STOCKTON | STUDENT UNIVERSITY | AFFAIRS

ANNUAL NOTIFICATION

DRUG AND ALCOHOL PREVENTION PROGRAMS

JANUARY 22, 2019



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DRUG AND ALCOHOL POLICY STATEMENT:

Stockton University recognizes the serious effects of the misuse of lawful drugs, the possession and use of unlawful drugs and the abuse of alcohol on the performance and well-being of its students and employees. While respecting the independence of its community members, the University requires that all members of the campus community comply with local, state, and federal laws, including those that govern the use of alcohol and other drugs. To promote compliance and to support a healthy campus culture, the University has implemented a Drug and Alcohol Prevention Program (DAAPP) to: (a) to provide relevant and effective educational programs about the health risks associated with the abuse of alcohol and other drugs; (b) to articulate common standards for conduct and legal and institutional sanctions for violations; and (c) to provide access to support and resources for students and employees.

The University's drug and alcohol program is guided by the Drug Free Schools and Campuses Regulations (34 CFR Part 86) of the Drug Free Schools and Communities Act ("DFSCA"). DFSCA requires an institution of higher education such as Stockton University, to certify that it has implemented programs to prevent the abuse of alcohol and to prevent the abuse of alcohol and use, and /or distribution of illicit drugs by student and employees on University premises and as a part of any sanctioned University activities.

I. Annual Notification of the Drug and Alcohol Abuse Prevention Program (DAAPP)

An annual notification will be sent to all students and employees. The notification will include:

- A. Standards of conduct that clearly prohibit, at minimum, the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees;
- B. A description of appropriate legal sanctions for violation of federal, state and local laws for the unlawful possession or distribution of illicit drugs and alcohol;
- c. A description of the health risks associated with the abuse of illicit drugs or alcohol use;
- D. A list of drug and alcohol programs (evaluations, treatment and counseling) that are available to employees or students;
- E. A clear statement that the University will impose disciplinary sanctions on students and employees for violations of the standards of conduct;
- F. Identification as to whom will be maintaining the DAAPP document;
- G. A description of people that the DAAPP will be sent to (students, employees.)

II. Standards of Conduct

- A. Rights. Stockton University recognizes members of the University community as full-fledged citizens bearing the rights and responsibilities of all other members of American society. In support of the University's mission, these basic rights include freedom to learn, free speech, peaceful assembly, association, and/or protest, and also freedom from personal force, violence, abuse, or threats of the same. As a citizen, each member of the campus community also has the right to organize his or her own behavior, as long as it supports the University's educational mission and does not violate laws or interfere with the rights of others or the educational process. The University is not a sanctuary from the law, and the University does not stand in loco parentis.
- B. Campus Conduct Code, Civil Law, and Civil Authorities. Stockton is dedicated to the dissemination of knowledge, the pursuit of truth, the development of students, and the general well-being of society. The information and Code of Conduct statements enumerated in this policy contain essential principles that promote civil and respectful behavior that are fundamental to a realization of these goals. These principles are expressed through five values: integrity, community, social justice, respect, and responsibility. It is the responsibility of all Stockton community members to know the Code of Conduct, uphold the values, and refrain from prohibited conduct. See <u>Campus Conduct Code Policy File Number 1-55</u>.
- c. Responsibility: University community members assume personal responsibility for civil conduct to themselves, to others, and to the community. Behaviors that violate this value include but are not limited to:
 - a) Alcohol: Possession, consumption, distribution, or attempted distribution of alcoholic beverages in contravention of federal, state, or local laws or University regulations or knowingly being present at the time of prohibited conduct while on University premises or while on University business.

- 2. b) Drugs: Unauthorized possession, use, misuse, transfer, distribution or attempted distribution of legal drugs, illegal drugs, prescription drugs, controlled dangerous substances, or drug paraphernalia that are prohibited by state or federal laws or knowingly being present at the time of the prohibited conduct, while on University premises or while on University business. Also prohibited is the use of any legally obtained drug, including alcohol, to the point where such use adversely affects an employee's job performance.
- 3. c) Failure to Comply: Refusal to comply with a request, directive, or order from a University official such as campus police officers, members of the University administrative staff or other authorized persons performing their official University duties and responsibilities.
- 4. d) Other Policies: Violations of established policies, procedures, or regulations officially promulgated by the University and/or the State of New Jersey.

Drug and Alcohol Free Workplace: <u>stockton.edu/policy-procedure/documents/policies/VI-13.pdf</u> Campus Conduct Code: <u>stockton.edu/policy-procedure/documents/policies/I-55.pdf</u>

POLICY REVIEW

As an institution of higher education whose primary purpose is the pursuit of academic excellence, Stockton University emphasizes development of the whole student, personally, socially and educationally. To that end, the following is an overview of several major University policies that students and all other community members are expected to be acquainted with and abide by. In addition to criminal penalties, University disciplinary action may be imposed against all violators as warranted or appropriate. University policies are based on the philosophy that community life at Stockton must demonstrate a respect for others as well as uphold the laws of the State of New Jersey. To review these policies, and others in full detail, please refer to the University's Policy and Procedure website at stockton.edu/policy-procedure/index.html.

ALCOHOL POLICY

The University has established a policy regarding the possession, consumption, sale and/or distribution of alcoholic beverages on University property. It follows that the academic mission is at the forefront. Co-curricular and other activities must enhance, and not detract from, academic pursuits of the community. The policy is designed to be consistent with the laws of the State of New Jersey. Violators of the law are subject to University disciplinary procedures and prosecution by local and/or state law enforcement officials. For additional information and/or questions, please contact the Office of Alcohol & Drug Education, located in J-204, or call 609-652-4701. Students can also seek peer support by contacting the Drug & Alcohol Peer Educators located in the Wellness Center, J-204.

DRUG POLICY

All laws at both the state and federal level regarding possession, use, sale and/or distribution of narcotic drugs or controlled dangerous substances apply on campus to all persons. The University has adopted a zero tolerance policy for offenders of these laws and violators will be prosecuted to the fullest extent of the law. For information, contact the Office of Alcohol & Drug Education located in J-204 or call 609-652-4701.

DRUG AND ALCOHOL PREVENTION PROGRAMS

Alcohol & Drug 101: Alcohol & Drug Peer Educators run an Alcohol & Drug 101 class on campus twice during each month during the semesters. The purpose of the class is to educate students on the realities of alcohol and drugs in the college environment. The peer educators cover a number of topics in this class including intoxication rate factors, alcohol poisoning, general information on the realities of drug usage, etc. Students participate in this class through interactive activities regarding their own experiences and knowledge on the topic of alcohol and drugs.

GEN2215: Peer Education-Drugs and Alcohol: Offered annually in the fall and spring semesters, this four credit course is designed for students to gain real world *experience* in providing alcohol/drug education, intervention, and counseling; and peer education programming on the college campus as well as in the surrounding community. This class provides experience in developing peer education programming on the topics of alcohol and drug education on the college campus. Students will become knowledgeable on relevant alcohol and drug issues such as, drinking & driving, distracted driving, binge drinking, drug abuse, college cultural influences, peer pressure, related interpersonal violence issues, legal issues, and other addictive behaviors. This course also satisfies the pre-requisite to becoming a Peer Education leader within the Alcohol and Drug Education Program at Stockton University.

Green Dot Bystander Strategy: A Green Dot is any behavior, choice, word, or attitude that promotes safety for all of us and communicates zero tolerance for violence. Stockton University has several training courses throughout the semester which teach students and employees how to intervene safely to reduce violence and sexual assaults on our campus and at parties where alcohol and drugs are often involved.

TIPs (Training for Intervention Procedures) Training: The Alcohol & Drug Peer Educators, alongside other students on campus, are TIPs trained each year. The training consists of teaching students how to make tough decisions when it comes to alcohol use. The training addresses drinking usage and the risk factors involved. The program is specified for the college community to make it more relatable for students.

Narcan Training: The Alcohol & Drug Peer Educators provide students with the opportunity to become trained in Narcan each year. During this training, a speaker will provide information on how to safely use Narcan in the event of an opiate overdose. With the rise in opiate use, this training has become an important aspect of reducing the amount of lives lost. Each training typically lasts around two hours and discusses the impacts of opiate use, what to expect in case of an emergency opiate overdose and how to intervene effectively.

Recovery Housing: Beginning Fall 2017, Stockton University offers students recovery housing. This housing is aimed at assisting students who are currently in recovery by offering them resources and support. The housing will gives students the opportunity to make connections in a healthy, sober, social scene with the assistance of peer support and highly trained licensed addiction specialists. Students within recovery housing will have access to a 12-month housing option, addictions counseling, weekly focused group sessions, evening and weekend programs and events to help them achieve success in their academic pursuits. Step-up Training: Throughout the year, students are offered bystander intervention training through the Step-up programming. This training helps students be proactive in helping others. Step-up's focus is to raise awareness of helping behaviors, increase motivation to help, develop skills and confidence when responding to problems or concerns and ensure the safety and wellbeing of oneself and others.

Lolla-No-Booza: Lolla-No-Booza is programming hosted yearly by the Alcohol & Drug Peer Educators. This event is held on campus the Thursday before Halloween. The purpose of this event is to provide an entertaining and alcohol- and drug-free event for students. This is an alternative option for students on the most popular drinking night of the year in order to prevent binge drinking and DUIs. The event features games, prizes, live entertainment and food, which is fully funded by donations solicited by the peer educators each year.

Step Up! Stockton: Step UP! is a comprehensive bystander intervention program that teaches: • The 5 Decision Making Steps • Other Factors that Affect Helping, including Perspective Taking • Strategies for Effective Helping • The S.E.E. Model: Safe; Early; Effective • Warning Signs, Action Steps and Resources.

HERO Campaign: The HERO Campaign for Designated Drivers®, seeks to end drunk driving tragedies nationwide by promoting the use of safe and sober designated drivers. Our goal is simple: to register one million designated drivers and make having a designated driver be as automatic as wearing a seatbelt. The HERO Campaign is a federally registered, 501(c)(3) non-profit organization that partners with law enforcement agencies, schools and colleges [Stockton University], bars, taverns and restaurants, the U.S. Navy, professional sports teams, state divisions of highway safety and community chapters across the country.

TREATMENT SERVICES AVAILABLE

Al-Anon	al-anon.alateen.org
Alcoholics Anonymous AA	609-641-8855
Atlantic County Atlantic Prevention Resources	609-272-0101
AtlantiCare Behavioral Health	609-272-0909
Recovery Centers of America at Lighthouse	800-RECOVERY
Narcotics Anonymous	
Promises New Jersey	promises.com, 609-623-0110

III. Legal Sanctions: The goal of the sanctions is to reinforce the University's commitment to a positive and safe learning environment consistent with acceptable social standards, and in accordance with federal, state and local laws.

A. Federal

CHART 1 FEDERAL TRAFFICKING PENALTIES

DRUG/SCHEDULE	QUANTITY	PENALTIES	QUANTITY	PENALTIES
Cocaine (Schedule II)	500–4999 grams mixture	First Offense: Not less	5 kgs or more mixture	First Offense: Not less
Cocaine Base (Schedule II)	28–279 grams mixture	than 5 yrs, and not more than 40 yrs. If death or	280 grams or more mixture	than 10 yrs, and not more than life. If death or serious
Fentanyl (Schedule II)	40–399 grams mixture	serious injury, not less than	400 grams or more mixture	injury, not less than 20 or
Fentanyl Ana- logue (Schedule I)	10–99 grams mixture	20 or more than life. Fine of not more than \$5 million if an individual, \$25 million if	100 grams or more mixture	more than life. Fine of not more than \$10 million if an individual, \$50 million if not
Heroin (Schedule I)	100–999 grams mixture	not an individual.	1 kg or more mixture	an individual.
LSD (Schedule I)	1–9 grams mixture	than 10 yrs, and not more than life. If death or serious	10 grams or more mixture	Second Offense: Not less
Methamphetamine (Schedule II)	5–49 grams pure or 50–499 grams mixture		50 grams or more pure or 500 grams or more mixture	than 20 yrs, and not more than life. If death or serious injury, life imprisonment.
PCP (Schedule II)	10–99 grams pure or 100–999 grams mixture	Fine of not more than \$8 million if an individual, \$50 million if not an individual.	100 gm or more pure or 1 kg or more mixture	Fine of not more than \$20 million if an individual, \$75 million if not an individual.
				2 or More Prior Offenses: Life imprisonment. Fine of not more than \$20 million if an individual, \$75 million if not an individual.
		PENALTIES		
Other Schedule I & II drugs (and any drug	Any amount	First Offense: Not more that or more than life. Fine \$1 mill	in 20 yrs. If death or serious inj ion if an individual, \$5 million	jury, not less than 20 yrs, if not an individual.
product containing Gamma Hydroxybutyric Acid)			than 30 yrs. If death or seriou	
Flunitrazepam (Schedule IV)	1 gram	ment. Fine \$2 million if an in	dividual, \$10 million if not an i	ndividual.
Other Schedule III drugs	Any amount	First Offense: Not more tha 15 yrs. Fine not more than \$5	in 10 years. If death or serious 00,000 if an individual, \$2.5 mi	injury, not more that illion if not an individual.
		Second Offense: Not more Fine not more than \$1 million	than 20 yrs. If death or seriou if an individual, \$5 million if n	is injury, not more than 30 yrs. iot an individual.
All other Schedule IV drugs	Any amount		in 5 yrs. Fine not more than \$2	50,000 if an individual, \$1
Flunitrazepam (Schedule IV)	Other than 1 gram or more	million if not an individual.		
		Second Offense: Not more million if other than an indivi-		an \$500,000 if an individual, \$2
All Schedule V drugs	Any amount	\$250,000 if not an individual.	in 1 yr. Fine not more than \$10 than 4 yrs. Fine not more thar	

FEDERAL TRAFFICKING PENALTIES

Source: 2017 edition of Drugs of Abuse, A DEA Resource Guide, <u>www.dea.gov/documents/2017/06/15/drugs-abuse</u>, page 30

DRUG	QUANTITY	1st OFFENSE	2nd OFFENSE *
Marijuana (Schedule I)	1,000 kg or more marijuana mixture; or 1,000 or more marijuana plants	Not less than 10 yrs. or more than life. If death or serious bodily injury, not less than 20 yrs., or more than life. Fine not more than \$10 million if an individual, \$50 million if other than an individual.	Not less than 20 yrs. or more than life. If death or serious bodily injury, life imprisonment. Fine not more than \$20 million if an individual, \$75 million if other than an individual.
Marijuana (Schedule I)	100 kg to 999 kg marijuana mixture; or 100 to 999 marijuana plants	Not less than 5 yrs. or more than 40 yrs. If death or serious bodily injury, not less than 20 yrs. or more than life. Fine not more than \$5 million if an individual, \$25 million if other than an individual.	Not less than 10 yrs. or more than life. If death or serious bodily injury, life imprisonment. Fine not more than \$20 million if an individual, \$75million if other than an individual.
Marijuana (Schedule I)	More than 10 kgs hashish; 50 to 99 kg marijuana mixture More than 1 kg of hashish oil; 50 to 99 marijuana plants	Not more than 20 yrs. If death or serious bodily injury, not less than 20 yrs. or more than life. Fine \$1 million if an individual, \$5 million if other than an individual.	Not more than 30 yrs. If death or serious bodily injury, life imprisonment. Fine \$2 million if an individual, \$10 million if other than an individual.
Marijuana (Schedule I)	Less than 50 kilograms marijuana (but does not include 50 or more marijuana plants regard- less of weight) 1 to 49 marijuana plants;	Not more than 5 yrs. Fine not more than \$250,000, \$1 million if other than an individual.	Not more than 10 yrs. Fine \$500,000 if an individual, \$2 million if other than individual.
Hashish (Schedule I)	10 kg or less		
Hashish Oil (Schedule I)	1 kg or less		

FEDERAL TRAFFICKING PENALTIES—MARIJUANA

*The minimum sentence for a violation after two or more prior convictions for a felony drug offense have become final is a mandatory term of life imprisonment without release and a fine up to \$20 million if an individual and \$75 million if other than an individual.

Source: 2017 edition of Drugs of Abuse, A DEA Resource Guide, www.dea.gov/documents/2017/06/15/drugs-abuse, page 31

Personal Use Amounts

This section of the 1988 Act allows the government to punish minor drug offenders without giving the offender a criminal record if the offender is in possession of only a small amount of drugs. This law is designed to impact the "user" of illicit drugs, while simultaneously saving the government the costs of a full-blown criminal investigation. Under this section, the government has the option of imposing only a civil fine on individuals possessing only a small quantity of an illegal drug. Possession of this small quantity, identified as a "personal use amount," carries a civil fine of up to \$10,000.

Source: 2017 edition of Drugs of Abuse, A DEA Resource Guide, <u>www.dea.gov/documents/2017/06/15/drugs-abuse</u>, page 14

CHART 2

SANCTIONS UNDER NEW JERSEY LAW FOR UNLAWFUL POSSESSION OR DISTRIBUTION OF ANABOLIC STEROIDS, MARIJUANA, AND HASHISH OR OTHER SUBSTANCES CONTAINING TETRAHYDROCANNABINOLS

Crime	<u>Imprisonment</u>	<u>Fines</u>	Other possible penalties
Crime of 1 st degree Examples: Distribution of heroin, cocaine or methamphet- amine over 5 ounces; distribution of marijuana over 25 pounds; strict liability for death result- ing from use of CDS distributed by actor	Between ten and twenty years allowed; extended term with previous conviction	Varies by substance and other factors; up to \$300,000.00	Community service; drug educa- tion and/or treatment, forfeiture of property
Crime of 2 nd degree Examples: Distribution of LSD less than 100 milligrams; distribution of heroin, cocaine or methamphet- amine over ½ ounce but less than 5 ounces; distribution of marijuana over 5 pounds but less than 25 pounds	Between five and ten years allowed; extended term with previous conviction	Varies by substance and other factors; up to \$150,000.00	Community service; drug educa- tion and/or treatment, forfeiture of property
Crime of 3 rd degree Examples: Possession of cocaine, heroin, metham- phetamine; possession of CDS classified in Schedule I, II, III, IV, with exceptions; obtaining CDS by fraud; distribution within 1,000 feet of a school	Between three and five years allowed; extended term with previous conviction	Varies by substance and other factors; up to \$75,000.00	Community service; drug educa- tion and/or treatment; probation
Crime of 4 th degree Examples: Possession of marijuana over 50 grams; pos- session of more than 5 grams of hash	Term not to exceed 18 months is permitted	Varies; up to \$25,000.00	Community service; drug educa- tion and/or treatment; probation
Disorderly persons offenses Examples: Possession of marijuana under 50g; posses- sion of drug paraphernalia; possession of alcohol under legal age; distribution of alcohol to minors	Up to 180 days	Not less than \$500.00	Driver's license suspension if offense committed in a motor vehicle; possible alcohol education or treatment; possible community service; probation

Source: Compiled July 2018 from NJ legislative statutes, Title 2C and Title 39.

Title 39:4-49.1 Possession of CDS in a motor vehicle by vehicle operator. Conviction can result in 2-year license suspension and not less than \$50 fine (non-criminal offense)

This table does not list all controlled dangerous substances (CDS) possession and distribution offenses. Additional CDS information may be found below.

Link to NJ statutes, Title 2C:33 (alcohol), 2C:35 (controlled dangerous substances), 2C:36 (paraphernalia), 2C:43 (sentencing for controlled dangerous substances offenses), Title 39 (traffic offenses):

http://lis.njleg.state.nj.us/nxt/gateway.dll?f=templates&fn=default.htm&vid=Publish:10.1048/Enu

CHART 3

SANCTIONS UNDER Galloway Township Code

Source: Compiled July 2018 from Galloway Township Code, Chapter 99 (Alcoholic Beverages) <u>https://ecode360.com/8524282</u> Galloway Township Code, Chapter 99.

Chapter 99

§ 99-7 Consumption of intoxicating beverages restricted.

[Amended 5-3-1983 by Ord. No. 728]

It is hereby prohibited to drink any intoxicating beverage on any sidewalk, street, avenue, highway, public parking lot or private commercial parking lot, unless the same is licensed to permit drinking thereon, whether or not in a motor vehicle or in any motor vehicle not on private property not otherwise referred to herein, within the Township of Galloway, Atlantic County, New Jersey, at any time.^[1]

§ 99-9 Violations and penalties.

[Amended 6-28-2005 by Ord. No. 1609; 12-13-2016 by Ord. No. 1951-2016]

Any person who shall violate any of the provisions of Article I, II or III of this chapter shall, upon conviction in the Municipal Court of the Township of Galloway, be considered a petty disorderly person and subject to a fine of not more than \$2,000, imprisonment for not more than 90 days and/or a period of community service for not more than 90 days, at the discretion of the Judge hearing said violation. Each day that a violation exists shall constitute a separate violation under this section.

§ 99-10 Underage consumption.

It shall be unlawful for any person under the legal age who, without legal authority, knowingly possesses or knowingly consumes an alcoholic beverage on private property.

§ 99-11 Violations and penalties.

[Amended 6-28-2005 by Ord. No. 1609]

Any person violating the provisions of this article shall, in accordance with the provisions of N.J.S.A. 40:48-1.2, as amended, be punished by a fine of \$250 for a first offense and \$350 for any subsequent offense.

§ 99-14 Age requirement.

<u>A.</u>

The purchase or attempted purchase of alcoholic beverages by any person under the age of 21 years of age, whether the same is to be consumed on the premises or not, is hereby prohibited, and any person violating this section shall be deemed a disorderly person.

<u>B.</u>

No person 21 years or older shall assist anyone under the age of 21 to purchase alcoholic beverages. Any person violating this section shall be deemed a disorderly person.

<u>C.</u>

Any person who misrepresents his/her age to any police officer of the Township of Galloway in connection with the purchase and/or consumption of any alcoholic beverages shall be deemed a disorderly person.

§ 99-15 Use of false documents.

<u>A.</u>

Any person under the age of 21 years of age who shall purchase or attempt to purchase any alcoholic beverages in the Township of Galloway by the use of false documents or representations shall be deemed a disorderly person.

<u>B.</u>

Any person under the age of 21 years of age who shall have in his/her possession any altered or false document or documents for the purpose of identification and/or establishing the age of said person shall be deemed a disorderly person.

<u>C.</u>

Any person who shall permit the use of his/her documents by any person under the age of 21 years of age for the purpose of securing the purchase of alcoholic beverages in the Township of Galloway shall be deemed to be a disorderly person.

§ 99-16 Violations and penalties.

Each and every person violating any of the provisions of this article shall be subject, upon conviction thereof, to a fine not exceeding \$500 or imprisonment in the county jail for a term not exceeding 90 days, or both, in the discretion of the court.

IV. Health Risks

Description of Health Risks Associated with use of Illicit Drugs and Abuse of Alcohol

Serious health risks are associated with the use of illicit drugs and alcohol. These health risks are described in Chart 4, which includes information published by the National Institute on Drug Abuse available at <u>drugabuse.gov/drugs-abuse/commonly-abused-drugs-charts</u> (last visited October 29, 2018).

The National Institute on Drug Abuse states that most drugs of abuse can alter a person's thinking and judgment, leading to health risks, including addiction, drugged driving and infectious disease. Most drugs could potentially harm an unborn baby; pregnancy-related issues are listed in the chart below for drugs where there is enough scientific evidence to connect the drug use to specific negative effects. <u>drugabuse.gov/drugs-abuse/commonly-</u> <u>abused-drugs-charts</u> (last visited October 29, 2018).

Many physical and psychological health risks are associated with the misuse and abuse of alcohol and other substances, including but not limited to the following:

- Accidents due to impaired judgment and coordination.
- Unwanted sexual activity.
- Difficulty with attention and learning.
- Physical and psychological dependence.
- Damage to the brain, pancreas, kidneys, liver, heart and lungs.
- High blood pressure, heart attacks, strokes, and ulcers.
- Birth defects.
- Diminished immune system.
- Death.

**The Drug Enforcement Agency (DEA) schedule indicates the drug's acceptable medical use and its potential for misuse or dependence. The most up-to-date scheduling information can be found on the <u>DEA website</u>.

Alcohol

People drink to socialize, celebrate, and relax. Alcohol often has a strong effect on people—and throughout history, people have struggled to understand and manage alcohol's power. Why does alcohol cause people to act and feel differently? How much is too much? Why do some people become addicted while others do not? The National Institute on Alcohol Abuse and Alcoholism is researching the answers to these and many other questions about alcohol. Here's what is known:

Alcohol's effects vary from person to person, depending on a variety of factors, including:

- How much you drink
- How often you drink
- Your age
- Your health status
- Your family history

While drinking alcohol is itself not necessarily a problem—<u>drinking too much</u> can cause a range of consequences, and increase your risk for a variety of problems. For more information on alcohol's effects on the body, please see the <u>National Institute on Alcohol Abuse and Alcoholism's</u> related web page describing <u>alcohol's effects on the body</u>.

		Ayahuasca				
(Banisteriopsis caapi) the system, thereby enhanced	nat contains an MAO inhib cing serotonergic activity.	itor preventing the natural	chotria viridis) along with ano I breakdown of DMT in the dig mazonian religious and healin th Report.	gestive		
Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule		
Aya, Yagé, Hoasca	No commercial uses	Brewed as tea	Swallowed as tea	DMT is Schedule I, but plants containing it are not controlled		
	P	ossible Health Effects				
Short-term	•	usea; burning sensation in t	uditory perceptions; increase he stomach; tingling sensatio			
Long-term	Possible changes to the needed.	serotoninergic and immun	e systems, although more res	earch is		
Other Health-related Issues	Unknown.					
In Combination with Alcohol	Unknown.					
Withdrawal Symptoms	Unknown.					
		Treatment Options				
Medications	It is not known whether ayahuasca is addictive. There are no FDA-approved medications to treat addiction to ayahuasca or other hallucinogens.					
Behavioral Therapies	More research is needed therapies are effective.	More research is needed to find out if ayahuasca is addictive and, if so, whether behavioral				

Central Nervous System Depressants

Street Names	Commercial Names (Common)	Common Forms	Common Ways Taken	DEA Schedule		
Barbs, Phennies, Red Birds, Reds, Tooies, Yellow Jackets, Yellows	Barbiturates: pentobarbital (Nembutal®)	Pill, capsule, liquid	Swallowed, injected	II, III, IV		
Candy, Downers, Sleeping Pills, Tranks	Benzodiazepines: alprazolam (Xanax [®]), chlorodiazepoxide (Librium [®]), diazepam (Valium [®]), lorazepam (Ativan [®]), triazolam (Halicon [®])	Pill, capsule, liquid	Swallowed, snorted	IV		
Forget-me Pill, Mexican Valium, R2, Roche, Roofies, Roofinol, Rope, Rophies	Sleep Medications: eszopiclone (Lunesta*), zaleplon (Sonata*), zolpidem (Ambien*)	Pill, capsule, liquid	Swallowed, snorted	IV		
	Po	ssible Health Effects				
Short-term		ch, poor concentration, co lowered blood pressure,	onfusion, dizziness, problems slowed breathing.	with		
Long-term	Unknown.					
Other Health-related Issues	construction of the second	metimes used as date rap d other infectious disease:				
In Combination with Alcohol	Further slows heart rate	and breathing, which can	lead to death.			
Withdrawal Symptoms	Must be discussed with a health care provider; barbiturate withdrawal can cause a serious abstinence syndrome that may even include seizures.					
		Freatment Options				
Medications	There are no FDA-approved medications to treat addiction to prescription sedatives; lowering the dose over time must be done with the help of a health care provider.					
Behavioral Therapies	More research is needed prescription sedatives.	More research is needed to find out if behavioral therapies can be used to treat addiction to				

Medications that slow brain activity, which makes them useful for treating anxiety and sleep problems. For more information, see the Misuse of Prescription Drugs Research Report.

		Cocaine			
A powerfully addictive s information, see the <u>Co</u>		the leaves of the coca plant nat	ive to South America. Fo	or more	
Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule	
Blow, Bump, C, Candy, Charlie, Coke, Crack, Flake, Rock, Snow, Toot	Cocaine hydrochloride topical solution (anesthetic rarely used in medical procedures)	White powder, whitish rock crystal	Snorted, smoked, injected	II	
	Po	ossible Health Effects			
Short-term	Narrowed blood vessels; enlarged pupils; increased body temperature, heart rate, and blood pressure; headache; abdominal pain and nausea; euphoria; increased energy, alertness; insomnia, restlessness; anxiety; erratic and violent behavior, panic attacks, paranoia, psychosis; heart rhythm problems, heart attack; stroke, seizure, coma.				
Long-term	Loss of sense of smell, nosebleeds, nasal damage and trouble swallowing from snorting; infection and death of bowel tissue from decreased blood flow; poor nutrition and weight loss; lung damage from smoking.				
Other Health-related Issues	Pregnancy: premature delivery, low birth weight, deficits in self-regulation and attention in school-aged children prenatally exposed. Risk of HIV, hepatitis, and other infectious diseases from shared needles.				
In Combination with Alcohol	Greater risk of cardiac to	xicity than from either drug alo	ne.		
Withdrawal Symptoms	Depression, tiredness, increased appetite, insomnia, vivid unpleasant dreams, slowed movement, restlessness.				
		Treatment Options			
Medications	There are no FDA-approved medications to treat cocaine addiction.				
Behavioral Therapies	 Contingency man The Matrix Mode Community-base 	ioral therapy (CBT) nagement, or motivational incerel el ed recovery groups, such as 12-5 application: reSET®		rs	

DMT

A synthetic drug producing intense but relatively short-lived hallucinogenic experiences; also naturally occurring in some South American plants (See Ayahuasca). For more information, see the <u>Hallucinogens and Dissociative Drugs</u> <u>Research Report</u>.

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule		
DMT, Dimitri	No commercial uses	White or yellow crystalline powder	Smoked, injected	1		
	P	ossible Health Effects		- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10		
Short-term	perception of time and l	body image, usually peakin	ditory distortions, and an alte g in about 30 minutes when d art rate, agitation, seizures, di	rank as tea.		
Long-term	Unknown					
Other Health-related Issues	At high doses, cardiac ar	At high doses, cardiac and respiratory arrest have occurred.				
In Combination with Alcohol	Unknown.					
Withdrawal Symptoms	Unknown.					
		Treatment Options				
Medications	It is not known whether DMT is addictive. There are no FDA-approved medications to treat addiction to DMT or other hallucinogens.					
Behavioral Therapies	More research is needed therapies are effective.	d to find out if DMT is addie	ctive and, if so, whether behav	vioral		

		GHB		
A depressant approved	for use in the treatment of	of narcolepsy, a disorder that	causes daytime "sleep atta	cks."
Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
G, Georgia Home Boy, Goop, Grievous Bodily Harm, Liquid Ecstasy, Liquid X, Soap, Scoop	Gamma- hydroxybutyrate or sodium oxybate (Xyrem®)	Colorless liquid, white powder	Swallowed (often combined with alcohol or other beverages)	1
	P	ossible Health Effects		
Short-term		ausea, vomiting, confusion, m g, lower body temperature, se		ess, slowed
Long-term	Unknown.			
Other Health-related Issues	Sometimes used as a da	te rape drug.		
In Combination with Alcohol	Nausea, problems with	breathing, greatly increased d	epressant effects.	
Withdrawal Symptoms	Insomnia, anxiety, trem thoughts.	ors, sweating, increased heart	rate and blood pressure, p	osychotic
		Treatment Options		
Medications	Benzodiazepines			
Behavioral Therapies	More research is needer addiction.	d to find out if behavioral the	rapies can be used to treat	GHB

Hallucinogens

Drugs that cause profound distortions in a person's perceptions of reality, such as ketamine, LSD, mescaline (peyote), PCP, psilocybin, salvia, DMT, and ayahuasca. For more information, see the <u>Hallucinogens and Dissociative Drugs</u> <u>Research Report</u>.

		Heroin				
	om morphine, a natural su see the <u>Heroin Research R</u>		seed pod of various opium p	oppy plants		
Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule		
Brown sugar, China White, Dope, H, Horse, Junk, Skag, Skunk, Smack, White Horse With OTC cold medicine and antihistamine: Cheese	No commercial uses	White or brownish powder, or black sticky substance known as "black tar heroin"	Injected, smoked, snorted	1		
	P	ossible Health Effects				
Short-term	Euphoria; dry mouth; itching; nausea; vomiting; analgesia; slowed breathing and heart rate.					
Long-term		Collapsed veins; abscesses (swollen tissue with pus); infection of the lining and valves in the heart; constipation and stomach cramps; liver or kidney disease.				
Other Health-related Issues		low birth weight, neonatal and other infectious diseases	an and a line and			
In Combination with Alcohol	Dangerous slowdown o	f heart rate and breathing, c	oma, death.			
Withdrawal Symptoms	Restlessness, muscle an bumps ("cold turkey").	d bone pain, insomnia, diarr	hea, vomiting, cold flashes w	ith goose		
	10 million (1997)	Treatment Options				
Medications	Methadone Buprenorphine Naltrexone (short- and long-acting forms)					
Behavioral Therapies	Contingency management, or motivational incentives 12-Step facilitation therapy					

		Inhalants		
	nitrite), which are prescrip	products such as spray paints, m ption medications for chest pain.		-
Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Poppers, snappers, whippets, laughing gas	Various	Paint thinners or removers, degreasers, dry-cleaning fluids, gasoline, lighter fluids, correction fluids, permanent markers, electronics cleaners and freeze sprays, glue, spray paint, hair or deodorant sprays, fabric protector sprays, aerosol computer cleaning products, vegetable oil sprays, butane lighters, propane tanks, whipped cream aerosol containers, refrigerant gases, ether, chloroform, halothane, nitrous oxide	Inhaled through the nose or mouth	Not scheduled
	P	ossible Health Effects		
Short-term	disinhibition, lightheade due to heart failure (from asphyxiation, suffocation Nitrites: enlarged blood	ed speech; lack of coordination; dness, hallucinations/delusions; m butane, propane, and other ch n, convulsions or seizures, coma, vessels, enhanced sexual pleasur ccitement, dizziness, headache.	headaches; sudden snif emicals in aerosols); de or choking.	fing death ath from
Long-term	- · · · · · · · · · · · · · · · · · · ·	e; bone marrow damage; limb sp /gen that can cause problems wit		-
Other Health-related Issues	Pregnancy: low birth we	ight, bone problems, delayed be bolism and body composition.	havioral development d	ue to brain
In Combination with Alcohol	Unknown.			
Withdrawal Symptoms	Nausea, tremors, irritab	ility, problems sleeping, and moo	d changes.	
		Treatment Options		
Medications	There are no FDA-appro	ved medications to treat inhalan	t addiction.	
Behavioral Therapies	More research is needed addiction.	d to find out if behavioral therapi	es can be used to treat	inhalant

nhala

		Ketamine			
		inary practice. Dissociative dru mation, see the <u>Hallucinogen</u>			
Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule	
Cat Valium, K, Special K, Vitamin K	Ketalar®	Liquid, white powder	Injected, snorted, smoked (powder added to tobacco or marijuana cigarettes), swallowed	ш	
	P	ossible Health Effects			
Short-term	Problems with attention, learning, and memory; dreamlike states, hallucinations; sedation, confusion; loss of memory; raised blood pressure; unconsciousness; dangerously slowed breathing.				
Long-term	Ulcers and pain in the b	adder; kidney problems; stor	nach pain; depression; poor	memory.	
Other Health-related Issues	8012-5 8015 0 XXXXXXXXXXX	Sometimes used as a date rape drug. Risk of HIV, hepatitis, and other infectious diseases from shared needles.			
In Combination with Alcohol	Increased risk of advers	Increased risk of adverse effects.			
Withdrawal Symptoms	Unknown.				
		Treatment Options			
Medications	There are no FDA-approved medications to treat addiction to ketamine or other dissociative drugs.				
Behavioral Therapies	More research is needed dissociative drugs.	d to find out if behavioral the	rapies can be used to treat a	ddiction to	

Khat

Pronounced "cot," a shrub (*Catha edulis*) found in East Africa and southern Arabia; contains the psychoactive chemicals cathinone and cathine. People from African and Arabian regions (up to an estimated 20 million worldwide) have used khat for centuries as part of cultural tradition and for its stimulant-like effects.

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule	
Abyssinian Tea, African Salad, Catha, Chat, Kat, Oat	No commercial uses	Fresh or dried leaves	Chewed, brewed as tea	Cathinone is a Schedule I drug, making khat use illegal, but the khat plant is not controlled	
	P	ossible Health Effects			
Short-term	Euphoria, increased alertness and arousal, increased blood pressure and heart rate, depression, paranoia, headaches, loss of appetite, insomnia, fine tremors, loss of short-term memory.				
Long-term	Gastrointestinal disorders such as constipation, ulcers, and stomach inflammation; and increased risk of heart attack.				
Other Health-related Issues		l with heavy use: psychotic re eliefs that one has superior q and paranoia.	사람은 것 같은 것은 것은 것은 것 같은 것 같이 많다.		
In Combination with Alcohol	Unknown.				
Withdrawal Symptoms	Depression, nightmares	s, low blood pressure, and lac	k of energy.		
		Treatment Options			
Medications	It is not known whether khat is addictive. There are no FDA-approved medications to treat addiction to khat.				
			More research is needed to find out if khat is addictive and, if so, whether behavioral therapies are effective.		

			ind-altering) opioid. Krat e information, see the <u>Kr</u>	om is consumed for mood- atom DrugFacts.	lifting
Street Names		Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Herbal Speedball, Biak-biak, Ketum, Kahuam, Ithang, Thom		None	Fresh or dried leaves, powder, liquid, gum	Chewed (whole leaves); eaten (mixed in food or brewed as tea); occasionally smoked	Not scheduled
		Possit	le Health Effects		
Long-term	High Anor	Low doses: increased energy, sociability, alertness. High doses: sedation, euphoria, decreased pain. Anorexia, weight loss, insomnia, skin darkening, constipation. Hallucination and paranoia			
Other Health-related Issues		long-term use at high d Iown.	oses.		
In Combination with Alcohol	Unkn	iown.			
Withdrawal Symptoms	Muscle aches, insomnia, hostility, aggression, emotional changes, runny nose, jerky movements.				rky
	-	Trea	atment Options		
Medications	No clinical trials have been conducted on medications for kratom addiction.				
Behavioral Therapies	More	recearch is needed to	find out if behavioral the	rapies can be used to treat	addiction to

Kratom

LSD A hallucinogen manufactured from lysergic acid, which is found in ergot, a fungus that grows on rye and other grains. LSD is an abbreviation of the scientific name *lysergic acid diethylamide*. For more information, see the <u>Hallucinogens</u> and <u>Dissociative Drugs Research Report</u>.

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule		
Acid, Blotter, Blue Heaven, Cubes, Microdot, Yellow Sunshine	No commercial uses	Tablet; capsule; clear liquid; small, decorated squares of absorbent paper that liquid has been added to	Swallowed, absorbed through mouth tissues (paper squares)	I		
	P	Possible Health Effects				
Short-term	· · · · · · · · · · · · · · · · · · ·	s; distortion of a person's ability t thers; raised blood pressure, hea rs; enlarged pupils.	· · · · · · · · · · · · · · · · · · ·			
Long-term		Frightening flashbacks (called Hallucinogen Persisting Perception Disorder [HPPD]); ongoing visual disturbances, disorganized thinking, paranoia, and mood swings.				
Other Health-related Issues	Unknown.					
In Combination with Alcohol	Unknown.					
Withdrawal Symptoms	Unknown.					
		Treatment Options				
Medications	There are no FDA-appro	oved medications to treat addiction	on to LSD or other halluci	nogens.		
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat addiction to hallucinogens.					

	M	arijuana (Cannabis)		
		sativa. The main psychoacti . For more information, see		
Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Blunt, Bud, Dope, Ganja, Grass, Green, Herb, Joint, Mary Jane, Pot, Reefer, Sinsemilla, Skunk, Smoke, Trees, Weed; Hashish: Boom, Gangster, Hash, Hemp	Various brand names in states where the sale of marijuana is legal	Greenish-gray mixture of dried, shredded leaves, stems, seeds, and/or flowers; resin (hashish) or sticky, black liquid (hash oil)	Smoked, eaten (mixed in food or brewed as tea)	I
	Po	ssible Health Effects		
Short-term	Enhanced sensory perception and euphoria followed by drowsiness/relaxation; slowed reaction time; problems with balance and coordination; increased heart rate and appetite; problems with learning and memory; anxiety.			
Long-term	Mental health problems,	chronic cough, frequent res	piratory infections.	
Other Health-related Issues		points when repeated use b with problems with attention		ring.
In Combination with Alcohol	Increased heart rate, blo time.	od pressure; further slowing	of mental processing and re	action
Withdrawal Symptoms	Irritability, trouble sleepi	ng, decreased appetite, anxi	ety.	
	1	reatment Options		
Medications	There are no FDA-approv	red medications to treat mar	ijuana addiction.	
Behavioral Therapies	Contingency mar Motivational Enh	oral therapy (CBT) nagement, or motivational in nancement Therapy (MET) ments geared to adolescents		

mescaline. MDMA is an		es to both the stimulant amp tific name 3,4-methylenedios earch Report.			
Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule	
Adam, Clarity, Eve, Lover's Speed, Peace, Uppers	No commercial uses	Colorful tablets with imprinted logos, capsules, powder, liquid	Swallowed, snorted	1.	
	P	ossible Health Effects		÷	
Short-term		anced sensory perception; ir ; faintness; chills or sweating th.			
Long-term		Long-lasting confusion, depression, problems with attention, memory, and sleep; increased anxiety, impulsiveness; less interest in sex.			
Other Health-related Issues	Unknown.				
In Combination with Alcohol		of alcohol's effects. Alcohol ease the risk of neurotoxic ef		rations of	
Withdrawal Symptoms	Fatigue, loss of appetite	, depression, trouble concen	trating.		
		Treatment Options			
Medications		There is conflicting evidence about whether MDMA is addictive. There are no FDA-approved medications to treat MDMA addiction.			
Behavioral Therapies	More research is needed addiction.	d to find out if behavioral the	erapies can be used to treat I	MDMA	

		Mescaline (Peyote)		
	disk-shaped "buttons" in nd Dissociative Drugs Res	the crown of several cacti, inc earch Report.	cluding peyote. For more in	formation,
Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Buttons, Cactus, Mesc	No commercial uses	Fresh or dried buttons, capsule	Swallowed (chewed or soaked in water and drunk)	1
	P	ossible Health Effects		
Short-term		nd feeling; hallucinations; eup , blood pressure; sweating; pr		ody
Long-term	Unknown.			
Other Health-related Issues	Unknown.			
In Combination with Alcohol	Unknown.			
Withdrawal Symptoms	Unknown.			
		Treatment Options		
Medications	There are no FDA-approved medications to treat addiction to mescaline or other hallucinogens.			
Behavioral Therapies	More research is needed hallucinogens.	d to find out if behavioral the	rapies can be used to treat	addiction to

Methamphetamine

An extremely addictive stimulant amphetamine drug. For more information, see the <u>Methamphetamine Research</u> <u>Report</u>.

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule		
Crank, Chalk, Crystal, Fire, Glass, Go Fast, Ice, Meth, Speed	Desoxyn*	White powder or pill; crystal meth looks like pieces of glass or shiny blue-white "rocks" of different sizes	Swallowed, snorted, smoked, injected	II		
	Pi	ossible Health Effects				
Short-term		and physical activity; decrea mperature; irregular heartb	sed appetite; increased breat eat.	hing, heart		
Long-term	Anxiety, confusion, insomnia, mood problems, violent behavior, paranoia, hallucinations, delusions, weight loss, severe dental problems ("meth mouth"), intense itching leading to skin sores from scratching.					
Other Health-related Issues	Pregnancy: premature delivery; separation of the placenta from the uterus; low birth weight; lethargy; heart and brain problems. Risk of HIV, hepatitis, and other infectious diseases from shared needles.					
In Combination with Alcohol	Masks the depressant el blood pressure.	Masks the depressant effect of alcohol, increasing risk of alcohol overdose; may increase				
Withdrawal Symptoms	Depression, anxiety, tiredness.					
		Treatment Options				
Medications	There are no FDA-appro	ved medications to treat me	ethamphetamine addiction.			
Behavioral Therapies	Contingency ma The Matrix Mod 12-Step facilitat		incentives			

	Over-the-Counter	MedicinesDextromethor	phan (DXM)		
Psychoactive when take Medicines DrugFacts.	en in higher-than-recomm	ended amounts. For more	information, see the <u>Over-the</u>	-Counter	
Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule	
Robotripping, Robo, Triple C	Various (many brand names include "DM")	Syrup, capsule	Swallowed	Not scheduled	
	P	ossible Health Effects		\$0.	
Short-term	Cough relief; euphoria; nausea; vomiting;	slurred speech; increased h	eart rate and blood pressure;	dizziness;	
Long-term	Unknown.				
Other Health-related Issues	Breathing problems, sei cough/cold medicines.	zures, and increased heart	rate may occur from other ing	redients in	
In Combination with Alcohol	Unknown.				
Withdrawal Symptoms	Unknown.				
		Treatment Options			
Medications	There are no FDA-appro	There are no FDA-approved medications to treat addiction to dextromethorphan.			
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat addiction to dextromethorphan.				

	Over-the-C	ounter MedicinesLoperami	de			
An anti-diarrheal that o the <u>Over-the-Counter N</u>		aken in higher-than-recomm	ended doses. For more infor	mation, see		
Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule		
None	Immodium	Tablet, capsule, or liquid	Swallowed	Not scheduled		
	P	ossible Health Effects				
Short-term		ontrols diarrhea symptoms. In high does, can produce euphoria. May lessen cravings and vithdrawal symptoms of other drugs.				
Long-term	Unknown.	Unknown.				
Other Health-related Issues		Fainting, stomach pain, constipation, loss of consciousness, cardiovascular toxicity, pupil dilation, and kidney failure from urinary retention.				
In Combination with Alcohol	Unknown.					
Withdrawal Symptoms	Severe anxiety, vomiting	g, and diarrhea.				
		Treatment Options				
Medications	There are no FDA-appro	There are no FDA-approved medications to treat loperamide addiction.				
Behavioral Therapies	 The same behavioral therapies that have helped treat addiction to heroin used to treat addiction to loperamide. 					
	Contingency ma	inagement, or motivational ii	ncentives			

PCP

A dissociative drug developed as an intravenous anesthetic that has been discontinued due to serious adverse effects. Dissociative drugs are hallucinogens that cause the user to feel detached from reality. PCP is an abbreviation of the scientific name, *phencyclidine*. For more information, see the <u>Hallucinogens and Dissociative Drugs Research Report</u>.

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule	
Angel Dust, Boat, Hog, Love Boat, Peace Pill	No commercial uses	White or colored powder, tablet, or capsule; clear liquid	Injected, snorted, swallowed, smoked (powder added to mint, parsley, oregano, or marijuana)	1, 11	
	P	ossible Health Effects			
	shallow breathing; face with movement.	se in breathing rate; increased bl redness and sweating; numbness niting; flicking up and down of the ures, coma, and death.	of the hands or feet; p	roblems	
Long-term	Memory loss, problems with speech and thinking, loss of appetite, anxiety.				
Other Health-related Issues	PCP has been linked to self-injury. Risk of HIV, hepatitis, and other infectious diseases from shared needles.				
In Combination with Alcohol	Unknown.				
Withdrawal Symptoms	Headaches, increased a	ppetite, sleepiness, depression			
		Treatment Options			
Medications	There are no FDA-appro drugs.	oved medications to treat addiction	on to PCP or other disso	ciative	
Behavioral Therapies	More research is needed dissociative drugs.	d to find out if behavioral therapi	es can be used to treat	addiction to	

Prescription Opioids Pain relievers with an origin similar to that of heroin. Opioids can cause euphoria and are often used nonmedically, leading to overdose deaths. For more information, see the <u>Misuse of Prescription Drugs Research Report</u>. Street Names Commercial Names Common Forms Common Ways Taken DEA Schedule Schedule Schedule Schedule Schedule

Street Names	Commercial Names (Common)	Common Forms	Common Ways Taken	DEA Schedule	
Captain Cody, Cody, Lean, Schoolboy, Sizzurp, Purple Drank With glutethimide: Doors & Fours, Loads,	Codeine (various brand names)	Tablet, capsule, liquid	Injected, swallowed (often mixed with soda and flavorings)	II, III, V	
Pancakes and Syrup Apache, China Girl, China White, Dance Fever, Friend, Goodfella, Jackpot, Murder 8, Tango and Cash, TNT	Fentanyl (Actiq [®] , Duragesic [®] , Sublimaze [®])	Lozenge, sublingual tablet, film, buccal tablet	Injected, smoked, snorted	II	
Vike, Watson-387	Hydrocodone or dihydrocodeinone (Vicodin®, Norco®, Zohydro®, and others)	Capsule, liquid, tablet	Swallowed, snorted, injected	II	
D, Dillies, Footballs, Juice, Smack	Hydromorphone (Dilaudid®)	Liquid, suppository	Injected, rectal	11	
Demmies, Pain Killer	Meperidine (Demerol*)	Tablet, liquid	Swallowed, snorted, injected	п	
Amidone, Fizzies <i>With MDMA:</i> Chocolate Chip Cookies	Methadone (Dolophine [®] , Methadose [®])	Tablet, dispersible tablet, liquid	Swallowed, injected	11	
M, Miss Emma, Monkey, White Stuff	Morphine (Duramorph®, MS Contin®)	Tablet, liquid, capsule, suppository	Injected, swallowed, smoked	11, 111	
O.C., Oxycet, Oxycotton, Oxy, Hillbilly Heroin, Percs	Oxycodone (OxyContin®, Percodan®, Percocet®, and others)	Capsule, liquid, tablet	Swallowed, snorted, injected	11	
Biscuits, Blue Heaven, Blues, Mrs. O, O Bomb, Octagons, Stop Signs	Oxymorphone (Opana®)	Tablet	Swallowed, snorted, injected	11	
	Po	ssible Health Effects			
Short-term	Pain relief, drowsiness, n	ausea, constipation, euphor	ia, slowed breathing, death		
Long-term	Increased risk of overdos	se or addiction if misused.			
Other Health-related Issues	Older adults: higher risk prescriptions, increasing with age; also, many old	low birth weight, neonatal a of accidental misuse because the risk of drug-drug interac er adults are treated with pro d other infectious diseases fr	e many older adults have m tions, and breakdown of dri escription medications for p	ugs slows	
In Combination with Alcohol	Dangerous slowing of he	art rate and breathing leadir	ng to coma or death.		
Withdrawal Symptoms	Restlessness, muscle and bumps ("cold turkey"), le	d bone pain, insomnia, diarrh eg movements.	ea, vomiting, cold flashes w	ith goose	
		Treatment Options			
Medications	Methadone Buprenorphine Naltrexone (short- and long-acting)				
Behavioral Therapies	The same behavioral the prescription opioid addic	rapies that have helped trea	t addiction to heroin are us	ed to treat	

information, see the M	ase alertness, attention, er lisuse of Prescription Drug	nergy, blood pressure, heart s Research Report.	rate, and breatning rate. For	more		
Street Names	Commercial Names (Common)	Common Forms	Common Ways Taken	DEA Schedule		
Bennies, Black Beauties, Crosses, Hearts, LA Turnaround, Speed, Truck Drivers, Uppers	Amphetamine (Adderall®)	Tablet, capsule	Swallowed, snorted, smoked, injected	I		
JIF, MPH, R-ball, Skippy, The Smart Drug, Vitamin R	Methylphenidate (Concerta [®] , Ritalin [®])	Liquid, tablet, chewable tablet, capsule	Swallowed, snorted, smoked, injected, chewed			
	P	ossible Health Effects				
	blood vessels; increased blood sugar; opened-up breathing passages. High doses: dangerously high body temperature and irregular heartbeat; heart disease; seizures.					
Long-term	Heart problems, psycho	Heart problems, psychosis, anger, paranoia.				
	Risk of HIV, hepatitis, and other infectious diseases from shared needles.					
Other Health-related Issues	Risk of HIV, hepatitis, an	d other infectious diseases f	rom shared needles.			
Issues In Combination with		nd other infectious diseases f		increase		
	Masks the depressant a	ction of alcohol, increasing ri		increase		
Issues In Combination with Alcohol Withdrawal	Masks the depressant a blood pressure. Depression, tiredness, s	ction of alcohol, increasing ri		increase		
Issues In Combination with Alcohol Withdrawal	Masks the depressant a blood pressure. Depression, tiredness, s	ction of alcohol, increasing ri leep problems.	sk of alcohol overdose; may	increase		

		Psilocybin			
•		at grow in parts of South Ame sociative Drugs Research Rep		States. For	
Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule	
Little Smoke, Magic Mushrooms, Purple Passion, Shrooms	No commercial uses	Fresh or dried mushrooms with long, slender stems topped by caps with dark gills	Swallowed (eaten, brewed as tea, or added to other foods)	1	
	P	ossible Health Effects			
Short-term		perception of time, inability to problems with movement, e			
Long-term	Risk of flashbacks and m	Risk of flashbacks and memory problems.			
Other Health-related Issues	Risk of poisoning if a po	isonous mushroom is accider	ntally used.		
In Combination with Alcohol	May decrease the perceived effects of alcohol.				
Withdrawal symptoms	Unknown.				
		Treatment Options			
Medications	It is not known whether psilocybin is addictive. There are no FDA-approved medications to treat addiction to psilocybin or other hallucinogens.				
Behavioral Therapies	10.00 M 10 M	d to find out if psilocybin is a o treat addiction to this or ot		oral	

Rohypnol[®] (Flunitrazepam)

A benzodiazepine chemically similar to prescription sedatives such as Valium[®] and Xanax[®]. Teens and young adults tend to misuse this drug at bars, nightclubs, concerts, and parties. It has been used to commit sexual assaults due to its ability to sedate and incapacitate unsuspecting victims.

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule	
Circles, Date Rape Drug Forget Pill, Forget-Me P La Rocha, Lunch Money Mexican Valium, Mind Eraser, Pingus, R2, Reynolds, Rib, Roach, Roach 2, Roaches, Roachies, Roapies, Rocl Dos, Roofies, Rope, Rophies, Row-Shay, Ruf Trip-and-Fall, Wolfies	rill, Rohypnol® has	Tablet	Swallowed (as a pill or as dissolved in a drink), snorted	IV Rohypnol [®] is not approved for medical use in the United States; it is available as a prescription sleep aid in other countries.	
	Poss	sible Health Effects	1		
Short-term Long-term	Drowsiness, sedation, sleep; amnesia, blackout; decreased anxiety; muscle relaxation, impaired reaction time and motor coordination; impaired mental functioning and judgment; confusion; aggression; excitability; slurred speech; headache; slowed breathing and heart rate. Unknown.				
Other Health-related Issues	Unknown.				
In Combination with Alcohol	Severe sedation, unconsciousness, and slowed heart rate and breathing, which can lead to death.				
Withdrawal Symptoms	Headache; muscle pain; extr and tingling of hands or feet				
	Tr	eatment Options			
Medications	There are no FDA-approved medications to treat addiction to Rohypnol [®] or other prescription sedatives.				
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat addiction to Rohypnol® or other prescription sedatives.				

Salvia A dissociative drug (Salvia divinorum) that is an herb in the mint family native to southern Mexico. Dissociative drugs are hallucinogens that cause the user to feel detached from reality. For more information, see the <u>Hallucinogens and</u> <u>Dissociative Drugs Research Report</u>.

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule		
Magic mint, Maria Pastora, Sally-D, Shepherdess's Herb, Diviner's Sage	Sold legally in most states as <i>Salvia</i> <i>divinorum</i>	Fresh or dried leaves	Smoked, chewed, or brewed as tea	Not Scheduled (but labeled drug of concern by DEA and illegal in some states)		
	P	ossible Health Effects				
Short-term		hallucinations; altered visua f detachment from one's b	al perception, mood, body sen ody; sweating.	sations;		
Long-term	Unknown.	Unknown.				
Other Health-related Issues	Unknown.					
In Combination with Alcohol	Unknown.					
Withdrawal Symptoms	Unknown.					
		Treatment Options				
Medications	It is not known whether salvia is addictive. There are no FDA-approved medications to treat addiction to salvia or other dissociative drugs.					
Behavioral Therapies	More research is needed used to treat addiction to		ctive, but behavioral therapie	s can be		

		Steroids (Anabolic)		
enhance athletic and se		sical appearance. For more	I hormones in the body and information, see the <u>Steroid</u>	
Street Names	Commercial Names (Common)	Common Forms	Common Ways Taken	DEA Schedule
Juice, Gym Candy, Pumpers, Roids	Nandrolone (Oxandrin®), oxandrolone (Anadrol®), oxymetholone (Anadrol-50®), testosterone cypionate (Depo-testosterone®)	Tablet, capsule, liquid drops, gel, cream, patch, injectable solution	Injected, swallowed, applied to skin	ш
	Pc	ssible Health Effects		
Short-term		d athletic performance. Acro wing of the skin, infection.	e, fluid retention (especially	in the hand
Long-term	Kidney damage or failure; liver damage; high blood pressure, enlarged heart, or changes in cholesterol leading to increased risk of stroke or heart attack, even in young people; aggression; extreme mood swings; anger ("roid rage"); extreme irritability; delusions; impaired judgment.			
Other Health-related Issues	 Males: shrunken testicles, lowered sperm count, infertility, baldness, development of breasts. Females: facial hair, male-pattern baldness, enlargement of the clitoris, deepened voice. Adolescents: stunted growth. Risk of HIV, hepatitis, and other infectious diseases from shared needles. 			
In Combination with Alcohol	Increased risk of violent behavior.			
Withdrawal Symptoms	Mood swings; tiredness; restlessness; loss of appetite; insomnia; lowered sex drive; depression, sometimes leading to suicide attempts.			
		Treatment Options		
Medications	Hormone therapy.			
Behavioral Therapies	More research is needed addiction.	l to find out if behavioral the	rapies can be used to treat s	steroid

Synthetic Cannabinoids

A wide variety of herbal mixtures containing man-made cannabinoid chemicals related to THC in marijuana but often much stronger and more dangerous. Sometimes misleadingly called "synthetic marijuana" and marketed as a "natural," "safe," legal alternative to marijuana. For more information, see the <u>Synthetic Cannabinoids DrugFacts</u>.

Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule		
K2, Spice, Black Mamba, Bliss, Bombay Blue, Fake Weed, Fire, Genie, Moon Rocks, Skunk, Smacked, Yucatan, Zohai	No commercial uses	Dried, shredded plant material that looks like potpourri and is sometimes sold as "incense"	Smoked, swallowed (brewed as tea)	1		
	F	Possible Health Effects				
Short-term	Increased heart rate; vo increased blood pressu		; hallucinations, anxiety, para	noia;		
Long-term	Unknown.					
Other Health-related Issues	Use of synthetic cannal areas.	Use of synthetic cannabinoids has led to an increase in emergency room visits in certain areas.				
In Combination with Alcohol	Unknown.					
Withdrawal Symptoms	Headaches, anxiety, de	pression, irritability.				
		Treatment Options				
Medications	There are no FDA-approved medications to treat synthetic cannabinoid addiction.					
Behavioral Therapies	More research is needed to find out if behavioral therapies can be used to treat synthetic cannabinoid addiction.					

An emerging family of d	rugs containing one or me	ore synthetic chemicals related to	cathinone, a stimula	ant found
		nicals include mephedrone, meth		
methylenedioxypyrovale	erone (MDPV). For more i	nformation, see the Synthetic Ca	thinones ("Bath Salts	") DrugFacts.
Street Names	Commercial Names	Common Forms	Common Ways Taken	DEA Schedule
Bloom, Cloud Nine, Cosmic Blast, Flakka, Ivory Wave, Lunar Wave, Scarface, Vanilla Sky, White Lightning	No commercial uses for ingested "bath salts"	White or brown crystalline powder sold in small plastic or foil packages labeled "not for human consumption" and sometimes sold as jewelry cleaner; tablet, capsule, liquid	Swallowed, snorted, injected	I Some formulations have been banned by the DEA
	Pr	ossible Health Effects		
Short-term	paranoia, agitation, and	I blood pressure; euphoria; incre hallucinations; violent behavior; ziness; depression; panic attacks	sweating; nausea, vo	miting;
Long-term	Death.			
Other Health-related Issues	Risk of HIV, hepatitis, and other infectious diseases from shared needles.			
In Combination with Alcohol	Unknown.			
Withdrawal Symptoms	Depression, anxiety.			
		Treatment Options		
Medications	There are no FDA-appro	ved medications to treat addiction	on to synthetic cathin	ones.
Behavioral Therapies	Cognitive-behav	ioral therapy (CBT)		
	 Contingency ma 	nagement, or motivational incen	tives	
	 Motivational En 	hancement Therapy (MET)		
	 Behavioral treat 	ments geared to teens		

		Tobacco				
Plant grown for its leav Tobacco/Nicotine Rese		rmented before use. For mo	re information, see the			
Street Names	Commercial Names Common Forms Common Ways Taken					
None	Multiple brand names	cigarettes, cigars, bidis, hookahs, smokeless tobacco (snuff, spit tobacco, chew)	Smoked, snorted, chewed, vaporized	Not Scheduled		
	P	ossible Health Effects	•			
Short-term	Increased blood pressur	e, breathing, and heart rate	·			
Long-term		Greatly increased risk of cancer, especially lung cancer when smoked and oral cancers when chewed; chronic bronchitis; emphysema; heart disease; leukemia; cataracts; pneumonia.				
Other Health-related Issues	Pregnancy: miscarriage, low birth weight, stillbirth, learning and behavior problems.					
In Combination with Alcohol	Unknown.	Unknown.				
Withdrawal Symptoms	Irritability, attention and sleep problems, depression, increased appetite.					
		Treatment Options				
Medications	Bupropion (Zyban*)					
	Varenicline (Chantix [®])					
	Nicotine replace	ement (gum, patch, lozenge)				
Behavioral Therapies	Cognitive-behavioral therapy (CBT)					
	Self-help materials					
	Mail, phone, and	d Internet quit resources				

v. Drug and Alcohol Programs: Information and Resources for Students and Employees

A. Employees

The Deer Oaks Employee Assistance Program (EAP) is a free service provided for you and all members of your household by Stockton University. This program offers a wide variety of counseling, referral, and consultation services, which are all designed to assist you and your family in resolving work/life issues in order to live happier, healthier, more balanced lives. These services are completely confidential and can be easily accessed by calling the toll-free Helpline listed below. Substance abuse needs may be covered by an employee's medical benefits.

Phone: Toll-free Helpline available 24/7/365: 1-866-327-2400

Web: www.deeroakseap.com Log-in to the <u>Stockton Portal</u> and click on the Employee tab to find the log-in credentials for the Deer Oaks website and/or to click on a direct pass through link into the Deer Oaks website.

Email: eap@deeroaks.com

B. Currently Enrolled Students

Stockton University's Alcohol and Drug Education Program provides confidential counseling, assessment and referral services for students. Information regarding procedures for treatment options, including referral to intensive outpatient treatment, inpatient treatment centers and community 12-step groups, is offered.

Students can also receive counseling if they have a relationship with an alcoholic, addict or problem drinker. Students will receive information regarding available support systems.

If you suspect someone has consumed a large volume of alcohol over a short period of time he/she/they may have alcohol poisoning. Symptoms of alcohol poisoning could include:

- Unconsciousness; cannot be awakened
- Cold, clammy, unusually pale or bluish skin
- Slow or irregular breathing
- Excessive vomiting or vomiting while passed out

If alcohol poisoning is suspected:

- DO SOMETHING; don't worry about the person's subsequent thoughts or attitude
- DIAL 911 immediately
- STAY with the person and monitor their breathing

GOOD SAMARITAN POLICY

In an effort to promote responsible student behavior and respect for the health and welfare of all members of the collegiate community, panel members may take into account when determining the appropriate sanctions whether a respondent student attempted to take remedial action to assist a victim in a life-threatening situation. Providing students with necessary medical assistance due to over-consumption of alcohol and/or other drugs takes priority over judicial or criminal considerations. Students are therefore strongly encouraged to seek immediate assistance for themselves or their friends without regard for possible disciplinary or criminal concerns. Consideration for disciplinary leniency will be given to students who require medical support or who request medical support for others due to dangerous consumption of alcohol or drugs.

VI. Disciplinary Sanctions

A. Employees – <u>Procedure 6140 Disciplinary Guidelines</u> (See section 1.6 for description of progressive disciplinary action)

POSSESSION DISTRIBUTION OR SELLING OF ALCOHOLIC BEVERAGES

Employees are not permitted to possess or distribute alcoholic beverages in University vehicles, at job sites, in shops, yards or offices. Selling alcoholic beverages on University premise will be cause for removal on the first offense.

5 days - removal Removal

CONSUMPTION OF ALCOHOLIC BEVERAGES WHILE IN PAY STATUS

Employees are not permitted to consume alcoholic beverages while in a pay status. An employee becoming legally impaired while performing their work duties for the university is grounds for removal on the first offense.

1 day - 5 days 3 days - 10 days 10 days - Removal Removal Removal

REPORTING FOR DUTY WHILE INTOXICATED BY ALCOHOL OR BECOMING INTOXICATED BY ALCOHOL DURING WORK SHIFT

This is a most serious breach of discipline warranting immediate suspension. Employees are not to be sent home driving their own vehicles. Arrangements are to be made for a relative or friend to transport employee off premises. If unable to arrange transportation by family or friend, the University will authorize supervision to transport employee off premises at the earliest possible time. In addition to disciplinary action, referral to the Employee Advisory Service may be in order.

3 days - 5 days 5 days - 20 days 15 days - Removal Removal

DRUG RELATED INCIDENTS SELLING OR DISTRIBUTING ILLEGAL DRUGS

Drug-related incidents, including possible illegal use and/or appearance of being under the influence of, our cause for immediate suspension. For guidance on incidents of this nature, call the office of Human Resources.

Removal – First Offense

B. Currently Enrolled Students

SANCTIONS

Sanctions may be applied to address specific personal growth needs pertaining to the behavior that led to violations of the Code of Conduct. Status changes may be applied to reflect the seriousness of a behavior. Sanctions and status changes can be found in the Student Handbook. Status changes will remain on file in accordance with University Records Retention Protocols. Cases of expulsion will remain on file with the University and Office of Student Rights and Responsibilities indefinitely. Notation of the dates of suspension or expulsion are permanently noted on the student's transcript.

SANCTIONS DEFINED

Student Respondent Sanctions may be applied to address specific personal growth needs pertaining to the behavior leading to the incident. Students will be notified of their educational assignments and change in conduct status with the University. All sanctions are put into place immediately upon notice of the hearing outcome. Students may request a deferment of sanctions during the appeal process by putting this request in writing to the Office of Student Rights and Responsibilities. Deferment request must be received within one business day of the hearing outcome and should include an explanation for the request and potential burden the sanctions may cause.

Educational Assignments

Educational assignments are specific to an individual case and are determined based on relevance to the violating behavior. Examples of educational assignments include, but are not limited to: community service, alcohol and drug programs and restitution.

Restitution

Reimbursement for damage to or theft of property will be required. Reimbursement may take the form of payment to compensate for damages, cleaning or replacements.

Fine

Payment of \$50 will be required as a result of Campus Conduct Code violations. Money collected will defray costs associated with education programs for campus offenders and/ or victims, as appropriate. Fines may not be paid with University funds, refunds from federal or state financial aid grants or loans.

VII. Oversight Responsibility – Stockton University's Wellness Center shall have oversight responsibility of the DAAPP, including but not limited to, updates, coordination of information required in the DAAPP and the coordination of the annual notification to employees and students. Biennially the University will review its Substance Abuse Policy/Program to determine its effectiveness and to ensure that the sanctions required for violations of the policy are consistently enforced.

VIII. Notification of the Drug Abuse and Alcohol Prevention Program (DAAPP) -

- A. Students: The Wellness Center will:
 - i. Send annually by email to all current students during the first quarter of the year at their Stockton University email address;
- **B. Employees**: Human Resources will:
 - i. Send annually by email to all current employees during the first quarter of the year to the email address on file for each employee.
- **c.** Employees: a link to the DAAPP notification will be included as part of the onboarding materials for new employees;
- **D.** Students, a link will be included in orientation materials for students enrolled after the annual distribution date (e.g., transfer students).



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