

Magistrate Specialty Seminar

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CMV Drugged Driving Strategies

Presented by

MC Sgt. Christopher Keller
Michigan State Police
St. Ignace Post
St. Ignace, MI 49781
Kellerc1@michigan.gov



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**CMV
Drugged
Driving
Enforcement
/DRE**



MC Sgt Chris
Keller

St Ignace
Post

Stop #1

- Rite Aid truck BOL on 75
- MCO Dugan responded to BOL
- Vehicle was traveling across both lanes of NB 75 MCO Dugan observed
- Vehicle hit rumble strips on both sides of express way

Traffic Stop #1: Cont.

- Officer noticed driver had slow reaction to questions and was moving his body slowly.
- Driver had dry mouth and constricted pupils
- Driver had pill bottles with hand written names for pills on the inside "excedrin and sleep aid"

Traffic Stop #1: Cont

- No clues of impairment HGN
- 4 clues of impairment on walk and turn
- 2 clues of impairment one leg stand
- .000 PBT

Traffic Stop #1: Conclusion

- Officer made arrest due to performance on SFST
- Call for DRE evaluation
- Blood drawn completed
- Results of blood draw 114 ng Hydrocodone

Drugged Driving Identification



- Approach vehicle with caution, keep eye on driver and walk slow.
- May not exhibit poor driving history due to being professional driver.
- Take in driver movements, sounds, smells, objects in vehicle.

Traffic Stop #2



Stopped Feb 6th
2016

Arrest made for
Poss.
Methamphetamine/
Poss. Of Marijuana

5 axle CMV

Traveling from
Grayling, MI going
to Texarkana, AR

Traffic Stop #2: Cont

First Stop After DRE
classroom training.

Immediately noticed
that the passenger had
bruxism.

Noticed that the driver
had flat teeth as well.

Picked up criminal
indicators of
nervousness and



Traffic Stop #2: Conclusion

- Interviewed both driver and passenger separately.
- Driver denied any Methamphetamine use but physical characteristics did not support that.
- SFST showed no clues of impairment at time of traffic stop.
- Passenger stated that the marijuana in the vehicle belonged to her.
- Once at jail before entering female passenger disclosed that she had Methamphetamine concealed on her person.
- Methamphetamine and marijuana both were being transported and used in a CMV.
- Bruxism and teeth sparked interest in the investigation.



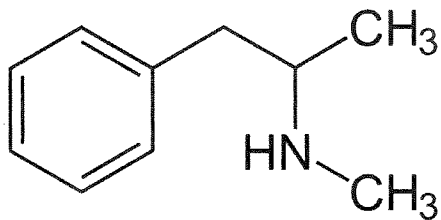
Traffic Stop #3

Stopped for no seat belt use on March 23rd 2016

Driver was speaking very fast but also very slow.

Driver was being overly agreeable as to get me to move along faster.

Traffic Stop #3: Cont

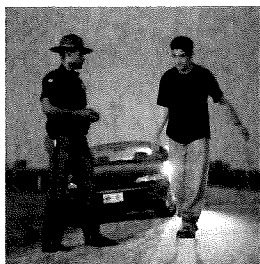


Asked driver if he was under influence of any drugs.

Driver stated that he had just taken his prescribed Suboxone film.

Driver pupils appeared dilated.

Traffic Stop #3: Conclusion



I administered SFST.

No clues of HGN.

Four Clues during Walk and Turn.

Two Clues during One Leg Stand.

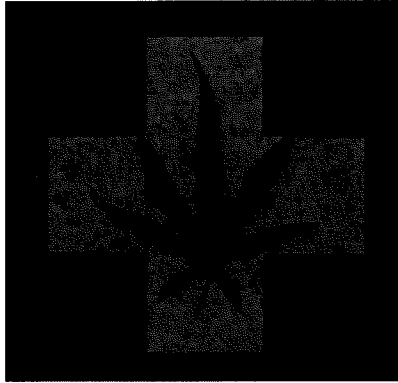
Driver completed the tasks very quickly walking fast and counting fast.

Pulse 156 BPM at traffic stop scene.

Driver arrested for OUID and I completed a DRE evaluation.

Blood came back with positive identification of Methamphetamine and Amphetamine.

Traffic Stop #4



Stopped vehicle
equipment violation

Approach of CMV could
smell odor of burnt
marijuana coming from
cab of CMV

Overwhelming odor of
burnt marijuana coming
from cab once
approached

Traffic Stop #4: Cont

Driver had flush face and blood shot eyes.

Driver had marked reddening of conjunctiva.

Driver eyes appeared dilated.

Driver denied any use of marijuana.

SFST/ARIDE administration

- No clues of HGn
- Lack of convergence presence
- Three clues during Walk and Turn
- Two clues during One Leg Stand
- Approximated 30 seconds as 18 and had eyelid tremors.

Traffic Stop #4: Conclusion



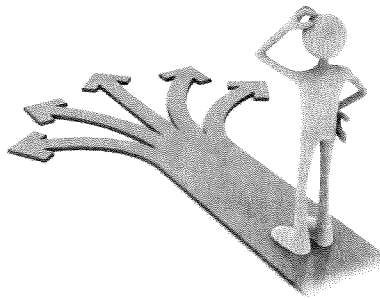
Driver arrested for suspected OUID.

I completed a DRE evaluation, which showed more clues of impairment.

Driver advised that his lawyer would be beating my tests.

Blood came back conclusive showing THC in blood.

Where To Now?



Drugged driving of CMV'S is not going away.

It is easy for truck drivers to get away with it.

Flaws in Apprehension

- Truck drivers will appear honest from fear of getting cited or placed out of service.
- Truck drivers are simply given urine drug test kits to carry with them are instructed to take them on a "random" basis.
- Lack of training in drug impaired driving enforcement. Not as easy to identify as a drunk driver.
- Have to have confidence in your SFST due to .000 reading on PBT.
- Officers get to focused on traffic stop and do not take time to look at not what the driver is doing but HOW.

MC Sgt. Chris Keller

St. Ignace Post

KellerC1@Michigan.gov

517-395-8497

