

TRAFFIC PATROL/ DRUG INTERDICTION STUDENT MANUAL



***Institute for Law Enforcement Education
Pennsylvania Department of Education***

6345 Flank Drive Suite 1700

Harrisburg, PA 17112

Phone: (717) 657-4219

E-mail: ra-ilee@pa.gov

Website: www.ileetraining.com



CONCEPT OF TRAFFIC PATROL/DRUG INTERDICTION

Definitions:

Traffic Patrol - The detection and investigation of moving violations, inspection violations, criminal violations, and other actions of police interest that are committed by drivers and other occupants of vehicles that are operated upon the public roadways of the commonwealth.

Interdiction - The action of intercepting and preventing the movement of a prohibited commodity or person.

Historical drug activity:

1924 – manufacture of heroin is prohibited in the United States.

1938 – Germany issued methamphetamine to its troops.

1970 – increase in methamphetamine, PCP and cocaine in America.

Why traffic patrol?

Most illegal drugs are transported into Pennsylvania via our roadways from various source cities. The transportation method varies but usually passenger vehicles often not owned by the operator. Many times, having no knowledge of who the owner may be.

Courier interdiction programs:

Operation Pipeline, Operation Convoy – DEA

Operation Whiteline – PSP

Crime in America - drug couriers:

160 billion dollar a year industry

The weakest link in the drug distribution chain is the overland transportation of drugs and currency by vehicle.

PROCEDURES: TURNING TRAFFIC STOPS INTO INVESTIGATIVE DETENTION

Avoid profiling drivers or occupants

General pre-stop indicators:

Rental vehicle

Temporary tags

Vehicle origin/destination

Occupants

Vehicle appearance

Driver's actions:

Obeys all traffic laws

Overly cautious

Nervousness

Use of "the drive":

- Park marked unit perpendicular to roadway
- Subject may not look at the officer when driving by
- Officer follows vehicle
- Subject may weave as he/she looks repeatedly in the mirror

Probable cause/reasonable grounds for stop:

- Moving violation
- Faulty equipment or inspection violation
- Criminal violation
- Other violation

Approaching the vehicle:

- Passenger side approach - optional
- Check trunk lid
- Check for occupants
- Be alert to subject vehicles rolling a long distance before stopping
- Look for plain view evidence
- Be cautious of tinted windows
- Watch for trunk or door movement
- Possibility of tail car
- When suspect exits vehicle without request, be very cautious!
- Furtive movement of occupants:
 - Done in such a way as to maintain concealment...slyly or secretly done
 - Officer has a fear for their life
 - Pat down and weapons search, may only seize weapons unless you immediately recognize the item as contraband

Face to face contact with occupants

Appearance of vehicle:

- Luggage
- Evidence of continual long - distance driving
- Ashtrays/containers
- Tools of the trade
- Noticeable alterations
- Body work

Odors from vehicle:

- Marijuana
- Cocaine
- Methamphetamine

Appearance of driver/occupants:

- Driver/occupants demeanor
- Compare license/registration/insurance information – surname - address
- Rental agreements
- Indications of vehicle origin – long-distance one-way rental

Courier clues and indicators – general:

- Team driving
- Rental vehicles
- Temporary registration
- Good guy gear
- Lifestyle statements/stickers
- Masking odors
- Packaging materials
- Clean areas among dirty or dirty areas among clean
- Driving below posted limit
- Communication devices
- Cash clues
- Tools
- Plain view evidence
- Illegal items

Courier indicators - rental straight trucks:

- Unusual combination of driver and passenger(s)
- Multiple cell phones
- Origin and destination
- Third party owner or renter
- Cost effectiveness of trip
- Old or junk cargo/new cargo/no cargo
- High probability of false walls, compartments in frame rails, fuel tank

Courier indicators - recreational vehicles:

- Unusual combination of persons occupying the vehicle
- Origin and destination
- Third party owner or renter
- Rental vehicle
- Traveling after dark and/or in bad weather
- Fueling/servicing at high-cost facilities
- Traveling in rural areas where tourist and/or recreational attractions don't exist

Courier indicators - commercial carriers:

- Owner-operator rig
- Criminal record of operator
- Older rig
- No consignee or fictitious consignee
- Fraudulent or lack of adequate documentation
- Light and/or inexpensive cargo
- Deadheading – no cargo over a long distance
- Questionable cargo or no cost effectiveness
- Refrigerated trailers

ROADSIDE INTERVIEW

General:

- Be polite/deferential
- Get story and attempt to confirm or discredit
- Be observant
- Employ good conversational skills
- Use caution and officer safety techniques
- Evaluate all information given by operator and occupants

Conversational techniques:

- The interview should be a conversation with a purpose
- Be polite and friendly but think critically
- Observe for behavior clues
- Questioning techniques: start with simple questions. Watch for changes in behavior as questions are focused.
- Where are you coming from?
- Where are you going?
- What is the purpose of your trip?
- How long are you planning to stay?
- Who did you visit on your trip?
- Have you made this trip before?
- Is the vehicle on the normal route of travel for the stated origin and destination?
- Compare physical evidence with driver's story
- Ask driver to identify passengers and ask how long known
- Split and compare driver's and other occupant's statements (check story with social security number for birthplace)
- Repeat several questions to see if same answer is given
- Have subject tell story backwards, from present to when he/she left origin
- Consider experience of drug couriers - Rehearsed?

If owner is not present:

- Who is the owner?

- Where is the owner?

- Can the owner be reached?

- How do I know nothing has happened to the owner or that the car is legally being used?

- If the driver is hired, how do you pay for expenses and get paid?

Verbal indicators of deception:

- Statements

- Voice modulation

Indirect indicators of deception:

- Hesitation, pause

- Repeats or asks for repetition of question

- Yawning

- Unrelated response

- Clears throat

- Changes "the subject"

Visual indicators of deception or stress:

- Eye contact

- Increased perspiration

- Skin color change

- Pulling hair off neck

- Fanning self

- Hands over mouth

- Pinching or rubbing nose

- Pulling ears

- Dry mouth Increased pulse rate

- Changed breathing rate

- Cover-up laughter

- Movement of eyes when answering questions

Suspect's body language:

- Excessive movement

- Explosive movements

- Fidgety/nervous behavior

- Crossed arms

- Picking lint off clothing

- Hand flailing

- Hands close to groin

- Holding onto or blocking vehicle

- Extending legs

- Leaning forward

- Evasive eye contact

- Excessive sweating
- Palpitating chest
- Read indicators in clusters

Masking:

- Excessive smiling
- Other unusual emotional response
- Excessive cooperation
- Questions asked of officer

Request consent to search if reasonable suspicion exists:

- Attempt to get signed consent
- Suspect usually consents

SEARCHING TECHNIQUES

General guidelines:

- Based upon consent, warrant exception, warrant, or inventory
- Backup officer/witness to be present prior to search
- Most obvious areas searched first
- Orderly technique
- Complete search of entire vehicle
- Continue after contraband located
- Use proper physical evidence collection techniques
- Return vehicle to its original condition if nothing located

Interior search - look for velcro or unusual wiring:

- Front compartment
- Vents and ducts
- Dashboard
- Sun visors
- Glove box, console
- Seats, head rests
- Floor, glued carpeting
- Cabin filter
- Headliner
- Air bag compartment
- Missing screws/tool marks
- Rear deck
- Door panels
- Space between rear seat and trunk
- Packages that are inconsistent

Trunk:

- Wheel wells
- Spare tire
- Spare tire mount
- Side panels
- Floor covering
- Floor
- Contents
- Speaker mounts
- Missing, incorrect or damaged screws
- Modifications
- Unusual dirt or paint

Items as clues to courier use:

- Odors, cover odors
- Ledgers/grow documentation
- Cellular telephone(s)
- Tools, receipts
- Documentation from source location
- Other items indicating routes of travel

Exterior search:

- Begin at driver's door
 - Will window roll down?
 - Quarter panel altered/removed
 - Trim strips and floor molding
 - Light assembly

- Quarter panels
 - Space between wheel well and inside panel
 - Wheel well - fresh undercoating
 - Trim

- Bumper and grill
 - Behind bumper
 - Space between grill and radiator

- Engine compartment
 - Air filter, hoses
 - False fire wall
 - Window washer tank
 - Radiator, battery

Wheels and tires

- Excessive rim scratches
- Items between the tire and rim
- Hard items felt in sidewalls
- Odors from the valve stem

Undercarriage

- Fuel tank tool marks
- Undercoating/dirt in unusual location
- False muffler/tailpipe
- Use of duct tape

Use of canine

General guidelines

Prior to arrival of canine:

- Anticipate use whenever possible
- Call early
- Make stop clear of unsafe areas
- Get vehicle as far off roadway as possible
- Attempt consent to search
- If obtained, have trunk opened and keys returned to ignition
- If not obtained, engine is shut off and occupants are removed from area of vehicle
- Remove all food-related items from vehicle

After arrival of canine

- Assist handler to move occupants (if needed)
- Vehicle first checked by handler
- Handler turns on ignition, heat and fan on high
- Remove trunk contents and line up along shoulder of roadway
- Avoid canine distraction
- Canine in vehicle may be an attempt to distract
- Assist reloading of vehicle if nothing found

EVIDENCE IDENTIFICATION AND COLLECTION

Drugs and paraphernalia

Schedule I: not currently accepted medical use in the U.S.
High potential for abuse, most are hypnotic or depressant.

Schedule II: currently accepted for medical use in the U.S.
High potential for abuse, abuse may lead to severe psychic or physical dependence, most are pain killers and stimulants.

Schedule III: currently accepted medical use in the U.S.
Less potential for abuse than Schedule I or II.
Abuse may lead to moderate or low physical dependence.
Depressants, steroids, and others.

Schedule IV: currently accepted medical use in the U.S.
Low potential for abuse. Limited physical and/or psychological dependence. Some central nervous system depressants.

Schedule V: currently accepted medical use in the U.S.
Lower potential for abuse. Limited dependence. Mixture of types.

Prohibited Acts under Act 64

35 P.S. 780-108 Misbranding defined – A controlled substance, other drug, device or cosmetic shall be deemed to be misbranded. (12) If it is a controlled substance, its commercial container must bear a label containing an identifying symbol for such substance in accordance with Federal regulations.

35 P.S. 780-113 (A) (1) – The manufacture, sale, or delivery, holding, offering for sale, or possession of any controlled substance, other drug, device, or cosmetic that is adulterated or misbranded.

35 P.S. 780-113 (A) (2) – The adulteration or misbranding of any controlled substance, other drug, device or cosmetic.

35 P.S. 780-113 (A) (6) – Forging, counterfeiting, simulating or falsely representing, or without proper authority using any mark, stamp, tag, label, or other identification symbol authorized or required by regulation promulgated under the provisions of this act.

35 P.S. 780-113 (A)(16) – Knowingly or intentionally possessing a controlled or counterfeit substance by a person not registered under this act.

35 P.S. 780-113 (A)(29) – The intentional making, distributing or possession of any punch, die, plate, stone, or other thing designed to print, imprint, or reproduce the trademark, trade name, or other identifying mark, imprint or symbol of another or any likeness of any of the foregoing upon any drug or container or labeling thereof so as to render the drug a counterfeit substance.

35 P.S. 780-113 (A)(30) – The manufacture, delivery, or possession with intent to manufacture or deliver a controlled substance by a person not registered under this act, or a practitioner not registered or licensed by the appropriate state board, or knowingly creating, delivering or possessing with intent to deliver, a counterfeit substance.

35 P.S. 780-113 (A)(32) – The use of, or possession with intent to use drug paraphernalia.

35 P.S. 780-113 (A)(35) (ii) – Except as otherwise provided by law, no person shall knowingly distribute or sell a noncontrolled substance upon the express or implied representation that the substance is a controlled substance.

When medical marijuana card holders violate the Medical Marijuana Act, they are no longer afforded protections from prosecution and are committing crimes. Defendant card holders who are not in compliance should be charged under both the Medical Marijuana Act **AND** the Controlled Substance Device and Cosmetic act.

(a) General rule--Except as provided in section 303, section 704, Chapter 19 or Chapter 20, 1 the use of medical marijuana is unlawful and shall, in addition to any other penalty provided by law, be deemed a violation of the act of April 14, 1972 (P.L. 233, No. 64), 2 known as The Controlled Substance, Drug, Device and Cosmetic Act.

35 Pa. Stat. Ann. § 10231.304

Charge under the MMA by using the additional penalties section with a cross reference to the violated section:

Count 1: Violation of the Medical Marijuana Act 35 Pa. Stat. Ann. § 10231.1308(a)(1) (by Smoking Medical Marijuana in violation of 35 Pa. Stat. Ann. § 10231.304(b)(1)) Graded as an M3.

Note that a second or subsequent violation increases penalties and should be charged under(a)(2):

Count 1: Violation of the Medical Marijuana Act 35 Pa. Stat. Ann. § 10231.1308(a)(2) (by Smoking Medical Marijuana in violation of 35 Pa. Stat. Ann. § 10231.304(b)(1) second violation)

Here are several cross-reference sections for illegal acts that can be charged in this manner under the MMA.

Smoking Medical Marijuana - 35 Pa. Stat. Ann. § 10231.304(b)(1)

Failure to Possess Identification Card while In Possession of Medical Marijuana - 35 Pa. Stat. Ann. § 10231.303(b)(7).

Failure to Keep in Original Dispensary Packaging - 35 Pa. Stat. Ann. § 10231.303 (b)(6)

Growing Without Permit - 35 Pa. Stat. Ann. § 10231.304(b)(3)

Incorporating into Edible Form without an Ingestion Need -35 Pa. Stat. Ann. § 10231.304(b)(2)

Also include companion charges under the Controlled Substance, Drug, Device and Cosmetic Act as a noncompliant card holder loses all the possession protections of lawful users. With the most common charges being:

Count 2: Possession of a Small Amount of Marijuana – 35 P.S. § 780-113(a)(31)(ii)

Count 2: Possession of Drug Paraphernalia – 35 P.S. § 780-113(a)(32)

Finally, the MMA also has standalone specific charges for certain illegal behaviors:

Criminal diversion of medical marijuana by practitioners - 35 Pa. Stat. Ann. § 10231.1301 M1

Criminal diversion of medical marijuana 35 Pa. Stat. Ann. § 10231.1302 M1

Criminal retention of medical marijuana 35 Pa. Stat. Ann. § 10231.1303 M3

Criminal diversion of medical marijuana by patient or caregiver 35 Pa. Stat. Ann. § 10231.1304 (First Offense M2, Second or Subsequent M1)

Falsification of identification cards 35 Pa. Stat. Ann. § 10231.1305 (First Offense M2, Second or Subsequent M1)

Adulteration of medical marijuana 35 Pa. Stat. Ann. § 10231.1306 (First Offense M2, Second or Subsequent M1)

These charges should be charged just using the violation section as the penalties are already incorporated in the section itself. For example:

Count 1: Criminal diversion of medical marijuana by patient or caregiver 35 Pa. Stat. Ann. § 10231.1304 (M2)

Upon locating contraband:

- Seize and secure evidence
- Arrest, search and secure suspects
- Control suspects access to phones
- Advise Miranda rights
- Inventory, video, photograph located evidence at the scene
- Tow and impound the vehicle
- Obtain search warrants when necessary to further investigate
- Complete NCIC, CLEAN, Criminal History, and EPIC checks
- Contact Region Strike Force, BNI Attorney General, etc.
- Gather all relevant documents from the vehicle and suspects
- Complete a thorough interview
- Potential rollover/informant for controlled buy
- Seize any drug related cash, check serial numbers, prepare case against the cash by proving the drug link

Physical evidence collection:

- Wear gloves and a mask
- Photograph or video, especially in any unusual locations
- Mark, initial, and seal evidence in the proper container
- Originating officer is responsible for collection of evidence
- Have at least two officers record all cash seized and any large amounts of contraband
- Store evidence/contraband in a secure area with limited access

MAIN DRUGS OF ABUSE

Marijuana THC (Delta-9-Tetrahydrocannabinol)

A Schedule I controlled substance. Popular drug of abuse among adults and juveniles, second only to alcohol. Affects problems with memory and learning, distorted perception, difficulty in thinking and problem-solving, loss of coordination, time distortions, merriment, happiness, and even exhilaration at high doses. Physical signs are dizziness, sedation, bloodshot eyes, increased heart rate, coughing from lung irritation, increased appetite, and increased blood pressure (although prolonged use may cause a decrease in blood pressure), nausea, facial flushing, dry mouth, and tremors.

35 Pa. Stat. Ann. § 10231.303(b)(6) Medical marijuana that has not been used by the patient shall be kept in the original package in which it was dispensed.

Street names

Weed, Aunt Mary, BC bud, Blunts, Boom, Chronic, Dope, Gangster, Ganja, Grass, Hash, Herb, Hydro, Indo, Joint, Kif, Mary Jane, Mota, Pot, Reefer, Sinsemilla, Skunk, Smoke
When laced with crack, known as a "Geek" joint When laced with cocaine, known as "Primos"
When laced with formaldehyde, known as "Illies"
When mixed with Crack, Tobacco and PCP in hollowed out cigar, known as "Wack-a-Mo"

Marijuana concentrates

Marijuana concentrates contain extraordinarily high THC levels that could range from 40 to 80 percent. This form of marijuana can be up to four times higher in THC content than high grade or top shelf marijuana, which normally measures around 20 percent THC levels.

Many methods are utilized to convert or “manufacture” marijuana into marijuana concentrates. One method is the butane extraction process. This process is particularly dangerous because it uses highly flammable butane to extract the THC from the cannabis plant. Given the flammable nature of butane, this process has resulted in violent explosions.

Street names (concentrates)

710 (the word “oil” flipped and spelled backwards), Wax, Ear Wax, Honey Oil, Budder, Butane Hash Oil, Butane Honey Oil (BHO), Shatter, Dabs (dabbing), Black Glass, Errol.

Methods of ingestion

Smoke/vape, most popular method, greatest effect within minutes lasts 2-3hrs. Blunts, vape devices with flavoring to hide the odor, etc.

Eaten, hashish brownies, delayed effects due to ingestion

Concentrates can be mixed with various food or drink products to be consumed orally

Paraphernalia

rolling papers, cigars, small pipes, clips, forceps, Ziploc bags, grinders, etc.

Concentrates

water or oil pipes, various vape devices, many users prefer the

E-cigarette/vaporizer because it is smokeless, sometimes odorless, and easy to hide or conceal

K2/spice

K2 and spice are just two of the many trade names or brands for synthetic designer drugs that are intended to mimic THC, the main psychoactive ingredient of marijuana. These designer synthetic drugs are from the synthetic cannabinoid class of drugs that are often marketed and sold under the guise of “herbal incense” or “potpourri.” These products are labeled “not for human consumption”, in an attempt to shield the manufacturers, distributors, and retail sellers from criminal prosecution. The vast majority, of synthetic cannabinoids are manufactured in Asia. Forty-three substances are specifically listed as Schedule I substances under the controlled substances act either through legislation or regulatory action. In addition, there are many other synthetic cannabinoids that meet the definition for “cannabimimetic agent” under the controlled substances act and thus are Schedule I substances. Synthetic cannabinoids are marketed as an alternative to THC; however, they are much more potent and have been shown to cause side effects that are more severe than those reported from THC.

Street names

Spice, K2, Blaze, Red X Dawn, Paradise, Demon, Black Magic, Spike, Mr. Nice Guy, Ninja, Zohai, Dream, Genie, Sence, Smoke, Skunk, Serenity, Yucatan, Fire, and Crazy Clown, "Fake Marijuana"

Methods of ingestion/paraphernalia

Same as marijuana, smoking, vaping, edible

Cocaine (powder)

Proper name - cocaine hydrochloride, a Schedule II controlled substance, Colombia produces about 90 percent of the cocaine powder reaching the United States. Most potent of natural stimulants, 15-20% pure, after cut, on the street. Cocaine is usually distributed as a white, crystalline powder, it is cut with many products giving it a tan or off-white appearance. Effects of cocaine include increased blood pressure and heart rate, dilated pupils, insomnia, loss of appetite, erosion of the upper nasal cavity.

Street names

Snow, Blow, Powder, Coke, Toot, Nose Candy, "C", Dust, Star, Flake, Coca, Soda Cot

Methods of ingestion

Snort - two to three minutes to get into system, high lasts 20-90 minutes Smoke - freebase, using solvent, may be used to lace marijuana or tobacco Inject - thirty seconds to get into system, high lasts 20-30 minutes

Paraphernalia

Snow seal paper - wax coated, sealed by folding

Small Ziploc bags, baggy corners, vials, straws, rolled currency, syringes Razor blades, mirror, small spoons, small scales

Cocaine (crack)

Same info as cocaine (powder) processed in a method called freebasing using ammonia or sodium bicarbonate and water. More volatile method is to use ether. The cocaine hydrochloride is heated to remove the hydrochloride and forms the crack cocaine. More intense high than powder, but shorter duration. One of the most popular selling drugs due to addiction, packaging, size, and availability. Usually off-white in color, but may be any color

Street names

Crack, Rock, Base

"20", "40", "60", "100" - money designation

Methods of ingestion

smoking with high heat

Paraphernalia

Crack pipes - small, with screen, smoking stems, soda can with extra hole inside Small Ziploc bags, heat seal bags, vials, baking soda, razor blades, mirror

Heroin

Semi-synthetic drug made from opium base. A Schedule I controlled substance.

Semi-synthetic opioids are synthesized from naturally occurring opium products, such as morphine and codeine, and include heroin, oxycodone, hydrocodone, and hydromorphone.

Physical signs, extreme slowed physical activity, constriction of the pupils, flushing of the face and neck, constipation, nausea, vomiting, and slowed breathing.

Street names

Big H, Black Tar, Chiva, Hell Dust, Horse, Negra, Smack, and Thunder

Methods of ingestion

Inject - mainline -most common, skin popping - slower, less intense high

Smoke - gaining in popularity, may be used to lace marijuana or tobacco reduces effect

Snort

Paraphernalia

Snow seal paper - wax coated, sealed by folding, special markings help identify source.

Small Ziploc bags, syringes, spoons, cotton balls, belt or rope, balloons

Fentanyl

Fentanyl is a potent synthetic opioid drug approved by the food and drug administration for use as an analgesic (pain relief) and anesthetic. It is approximately 100 times more potent than morphine and 50 times more potent than heroin. Fentanyl is a Schedule II narcotic. Fentanyl, like other commonly used opioid analgesics (e.g., morphine), produces effects such as relaxation, euphoria, pain relief, sedation, confusion, drowsiness, dizziness, nausea, vomiting, urinary retention, pupillary constriction, and respiratory depression.

Street names

Apache, China Girl, China Town, Dance Fever, Friend, Goodfellas, Great Bear, He-Man, Jackpot, King Ivory, Murder 8, and Tango & Cash

Methods of ingestion

Fentanyl can be injected, snorted/sniffed, smoked, taken orally by pill or tablet, and spiked onto blotter paper. Fentanyl patches are abused by removing its gel contents and then injecting or ingesting these contents. Patches have also been frozen, cut into pieces, and placed under the tongue or in the cheek cavity.

PCP (phencyclidine)

Proper name - Phenylcyclohexyl Piperidine

Shortened name - Phencyclidine a Schedule II controlled substance.

Produces some effects of depressants, stimulants, and hallucinogens. Produces impaired movements and speech. Inability to feel pain, increased strength due to adrenalin.

Forms: liquid, tablet, capsule, powder

Legal - white powder; street - tan to brown powder

Sernylan - when legally used as veterinary anesthetic

Ketamine is an analog of PCP

Street names

Dust, animal tranquilizer, peace pill

When cigarette is dipped in PCP; called Kools, Super Kools, Sherms (dark)

Methods of ingestion

Smoked when cigarette dipped in PCP; or mixed with mint, parsley, oregano or marijuana

Skin absorption (transdermal)

Snorted, taken in capsule or tablet form, injected

Paraphernalia

Same as heroin

Same as cocaine

Same as meth eye drops

Perfume bottles

Methamphetamine

Proper name - Methamphetamine Hydrochloride, a Schedule II controlled substance. "Ice" is methamphetamine with the hydrochloride removed (like crack). Normally a tan, granulated powder, synthetic CNS stimulant. Chronic meth users can exhibit violent behavior, anxiety, confusion, insomnia, and psychotic features including paranoia, aggression, visual and auditory hallucinations, mood disturbances, and delusions such as the sensation of insects creeping on or under the skin. Users show dramatic weight loss, rapid mood swings, foul breath odor, develop rapid tolerance, tooth loss evident, driver's license can show extreme changes in facial features.

Street names

Meth, Crank, Batu, Bikers Coffee, Black Beauties, Chalk, Chicken Feed, Crystal, Glass, Go-Fast, Hiropon, Ice, Ethlies Quick, Poor Man's Cocaine, Shabu, Shards, Speed, Stove Top, Tina, Trash, Tweak, Uppers, Ventana, Vidrio, Yaba, Yellow Bam

Methods of ingestion

Meth is swallowed, snorted, injected, or smoked. To intensify the effects, users may take higher doses of the drug, take it more frequently, or change their method of intake.

Paraphernalia

Small Ziploc bags, baggy corners, vials, straws, razor blades, mirror, syringes

LSD (Lysergic Acid Diethylamide)

LSD is a potent hallucinogen that has a high potential for abuse and currently has no accepted medical use in treatment in the United States. LSD is a Schedule I substance. The physical effects include, dilated pupils, higher body temperature, increased heart rate and blood pressure, sweating, loss of appetite, sleeplessness, dry mouth, and tremors. Hallucinogen persisting perception disorder, which may include fragmentary recurrences of certain aspects of the drug experience or “flashbacks” have been reported days, and even months, after taking the last dose. In the form of pills, liquid, sugar cube, paper, parsley effective dose is only 20-80 micrograms; can last 10-12 hours.

Street names

Acid, Blotter, Trip, Sid, Paper, Dots, Mellow Yellow, and Windowpane
Character printed on blotter paper

Methods of ingestion

Skin absorption, under hatband or cloth wrapped around head
Headband soaked in acid solution and worn
Ingest as a pill, orally - held under tongue

Paraphernalia

Blotter paper - 3x3, divided into squares (different colors and designs)
Bottles, plastic wrap, aluminum foil, sugar cubes

Amphetamines

Amphetamines can look like capsules, pills, or powders, a Schedule II controlled substance. Common prescription amphetamines include amphetamine and dextroamphetamine, (Adderall), dextroamphetamine (Dexedrine), lisdexamphetamine (Vyvanse™) and methamphetamine (Desoxyn®). The effects of amphetamines are similar to cocaine; however their onset is slower, and their duration is longer. Physical effects of amphetamine use include increased blood pressure and pulse rates, insomnia, loss of appetite, and physical exhaustion. Chronic abuse produces a psychosis that resembles schizophrenia and is characterized by paranoia, picking at the skin, preoccupation with one's own thoughts, and auditory and visual hallucinations. Violent and erratic behavior is frequently seen among chronic users of amphetamines.

Street names

Bennies, Black Beauties, Uppers

Methods of ingestion

swallow, chew, snort, injection

Paraphernalia

same as powder cocaine and heroin

MDMA (3,4-methylenedioxy-methamphetamine)

MDMA is a Schedule I drug. MDMA causes changes in perception, including euphoria and increased sensitivity to touch, energy, sensual and sexual arousal, need to be touched, and need for stimulation. Seized MDMA in the U.S. is primarily manufactured in, and smuggled across U.S. borders from, clandestine laboratories in Canada and, to a lesser extent, the Netherlands. MDMA is mainly distributed in tablet form. MDMA tablets are often sold with logos, creating brand names for users to seek out. The colorful pills are often hidden among colorful candies. MDMA is also distributed in capsules, powder, and liquid forms. Some unwanted psychological effects include, confusion, anxiety, depression, paranoia, sleep.

Problems, and drug craving

Some unwanted physical effects are, muscle tension, tremors, involuntary teeth clenching, muscle cramps, nausea, faintness, chills, sweating, and blurred vision.

Street names

Ecstasy, Molly, Adam, Beans, Clarity, Disco Biscuit, E, Eve, Go, Hug Drug, Lover's Speed, Peace, STP, X, and XTC

Method of ingestion

oral, snorted, injection (rarely)

Paraphernalia

users often have chew toys to avoid the teeth grinding.

Psilocybin

Psilocybin is a chemical obtained from certain types of fresh or dried mushrooms. It is a Schedule I controlled substance, effects last 4-6 hours. Fresh mushrooms have white or whitish-gray stems; the caps are dark brown around the edges and light brown or white in the center. Dried mushrooms are usually rusty brown with isolated areas of off-white. Hallucinations and an inability to discern fantasy from reality, panic reactions can occur.

Street names

Magic Mushrooms, Mushrooms, Shrooms

Method of ingestion

orally or brewed as a tea

DMT (Dimethyltryptamine)

DMT is structurally similar to psilocybin and is known to produce short acting and intense visual hallucinations. A Schedule I controlled substance. Effects may include a 'rush', feeling happy and excited, changes in mood, increased sensitivity to bodily sensations (body aches, tingles, feelings of pain and pleasure, warmth and fatigue), increased heart rate and blood pressure, small pupils, anxiety and confusion, intense visual hallucinations, dissociation.

When produced synthetically, DMT is a white crystalline powder.

Street names

Dimitri, Deems, the spirit molecule, Changa, Fantasia, the glory, the sacrament

Method of Ingestion

vaped or smoked in a pipe, drunk as part of a brew, snorted, or injected

Bath salts

Synthetic stimulants often referred to as "bath salts" are from the synthetic cathinone class of drugs. Synthetic cathinones are central nervous stimulants and are designed to mimic effects similar to those produced by cocaine, methamphetamine, and MDMA. A Schedule I controlled substance. Effects are euphoria, alertness, confusion, acute psychosis, agitation, combativeness, aggressive, violent, and self-destructive behavior. Physical effects are rapid heartbeat; hypertension; hyperthermia; prolonged dilation of the pupil of the eye, teeth grinding, sweating, headaches, palpitations, seizures, as well as paranoia, hallucinations, and delusions.

Street names

Bliss, Blue Silk, Cloud Nine, Drone, Energy-1, Ivory Wave, Lunar Wave, Meow Meow, Ocean Burst, Pure Ivory, Purple Wave, Red Dove, Snow Leopard, Stardust, Vanilla Sky, White Dove, White Knight, White Lightning

Method of ingestion

Bath salts are usually ingested by sniffing/snorting. They can also be taken orally, smoked, or put into a solution and injected into veins.

Ketamine

Ketamine is produced commercially in several countries, including the United States. Most of the Ketamine illegally distributed in the United States is diverted or stolen from legitimate sources, particularly veterinary clinics, or smuggled into the United States from Mexico.

Ketamine is a Schedule III drug. Ketamine is a dissociative anesthetic that has some hallucinogenic effects. It distorts perceptions of sight and sound and makes the user feel disconnected and not in control. Ketamine comes in a clear liquid and a white or off-white powder. Ketamine produces hallucinations. Users experience involuntarily rapid eye movement, dilated pupils, salivation, tear secretions, and stiffening of the muscles.

Street names

Cat Tranquilizer, Cat Valium, Jet K, Kit Kat, Purple, Special K, Special La Coke, Super Acid, Super K, Vitamin K

Methods of ingestion

snorting, injection

Paraphernalia

same as powder cocaine, same as heroin

Khat

Khat is a flowering evergreen shrub that is abused for its stimulant-like effect. Khat has two active ingredients, cathine and cathinone. Khat is native to East Africa and the Arabian Peninsula, where the use of it is an established cultural tradition for many social situations. The chemicals found in khat are controlled under the controlled substances act. Cathine is a Schedule IV stimulant, and cathinone is a Schedule I stimulant under the controlled substances act. Quickly loses its potency over time after harvest. Khat is a flowering evergreen shrub. Khat that is sold and abused is usually just the leaves, twigs, and shoots of the khat shrub. Khat is typically chewed like tobacco, then retained in the cheek. Khat can induce manic behavior with grandiose delusions, paranoia, nightmares, hallucinations, and hyperactivity. Chronic Khat abuse can result in violence and suicidal depression.

Street names

Kat, Abyssinian Tea, African Salad, Catha, Chat, and Oat

Methods of ingestion

Orally by chewing or made into a tea. Can also be smoked.

GHB (Gamma-Hydroxybutyric acid)

GHB is a CNS depressant which causes euphoria, drowsiness, decreased anxiety, confusion, and memory impairment. The major source of GHB on the street is through clandestine synthesis by local operators, a Schedule I controlled substance. Xyrem® (which is sodium oxybate) is the trade name of the FDA-approved prescription medication, a Schedule III drug. GHB and its analogues are misused for their ability to increase libido, suggestibility, passivity, and to cause amnesia – traits that make victims vulnerable to sexual assault and other criminal acts. GHB takes effect in 15 to 30 minutes, and the effects last 3 to 6 hours. Low doses of GHB produce nausea. At high doses, GHB overdose can result in, unconsciousness, seizures, slowed heart rate, greatly slowed breathing, lower body temperature, vomiting, nausea, coma, death.

Street names

GHB, Easy Lay, G, Georgia Home Boy, Goop, Grievous Bodily Harm, Liquid Ecstasy, Liquid X, and Scoop

Methods of ingestion

taken orally usually in liquid form

Rohypnol (flunitrazepam)

Rohypnol® is a trade name for flunitrazepam, a CNS depressant that belongs to a class of drugs known as benzodiazepines. Rohypnol® is a Schedule IV substance under the controlled substances act. Rohypnol® is not approved for manufacture, sale, use, or importation to the United States. Rohypnol® is manufactured as an oblong, olive green tablet with a speckled blue core that when dissolved in light-colored drinks will dye the liquid blue. However, generic versions of the drug may not contain the blue dye. Often referred to as a “date rape” drug. Like other benzodiazepines, Rohypnol causes drowsiness, sleep, decreased anxiety, and amnesia, slurred speech, loss of motor coordination, weakness, headache, and respiratory depression.

Street names

Circles, Forget Pill, Forget-Me-Pill, La Rocha, Lunch Money Drug, Mexican Valium, Pingus, R2, Reynolds, Roach, Roach 2, Roaches, Roachies, Roopies, Robutal, Rochas Dos, Rohypnol, Roofies, Rophies, Ropies, Roples, Row-Shay, Ruffies, and Wolfies

Methods of ingestion

orally, crushed then snorted, or dissolved in a liquid

Kratom

Consumption of its leaves produces both stimulant effects (in low doses) and sedative effects (in high doses), and can lead to psychotic symptoms, and psychological and physiological dependence. Kratom leaves contain two major psychoactive ingredients (mitragynine and 7-hydroxymitragynine). Kratom’s effects on the body include nausea, itching, sweating, dry mouth, constipation, increased urination, tachycardia, vomiting, drowsiness, and loss of appetite. Users of Kratom have also experienced anorexia, weight loss, insomnia, seizure, and hallucinations. Kratom is not controlled under the controlled substances act. The FDA has not approved Kratom for any medical use.

Street names

Maria Pastora, Sally-D, and Salvia

Methods of ingestion

Mostly abused by oral ingestion in the form of a tablet, capsule, or extract. Kratom leaves may also be dried or powdered and ingested as a tea, or the Kratom leaf may be chewed. Can also be smoked or used in vape devices.

REPORT WRITING

Good, well organized and complete field notes, written neatly in extensive detail make report writing of even a large investigation easily manageable.

Write report in chronological order

- Initial observation of the vehicle in motion
- Probable cause/reason for stop
- Observation of stop sequence
- Approach of vehicle
- Direct contact with vehicle and driver after stop
- Interview
- Method/justification for consent, warrant, or inventory search
- Method of search and personnel involved
- Detection, location and collection of physical evidence
- Arrest/disposition of suspect(s)
- Seizure, description and disposition of evidence, vehicle, cash, etc.

Describe actions of suspect(s), and describe, in detail, any “furtive movements”

Furnish a receipt for any items of value seized

Keep a rolling resume

- An anecdotal and statistical written log of training, criminal patrol, enforcement actions taken, and any contraband arrests that result.
- Note brief description of each vehicle and occupants stopped on each patrol
- Always complete enforcement action
- Use to be proactive in pretextual or profiling stop claims

Contact El Paso Intelligence Center (EPIC)

Obtain access through EPIC at <https://esp.usdoj.gov>

EPIC Watch: 888-USE-EPIC (888-873-3742)

Seizure criteria for data base input at least:

Marijuana:	10 pounds
Cocaine:	1 pound
Crack Cocaine:	1 ounce
Heroin:	1 gram
Methamphetamine:	28 grams
LSD:	any amount
Currency:	\$1,000 or more drug related

OFFICER SAFETY ISSUES

Assess risk of each stop

- What is the nature of the offense involved?
- How many occupants are readily visible?
- What is the behavior of the occupants?
- What weapons are involved?
- What type of vehicle is involved?
- What environmental hazards exist?
- What are your strengths in this situation?
- Are things still the same as I thought they were when this started?

Drug-related officer slaying

- Drug buy/bust – 33%
- Drug warrants/raids – 32%
- Other enforcement (including vehicle stops) – 30%
- Ambushes – 5%

Officers killed

- Assigned to single officer vehicle – 49%
- Assigned to two-officer vehicle – 14%
- Performing detective duties – 23%
- Off duty – 14%

Patterns of the killers of police officers

- Diagnosed as “antisocial” types – 56%
- Had “dependency” personality disorder – 23%
- Experience with weapons

Procedural errors leading to officer slaying

- Failure to call for backup
- Acting alone
- Failure to search a suspect completely Improper use of handcuffs
- Failure to draw weapon when approaching dangerous suspects
- Failure to adhere to standard operating procedures

Tactical considerations

- Make radio contact prior to stop
- Be cautious about what is said on the radio
- Keep overheads and wigwags off until violator's vehicle is close
- Continuously monitor actions of all occupants
- Always think weapons
- Watch for contraband or weapons that may be thrown out
- Control the environment for the stop to the extent possible
- Maintain adequate distance for added protection
- The patrol car may need to be repositioned
- Watch for brake lights staying on or backup lights coming on
- Anticipate survival concerns
- Stay alert for escort vehicle
- Special challenges from large rigs
- Be aware of new information revealed during a stop that demands alteration and/or intensifying of tactics

Danger signs and red flags

- Hidden hands
- Repetitious inquires
- Conspicuous ignoring of officer
- Looking around
- Excessive emotional attention
- Exaggerated movement
- Physical crowding
- Attempting to turn you by his/her movements
- Sudden cooperation
- Ceasing all movement suddenly
- Pre-attack postures

Miscellaneous officer safety alerts

- Needles placed in vehicle
- Booby trapped package or vehicle
- Be alert for door or trunk movement
- Watch for tail vehicle
- Be alert as to where suspect is leading before stopping
- Dangers when field testing
- Handguns concealed in various devices