

INDICATORS CONSISTENT WITH DRUG CATEGORIES

	CNS DEPRESSANTS	CNS STIMULANTS	HALLUCINOGENS	DISSOCIATIVE ANESTHETICS	NARCOTIC ANALGESICS	INHALANTS	CANNABIS
HGN	PRESENT	NONE	NONE	PRESENT	NONE	PRESENT	NONE
VGN	PRESENT (HIGH DOSE)	NONE	NONE	PRESENT	NONE	PRESENT (HIGH DOSE)	NONE
LACK OF CONVERGENCE	PRESENT	NONE	NONE	PRESENT	NONE	PRESENT	PRESENT
PUPIL SIZE	NORMAL (1)	DILATED	DILATED	NORMAL	CONSTRICTED	NORMAL (4)	DILATED (6)
REACTION TO LIGHT	SLOW	SLOW	NORMAL (3)	NORMAL	LITTLE OR NONE VISIBLE	SLOW	NORMAL
PULSE RATE	DOWN (2)	UP	UP	UP	DOWN	UP	UP
BLOOD PRESSURE	DOWN	UP	UP	UP	DOWN	UP/DOWN (5)	UP
BODY TEMPERATURE	NORMAL	UP	UP	UP	DOWN	UP / DOWN / NORMAL	NORMAL
MUSCLE TONE	FLACCID	RIGID	RIGID	RIGID	FLACCID	NORMAL OR FLACCID	NORMAL

FOOTNOTE: These indicators are those most consistent with the category, keep in mind that there may be variations due to individual reaction, dose taken and drug interactions.

- (1) Soma, Quaaludes and possibly some anti-depressants usually dilate pupils.
- (2) Quaaludes, ETOH and possibly some anti-depressants may elevate.
- (3) Certain psychedelic amphetamines may cause slowing.
- (4) Normal, but may be dilated
- (5) Down with anesthetic gases, up with volatile solvents and aerosols.
- (6) Pupils possibly normal.

MAJOR INDICATORS	CNS DEPRESSANTS	CNS STIMULANTS	HALLUCINOGENS	DISSOCIATIVE ANESTHETICS	NARCOTIC ANALGESICS	INHALANTS	CANNABIS
GENERAL INDICATORS	<p>Disoriented Droopy eyes Drowsiness Drunk-like behavior Gait ataxia Slow, sluggish reactions Thick, slurred speech Uncoordinated</p> <p>*NOTE: With Methaqualone, (Quaaludes) pulse will be elevated and body tremors will be evident. Alcohol and Methaqualone elevate pulse. Soma and Methaqualone dilate pupils.</p>	<p>Anxiety Body tremors Dry mouth Euphoria Exaggerated reflexes Excited Eyelid tremors Grinding teeth Hallucinations Increased alertness Insomnia Irritability Redness to nasal area Restlessness Runny nose Talkative</p>	<p>Body tremors Dazed appearance Difficulty with speech Disoriented Flashbacks Hallucinations Memory loss Nausea Paranoia Perspiring Poor perception of time and distance Synesthesia Uncoordinated</p> <p>NOTE: With LSD, piloerection may be observed (goose bumps, hair standing on end).</p>	<p>Blank stare Confused Chemical odor Cyclic behavior Difficulty with speech Disoriented Early HGN Onset Hallucinations Incomplete verbal responses Increased pain threshold "Moon Walking" Muscle rigidity Non communicative Perspiring Possibly violent Sensory distortions Slow, slurred speech Warm to touch</p>	<p>Constricted pupils Depressed reflexes Droopy eyelids Drowsiness Dry mouth Euphoria Itching Nausea "On the Nod" Puncture marks Slow, low, raspy speech Slowed breathing</p> <p>NOTE: Tolerant users exhibit relatively little psychomotor impairment.</p>	<p>Bloodshot eyes Confusion Disoriented Flushed face Intense headaches Lack of muscle control Non-communicative Odor of substance Possible nausea Residue of substance Slow, thick, slurred speech Watery eyes</p> <p>NOTE: Anesthetic gases cause below normal blood pressure; volatile solvents and aerosols cause above normal blood pressure.</p>	<p>Altered perception of time/distance Alterations in thought formation Body tremors Bloodshot eyes Debris in mouth Disoriented Drowsiness Eyelid tremors Impaired memory Increased appetite Lack of Concentration Odor of Marijuana Possible paranoia Relaxed inhibitions</p>
DURATION OF EFFECTS	<p>Ultra-short: A few minutes</p> <p>Short: Up to 5 hours</p> <p>Intermediate: 6-8 hours</p> <p>Long: 8-14 hours</p>	<p>Cocaine: 5-90 minutes</p> <p>Amphetamines: 4-8 hours</p> <p>Meth: 12 plus hours</p>	<p>Duration varies widely from one hallucinogen to another.</p> <p>LSD: 10-12 hours</p> <p>Psilocybin: 2-3 hours</p>	<p>PCP Onset: 1-5 minutes</p> <p>Peak Effects: 15-30 minutes</p> <p>Exhibits effects up to 4-6 hours</p> <p>DXM: Onset 15-30 min. Effects 3-6 hours</p>	<p>Heroin: 4-6 hours</p> <p>Methadone: Up to 24 hours</p> <p>Others: Vary</p>	<p>6-8 hours for most volatile solvents</p> <p>Anesthetic gases and aerosols – very short duration</p>	<p>2-3 hours – exhibit and feel effects</p> <p>(Impairment may last up to 24 hours, without awareness effects.)</p>
USUAL METHODS OF ADMINISTRATION	<p>Injected (occasionally) Insufflation Oral</p>	<p>Insufflation Injected Oral Smoked</p>	<p>Oral Injected Insufflation Smoked Transdermal</p>	<p>Eye drops Injected (PCP) Insufflation (PCP) Oral Smoked (PCP)</p>	<p>Injected Insufflation Oral Smoked</p>	<p>Insufflation</p>	<p>Oral Smoked Transdermal</p>
OVERDOSE SIGNS	<p>Clammy skin Coma Dilated Pupils Rapid, weak pulse Shallow breathing</p>	<p>Agitation Hallucinations Increased body temperature</p>	<p>Long intense "trip"</p>	<p>Long Intense "trip"</p>	<p>Cold clammy skin Coma Convulsions Slow, shallow breathing</p>	<p>Cardiac arrhythmia Possible psychosis Respiration ceases Severe nausea / vomiting Risk of death</p>	<p>Fatigue Paranoia Possible psychosis</p>