participants to conduct a second pass the same as the first.**

Check each eye twice for each clue.

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## HGN Test Criterion

**4 or more clues indicates BAC above 0.08 (88% accurate).**



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### *Test Interpretation*

Maximum possible number of clues is 6.

Test criterion is 4 or more.

Test is 88% accurate.

Based on the San Diego validation study.

### *Participant Led Demonstration*

**Choose a participant to serve as the test administrator.**

**Choose another participant to serve as a subject.**

### *Test Administration*

**Have participant administrator conduct a complete test of the participant subject's eyes.**

**Instruct participant administrator to articulate each step in the testing procedure.**

### *Verbal Instructions*

Initial positioning of stimulus.

Check for each clue.

Estimate a 45 degree angle.

**At completion of test, have participant estimate a 45 degree angle.**

### *Critique*

**Comment on, and solicit other participants' comments on, participant administrator's performance.**

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# WAT

## Divided Attention Mental Task and Physical Task

- Instruction stage
- Walking stage



### B. Review Walk and Turn

#### *Two Stage Test*

1. Instruction stage
2. Walking stage

#### *Instruction Stage Positioning*

Place your right foot on the line ahead of the left foot, with the heel of your right foot against the toe of the left foot, keeping the arms at the sides.

Maintain this position until I have completed the instructions. Do not start until told to do so.

***Demonstrate positioning for the instruction stage.***

***Remind participants it is important the subject be asked if he/she understands the instructions.***

***Once the subject acknowledges his/her understanding of the instructions, instruct the subject to begin the test.***

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## WAT Test Criterion

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



### *Test Interpretation*

Eight specific clues of impairment.

Test criterion is 2 or more.

Test is 79% accurate.

Based on the San Diego validation study.

### *Participant Led Demonstration*

**Choose a participant to serve as the test administrator.**

**Choose another participant to serve as the test subject.**

### *Test Administration*

**Have participant administrator initiate the test of the subject.**

**Instructions positioning.**

**Verbal instructions.**

**Turn demonstration.**

**Terminate the test after the subject has taken two or three steps.**

### *Critique*

**Comment on, and solicit other participants' comments on, participant administrator's performance.**

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## Administrative Procedures

### Balance and counting stage:

- Raise either leg
- Keep raised foot approximately six inches (15 cm) off ground, foot 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

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### ***Demonstrate the administrative procedures.***

Simple verbal instructions:

- When I tell you to start, raise either leg with the foot approximately six inches off the ground, keeping your raised foot parallel to the ground
- Keep both legs straight and your arms at your side
- Keep both legs straight and to look at elevated foot
- Count out loud in the following manner: "one thousand one, one thousand two, one thousand three," and so on until told to stop

***Demonstrate count: one thousand one; one thousand two; one thousand three, etc.***

Simple physical demonstrations:

- Demonstrate OLS
- Demonstrate counting

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## OLS Test Criterion

Two or more clues indicates BAC above  
0.08 (83% accurate)



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Test criterion is 2 or more.

Test is 83% accurate.

Based on the San Diego validation study

### *Participant Led Demonstration*

**Choose a participant to serve as the test administrator.**

**Choose another to serve as the test subject.**

### *Test Administration*

**Have participant administrator initiate the test of the subject.**

- **Instructions positioning**
- **Verbal instructions**
- **Physical demonstrations**

**Terminate the test after the subject has counted out three or four seconds.**

### *Critique*

**Comment on, and solicit other participant comments on, participant administrator's performance.**

**Solicit and answer participants' questions concerning test administrative procedures.**

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## Administer Tests

- Horizontal Gaze Nystagmus
- Walk and Turn
- One Leg Stand

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### HGN

***Inform participants each must satisfactorily administer the HGN test to one of the fellow participants.***

- Demonstrate ability to give proper verbal instructions
- Demonstrate ability to carry out the mechanics of testing for each clue
- Demonstrate ability to estimate a 45 degree angle

### WAT

***Inform the participants each must satisfactorily administer the WAT test to one of the fellow participants.***

- Demonstrate ability to give proper verbal instructions
- Demonstrate ability to carry out appropriate physical demonstrations to support the verbal instructions

### OLS

***Inform the participants each must satisfactorily administer the OLS test to a fellow participant.***

- Demonstrate ability to give proper verbal instructions
  - Demonstrate ability to carry out appropriate physical demonstrations to support the verbal instructions
- 
- 
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# Group Assignments

## *Group Assignments*

***Divide the class among the instructors.***

## *Conduct Examinations*

***Within each group, participants conduct their tests one at a time.***

***While one participant is conducting the tests, another participant assists by serving as the test subject. Other participants in the group observe the participant administrator's performance.***

***Each participant conducts a complete test of HGN and VGN.***

***Critique/comment on participant administrator's performance in conducting HGN test. (Use the performance checklist from the participant manual.)***

***Each participant administers the verbal instructions and physical demonstrations of the WAT test.***

***Stops the test after the participant subject has taken two or three heel-to-toe steps.***

***Critique/comment on participant administrator's performance in conducting WAT test.***

***Each participant administers the verbal instructions and physical demonstrations of the OLS test.***

***Stops the test after the participant subject has counted out three or four seconds.***

***Critique/comment on participant administrator's performance in conducting OLS test.***

***Use the SFST Proficiency Examination Checklist found in Session 10.***

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# QUESTIONS?

**PARTICIPANT PROFICIENCY EXAMINATION**  
**STANDARDIZED FIELD SOBRIETY TESTS**

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.

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DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Session 16 – Written Examination  
and Program Conclusion



February 2018

# Session 16

## Written Examination and Program Conclusion



## Learning Objectives

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



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***Briefly review the objectives, content and activities of this session.***

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

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

### CONTENT SEGMENTS

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

### LEARNING ACTIVITIES

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

***Explain participants will take a written test to demonstrate their knowledge of the key topics covered in this course. They should study the manual prior to the test and become familiar with its contents.***













## Field Sobriety Testing

- What does "nystagmus" mean?
- WAT is an example of a \_\_\_\_\_ attention test
- Name the eight distinct clues of WAT
- Name the four distinct clues of OLS
- Name the three distinct clues of HGN

### Field Sobriety Testing

- What does "nystagmus" mean? ***Involuntary jerking of the eyes, occurring as the eyes gaze to the side.***
- Walk and Turn (WAT) is an example of a \_\_\_\_\_ attention test. ***Divided***
- Name the eight distinct clues of WAT. ***Cannot keep balance while listening to the instructions, starts too soon, stops while walking, does not touch heel-to-toe, steps off line, uses arms for balance, improper turn, incorrect number of steps***
- Name the four distinct clues of One Leg Stand (OLS). ***Sways while balancing, uses arms for balance, hopping, puts foot down***
- Name the three distinct clues of Horizontal Gaze Nystagmus (HGN). ***Lack of Smooth Pursuit, Distinct and Sustained Nystagmus at Maximum Deviation, Onset of Nystagmus Prior to 45 Degrees***

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# QUESTIONS?

### DWI Detection and SFST – Course and Instructor Evaluation

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

Item	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. This course enabled me to understand enforcement’s role in general DWI deterrence. Comments: _____ _____	○	○	○	○	○
2. This course enabled me to understand the detection phases. Comments: _____ _____	○	○	○	○	○
3. This course enabled me to understand the requirements for organizing and presenting testimonial and documentary evidence in DWI cases. Comments: _____ _____	○	○	○	○	○
4. This course enabled me to improve my ability to recognize and interpret evidence of DWI violations. Comments: _____ _____	○	○	○	○	○
5. This course enabled me to administer and interpret validated psychophysical tests to DWI subjects. Comments: _____ _____	○	○	○	○	○
6. This course enabled me to improve my ability to describe DWI evidence clearly and convincingly in written reports and verbal testimony. Comments: _____ _____	○	○	○	○	○

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

<b>Item</b>	<b>Poor</b>	<b>Fair</b>	<b>Good</b>	<b>Very Good</b>	<b>Excellent</b>
Detection and General Deterrence	<input type="radio"/>				
The Legal Environment	<input type="radio"/>				
Overview of Detection, Note Taking and Testimony	<input type="radio"/>				
Phase One: Vehicle in Motion	<input type="radio"/>				
Phase Two: Personal Contact	<input type="radio"/>				
Phase Three: Pre-Arrest Screening	<input type="radio"/>				
Concepts and Principles of Standardized Field Sobriety Tests	<input type="radio"/>				
Test Battery Demonstrations	<input type="radio"/>				
“Dry Run” Practice	<input type="radio"/>				
“Drinking Subjects” Practice	<input type="radio"/>				
Processing the Arrested Subject and Preparation for Trial	<input type="radio"/>				
Report Writing Exercise and Moot Court	<input type="radio"/>				

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

<b>Item</b>	<b>Agree</b>	<b>Disagree</b>	<b>Not Sure</b>
The program contains some information that is not needed and that should be deleted.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There are some important topics missing from the program that should be added.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The program is too short.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel this program has improved my own ability to enforce DWI laws.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The instructors did a good job.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am very glad I attended the program.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The program is too long.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The instructors should have been better prepared.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel fully qualified to use the nystagmus test now.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Item	Agree	Disagree	Not Sure
I feel fully qualified to use the two divided attention tests now.	0	0	0
Too much time was spent practicing with drinking volunteers.	0	0	0
These three new tests definitely will improve our ability to identify impaired drivers.	0	0	0
I wish we had more practice with drinking volunteers.	0	0	0

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

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

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	Poor	Fair	Good	Very Good	Excellent
Please rate the overall quality of the course.	0	0	0	0	0

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

Instructor Name	Poor	Below Average	Average	Above Average	Excellent
Comments: _____ _____	0	0	0	0	0
Comments: _____ _____	0	0	0	0	0
Comments: _____ _____	0	0	0	0	0
Comments: _____ _____	0	0	0	0	0
Comments: _____ _____	0	0	0	0	0

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

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DWI Detection  
and  
Standardized  
Field Sobriety  
Testing

Introduction to Drugged Driving



February 2018

# Introduction to Drugged Driving



## Learning Objectives

- Define term "drug"
- Describe drug involvement in motor vehicle crashes
- Name categories of drugs



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***Briefly review the objectives, content, and activities of this session.***

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

- Define the term "drug"
- 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 signs associated with drug categories
- Describe medical conditions
- Describe procedures for dealing with drug- or medically-impaired subjects



### *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- or medically-impaired subjects

### CONTENT SEGMENTS

- Overview
- Eye Examinations: Detecting Signs of Drug Influence
- Medical Conditions That May Mimic Drug Impairment
- Drug Categories and Their Observable Effects
- Combination of Drugs
- Dealing with Suspected Drug Influence or Medical Impairment

### LEARNING ACTIVITIES

- Instructor-Led Presentations
- Participant Practice

***Solicit participant questions concerning these objectives.***

## 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.**

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### 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

***Ask participants: “What drug is responsible for most DWI violations in America?”***

Many other drugs also are routinely abused by many drivers.

It is highly likely 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 you be able to recognize subjects who may be under the influence of other drugs, so you will know when to summon assistance from physicians or other appropriate persons or trained Drug Recognition Experts (DREs).

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## What is a “Drug”?

“Any substance that, when taken into the human body, can impair the ability of the person to operate a vehicle safely.”

### *A Simple, Enforcement-Oriented Definition of Drugs*

“Any substance that, when taken into the human body, can impair the ability of the person to operate a vehicle safely.”

(Working definition derived from the 1985 California Vehicle Code.)

***Point out this definition excludes many substances that ordinarily would be considered “drugs” by physicians, chemists, etc.***

***Ask participants: What are some things physicians would consider to be “drugs” that would not be covered under this definition? Examples: nicotine; Caffeine.***

This definition includes some substances physicians don't usually think of as drugs.

***Ask participants: What are some common chemical substances doctors don't usually consider drugs, but definitely impair driving ability? Examples: model airplane glue; paint.***

***Emphasize, as traffic law enforcement officers, the participants' concern has to remain focused on substances that impair driving.***

Within this simple, enforcement-oriented definition there are seven categories of drugs.

Each category consists of substances that impair a person's ability to drive.

The categories differ from one another in terms of how they impair driving ability and in terms of the kinds of impairment they cause.

***It should be emphasized each State may have specific criteria related to the definition of a drug. Participants should become familiar with their State's specific statutes in this area.***







Session Overview – Introduction to Drugged Driving

## Eye Examinations: Detecting Signs of Drug Influence



DWI Detection and Standardized Field Sobriety Testing Intro-11

**B. Eye Examinations: Detecting Signs of Drug Influence**

The eyes can disclose indicators of drug impairment or medical conditions.  
***Ask participants: What is one of the most reliable signs of alcohol influence that can be observed in the eyes?***

Horizontal Gaze Nystagmus (HGN) is an excellent indicator of possible alcohol impairment.

There are a number of drugs other than alcohol that can cause HGN.

There are a number of other drugs that will not cause HGN.

There are many other clues the eyes will disclose, all of which will suggest the presence or absence of drugs or medical impairment.

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Session Overview – Introduction to Drugged Driving

## Gaze Nystagmus

- **Resting Nystagmus – Occurs as eyes gaze straight ahead**
- **HGN**
- **VGN**

DWI Detection and Standardized Field Sobriety Testing Intro-12

*Gaze Nystagmus*

Resting Nystagmus is defined as the involuntary jerking of the eyes as they gaze straight ahead. This condition is not frequently observed. Its presence may indicate Dissociative Anesthetic usage, high levels of an impairing substance for that subject or certain medical problem. If detected, take precautions. As always, exercise sound officer safety techniques and consider calling for medical aid.

During this course we will focus on two types of nystagmus:

- HGN
  - Occurs as the eyes move to the side
  - Useful in determining alcohol influence as well as some drug categories
- Vertical Gaze Nystagmus (VGN)
  - Occurs as the eyes move upward (vertical plane) to an elevated position as far as they can go
  - Associated with a high doses of alcohol and some drug categories for that individual
  - There is no known drug that will cause VGN without causing at least four clues of HGN

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# HGN



## *Horizontal Gaze Nystagmus*

HGN is defined as the involuntary jerking of the eyes as they gaze toward the side. (As defined in the current SFST curriculum.)

Although this type of nystagmus is useful in determining alcohol influence, its presence may also indicate use of Central Nervous System (CNS) Depressants, Inhalants, and Dissociative Anesthetics (DID drugs).

HGN becomes observable:

- When a subject is impaired by alcohol
- As the subject's BAC increases the jerking will appear sooner
- When a subject is impaired by DID drugs

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# VGN



### *Vertical Gaze Nystagmus*

The VGN test is very simple to administer.

***Point out VGN was not examined in the research that led to the validation of the SFSTs, HGN, WAT, and OLS.***

- Position the stimulus horizontally. Approximately 12-15 inches (30-38 cm) in front of the subject's nose
- Instruct the subject to hold their head still and follow the stimulus with the eyes only
- Raise the stimulus until the subject's eyes are elevated as far as possible, hold for a minimum of four seconds

***Select a participant or another instructor to serve as a subject and demonstrate the VGN test.***

- Watch closely for evidence of jerking (up and down).

VGN may be present in subjects under the influence of CNS Depressants, Dissociative Anesthetics, or Inhalants.

***Point out VGN usually develops after high doses of alcohol, other depressants, or inhalants.***

***Solicit participants' questions concerning nystagmus.***

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## Pupil Size Observations



### *Pupil Size Observations*

***The eyes are often referred to as “the windows to the soul.”***

- The pupil is basically a circular hole in the middle of the iris, which regulates the amount of light that passes through into the retina
- The pupils of the eyes continually adjust in size to accommodate different lighting conditions and refocus according to focal length
- When placed in a darkened environment, the pupils will normally expand in size, or dilate, to allow the eyes to capture as much light as possible
- When the lighting conditions are very bright, the pupils will normally shrink or constrict, to limit the amount of light that passes through and to keep the eyes from being over stimulated







## Methods of Ingestion



### D. Drug Categories and Their Observable Effects

#### Methods of Ingestion

##### *Oral*

Oral ingestion is administered through the mouth.

##### *Injection*

- Is a common method of administering drugs, such as heroin (narcotic analgesic)
- Is also used to introduce Stimulants, Hallucinogens, Dissociative Anesthetics, and other Narcotic Analgesics into the body
- CNS Depressants can also be injected but this is not common due to the size of the needle required to deliver the substance

***Give some examples of the appearance and physical characteristics of injection sites.***

In addition to injecting drugs into the veins in the arms, users will find more creative and less conspicuous areas on the body to administer a substance since needles typically leave marks which can be difficult to conceal.

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## Methods of Ingestion (Continued)



### *Insufflation*

The act of introducing a substance by inhaling through the nose for the purpose of intranasal absorption through the mucous membrane.

For a substance to be effective when insufflated it must be in a water soluble powder so it can be readily absorbed through the mucous membranes.

This method is commonly referred to as “snorting”.

### *Inhalation*

The act of introducing a substance directly into the respiratory system through the nose and mouth for the purpose of absorbing the substance through the alveoli in the lungs.

This is a very rapid method of absorption and is often referred to as huffing, sniffing, or smoking.

### *Transdermal Absorption*

A less common method of administering drugs. Transdermal means the chemical or drug is absorbed into a subject’s system through the skin.

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## CNS Depressants

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



### *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)
- Antidepressants (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.

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## Indicators of CNS Depressant Influence



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:

- HGN usually will be present
- VGN may be present (with high doses)
- Pupil size usually will not be effected, except Methaqualone, Soma, and certain antidepressants may cause pupil dilation

***Solicit participants’ questions concerning indicators of CNS Depressant influence.***

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## CNS Stimulants

- Cocaine
- Amphetamines
- Methamphetamine



### *CNS Stimulants*

CNS 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)

## Indicators of CNS Stimulant Influence

- Hyperactive
- Nervousness
- Talkative



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 HGN nor VGN will be observed
- The pupils generally will be dilated

***Solicit participants’ questions concerning indicators of CNS Stimulant influence.***

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## Hallucinogens

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



### *Hallucinogens*

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

***Definition from The Random House College Dictionary (Revised Edition, 1980).***

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.

***Example: the user may "see" a flash of color whenever the telephone rings.***

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

***Example: the user may "smell" a particular fragrance when he or she looks at something painted red.***

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:

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

## Indicators of Hallucinogen Influence

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

General indicators of Hallucinogen influence:

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

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

Eye indicators of Hallucinogen influence:

***Point out the indicators of Hallucinogen influence are very similar to the indicators of CNS Stimulant influence.***

- Neither HGN nor VGN should be present
- The pupils usually will be noticeably dilated

***Solicit participants’ questions concerning indicators of Hallucinogen influence.***

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## Dissociative Anesthetics

- PCP
- Ketamine
- DXM



### *Dissociative Anesthetics*

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

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

***Point out PCP is a very powerful anesthetic or pain-killer.***

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, by injection, or inhaled.

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## Indicators of Dissociative Anesthetic Influence

- Warm to 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, 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:

- HGN generally will be present often with very early onset and very distinct jerking (rarely, Resting Nystagmus may be observed with high doses of dissociative anesthetics)
- VGN generally will be present
- Pupil Size usually will not be effected

***Solicit participants' questions concerning indicators of Dissociative Anesthetic influence.***

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## 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

***Point out “Analgesic” means “pain killer”.***

- They will produce withdrawal signs and symptoms when the drug is stopped after chronic administration

***Point out this characteristic implies narcotic analgesics are physically addicting.***

- 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
- OxyContin

Some are synthetic Narcotic Analgesics, such as:

- Methadone
  - Demerol
  - Fentanyl
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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



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 HGN nor VGN will be present
- Pupils generally will be constricted

***Solicit participants’ questions concerning indicators of Narcotic Analgesic influence.***

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## Inhalants

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



### *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 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.

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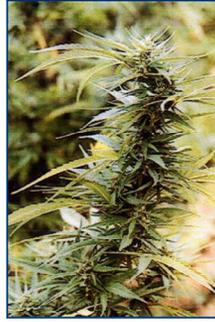
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# Cannabis

- Marijuana
- Hashish
- Hash oil
- Synthetic Cannabinoids
- Other forms of Cannabis



## *Cannabis*

Cannabis is a category of drugs derived from various species of plants such as the Cannabis Sativa and Cannabis Indica.

***Indica plants grow short and wide while Sativa plants grow tall and thin.***

- Marijuana
- Hashish
- Hash oil
- Synthetic Cannabinoids
  - Marinol or Dronabinol
  - Spice, K2, JWH-18, etc.

Other forms of Cannabis include edibles, butane hash oils (wax), etc.

Cannabis products generally are smoked although they also can be ingested orally.

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Session Overview – Introduction to Drugged Driving

## Common Combinations of Drugs



**Alcohol and some other drug**



**PCP and Cannabis**



**Cocaine and Heroin**

DWI Detection and Standardized Field Sobriety Testing
Intro-39

*Common Combinations of Drugs*

**Write these common combinations on the dry-erase board or easel/easel pad.**

- Alcohol and some other drug is the most frequent combination
- PCP and Cannabis is another common combination

**Remind participants many PCP users prefer to ingest that drug by smoking and a favorite method is to sprinkle powdered PCP on marijuana.**

- Cocaine and Heroin is another common combination

Because polydrug use is so common, you should not be surprised to encounter subjects who are under the influence of more than one category of drugs.

At some times and places polydrug users may be more common than single drug users.

Be especially alert to the possibility subjects who have been drinking alcohol may also have ingested some other drug or drugs.

The effects of polydrug use may vary widely depending on exactly what combination of drugs is involved, how ingested, and when they were ingested.

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Session Overview – Introduction to Drugged Driving

## Possible Effects of Drug Combinations

- Null
- Overlapping
- Additive
- Antagonistic

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Any particular combination of drugs may produce four general kinds of effects:

- Null: Neither drug has an effect on the indicator.

**Null Effect: The combination of no action + no action = no action**

**Example of Null Effects: CNS Stimulant and Narcotic Analgesic. Neither drug causes nystagmus, therefore, you should not see nystagmus with this combination.**

- Overlapping: Each drug may effect the subject in some different way. In combination, both effects may appear.

**Overlapping Effect: Action + no action = action**

**Example of Overlapping Effects: PCP and Narcotic Analgesic. PCP will cause nystagmus while a Narcotic Analgesic does not cause nystagmus. Therefore, you should see nystagmus.**

- Additive: The two drugs may independently produce some similar effects. In combination, these effects may be enhanced.

**Additive Effect: Action + the same action reinforces the action**

**Example of Additive Effects: Stimulants and Hallucinogens both cause pupil dilation. Therefore, pupils should be dilated.**

- Antagonistic: The two drugs may produce some effects that are exactly opposite. In combination, these effects may mask each other.

**Example of Antagonistic Effect: A CNS Stimulant usually causes pupil dilation. A narcotic usually causes pupil constriction. It is possible someone who is simultaneously under the influence of a stimulant and narcotic may have pupils nearly normal in size. It is also possible the pupils will change as the effects of one drug diminishes while the other increases.**

**Antagonistic Effect: Action + opposite action = unpredictable outcome**

## Dealing With Suspected Drug Influence or Medical Impairment

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### F. Dealing With Suspected Drug Influence or Medical Impairment

*This segment of the lesson plans must be developed locally. Relevant topics may include:*

- *Local and State laws governing drug-impaired driving and chemical testing of drug-impaired subjects*
- *Departmental procedures for interviewing, searching, etc. drug-impaired subjects*
- *Procedures for contacting DREs and assisting in or witnessing the drug evaluation and classification examination*
- *Procedures for requesting, obtaining, and handling chemical test specimens*

Officers should be familiar with the various medical conditions that mimic drug impairment, i.e. diabetic shock and hypoglycemia. Officers should obtain appropriate medical treatment for drivers who are impaired by these conditions.

***This may be an opportunity to discuss various medical conditions that mimic drug impairment, i.e., diabetic shock and hypoglycemia.***

Drivers who are suspected of drug impairment should be processed in accordance with state and local laws. Wherever possible, a local DRE should be summoned to assist with the investigation.

***Emphasize the importance of requesting the assistance of a local DRE whenever possible.***

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