West Liberty University

2016 Biennial Review

**EDGAR Part 86 (Education Department General Administrative Regulations)**

West Liberty University (WLU) Alcohol and Other Drug (AOD) education, intervention, and prevention programs continue to be developed, implemented and coordinated through the efforts of the Campus Police, Judicial Affairs, Housing, Residential Life, Health Services, Athletics and Counseling Service. AOD efforts continue to focus on the following strategies:

**EDUCATION**

The Housing Office and Athletics disseminates AOD information to students through the use of presentations, online education (eCHECKUP TO Go), and awareness events. Students are taught to recognize personal risk factors with alcohol abuse and dependence. Target populations continue to include freshmen, Greeks, on-campus residents, and athletes. All WLU students are required to take a two or three hour Health Class, which provides students with knowledge about alcohol and other drugs. The students are taught behavioral change strategies, alcohol and drugs facts, and issues associated with substance abuse. All first year freshmen are registered for The First Year Experience course (COLL 101) which has a section to instruct students on the risks associated with alcohol and drug use, safety and decision making. Through the use of an online newsletter, Parent Power, information is provided Alcohol and Drug (AOD) and college student wellness information is provided.

**INTERVENTION**

The Office of Housing and Student Life and Counseling Services provides intervention to students that are cited and/or arrested by the WLU Campus Police, and sanctioned by the Office of Judicial Affairs. The Student Life Office uses Alcohol 101 and eCHECKUP TO GO. The Alcohol 101 is designed to help students make responsible decisions about alcohol and to see the negative consequences that can result from irresponsible decisions about alcohol use. A new program, eCHECKUP TO GO has been implemented and paid for by the West Virginia Collegiate Initiative to Address High Risk Alcohol Use (WVCIA) <http://wvcia.com/>. eCHECKUP TOGO is an interactive web survey that allows college and university students to enter information about their drinking patterns and receive feedback about their use of alcohol.  The Counseling office utilizes The Alcohol Use Disorders Identification Test (AUDIT) as a screening tool to identify students who are at risk of developing alcohol problems. The AUDIT focuses on identifying the preliminary signs of hazardous drinking and mild dependence. It is one of the most accurate alcohol screening tests available, rated 92 percent effective in detecting hazardous or harmful drinking. The NIDA Modified **A**lcohol, **S**moking and **S**ubstance **I**nvolvement **S**creening **T**est (ASSIST) assesses frequency of use and abuse of substances (e.g., alcohol, tobacco, prescription and illegal drugs, and controlled medications) to determine if an intervention is necessary. ASSIST has been shown to have excellent accuracy and high capacity to discriminate between substance use, abuse and dependence (Newcombe et al. 2005). The Counseling Office also uses two prevention programs titled ‘Choices About Alcohol: A Brief Alcohol Abuse Prevention Program’ and ‘Choices about Marijuana: A Brief Marijuana Use Prevention Program.’

**PREVENTION**

WLU office uses environmental management strategies, as recommended by the US Department of Education’s Higher Education Center for Alcohol, Drug Abuse and Violence Prevention.

Promote alcohol-free social, recreational, and public service options

The Campus Activities Board (CAB) works with the Office of Housing & Student Life to provide alcohol free events and activities for the West Liberty University community.  CAB sponsors a wide variety of events, activities, and programs including wellness programs, craft nights, holiday parties, open mic nights, WLU idol, novelties, bus trips, family weekend, national entertainment acts, and much more.

The Counseling Office works with Student Activities to provide an alcohol free event during orientation week TopperFest (Blast from the Past), Health Fair, and Mental Health Awareness events.

The Counseling Office collaborated with the local Ohio County Substance Abuse Prevention Coalition (OCSAPC) to facilitate an event for local college students. The event was at the Wheeling Civic Center. The event was a movie night with snacks and local venders sharing information with the students about their services.

The Campus Ministry and Kappa Phi provides alcohol free social events and coordinates volunteer service opportunities for students on campus and in the surrounding community. In addition, many academic departments sponsor events that provide students a variety of AOD free social events, education and awareness events.

Beginning in the Fall 2014, all Greek Organizations developed a Risk Management position on their executive boards or as a committee. This is a leadership position. Within the role of this position is to enforce all university and Fraternity/Sorority policies, with specific attention to interpreting and enforcing the Alcohol/Drug Policy,

Create a health-promoting normative environment

The Office of Housing & Student Life continues to look at ways to improve this student physical, mental, and social wellness. They offer open gym for students, faculty and staff.

WLU promotes health promotion campaigns and events to encourage students, faculty, and staff to lead healthy lifestyles. WLU Wellness Committee kicked off a new Walking Wednesday Program dedicated to the faculty and staff’s mental, physical, social and emotional well-being. They offer incentives to encourage participation. WLU has been a Tobacco Free Campus since January 1, 2012. Staff and faculty participate in PEIA’s pathways to wellness programs.

Partnership with Local and State Coalitions

WLU participates in the West Virginia Collegiate Initiative Against High Risk Alcohol Use (WVCIA) and the local Ohio County Substance Abuse Prevention Coalition(OCSAPC). These coalitions focus on environmental approaches (such as more vigorous enforcement of zero tolerance laws, other drinking and driving laws, and strategies to reduce the availability of alcohol) as well as approaches that target the individual drinker (such as wider implementation of alcohol screening, counseling, and treatment programs.

Through collaboration with universities, colleges, community and technical colleges of West Virginia, local and state policy makers, decision makers and stakeholders, state agencies and community outreach campaigns, the West Virginia Collegiate Initiative to Address High Risk Alcohol Use is determined to continue making an impact on the lives of college students.

Limit alcohol availability

There is no alcohol served to students on campus and there are consequences to students for drinking on campus or coming to campus intoxicated. Alcohol possession and/or use are not permitted in the residence halls with the exception of a designated residence hall floor. Students who live in that designation must be 21 and must adhere to strict guidelines.

Restrict the marketing and promotion of alcoholic beverages both on and off campus:

WLU expects the university newspaper, The Trumpet, TV station, WLTV 14 and radio station, WGLZ to act at the highest levels of responsibility, and especially in regard to no alcohol advertising. Bar owners are not permitted to advertise drink specials on campus.

Increase the development and enforcement of campus policies, state and local laws:

Campus Police have continued to team with city and county police to increase the visibility and persistence of alcohol related law enforcement. They arrest and/or cite any person evidencing underage alcohol use or intoxication. Through funding from the Governors Highway Safety office the Ohio County Sheriff’s Office conducts safety check points on RT 88. Residence Assistants also help in the enforcement of the no alcohol, no drug police by reporting any use of alcohol or drugs in the dorms to WLU Campus Police.

The university has a zero tolerance policy for alcohol and other drugs. WLU distributes information regarding alcohol and drug use policy by having it listed on-line throughout each academic year. Students are notified annually via email to visit WLU website. AOD policies are printed in the student handbook and discussed at each orientation session with incoming students and parents.

The university’s policy also provides for the enforcement of local, state, and federal laws. In compliance with the Drug Free Schools and Compliance Act (DFSCA), the policy and AOD information is easily accessible on line via the student handbook and Board of Governors Link

The university prohibits the possession or consumption of alcoholic beverages on the campus. Any exception must have prior approval. The university prohibits the possession, use, or furnishing of any illegal drugs or drug paraphernalia (bongs, pipes, etc.) in the residence halls or on university-owned or supervised property. Any student found in violation of this policy will be immediately placed on interim suspension from the residence halls and/or the institution pending completion of the university’s judicial process as outlined in the Student Code of Conduct. Any residential suspension predicated on a violation involving a felony-weight of drugs and/or possession with intent to deliver also shall result in imposition of “full restrictions.” Written notification will be sent to student, parent(s) or guardian, and faculty advisor. In addition, any person found in violation of this policy may be subject to legal action. Note: Presence in an area where drugs are present may subject all persons present to discipline/legal action.

**STUDENT LIFE POLICIES AND PROCEDURES**

<http://westliberty.edu/residence-life/studenthandbook-studentlifepolicies>

**BOARD OF GOVERNORS POLICIES**

#33 <http://www.westliberty.edu/bog/files/2010/01/Policy-33-Drug-Free-Workplace.pdf>

# 7 <http://www.westliberty.edu/bog/files/2010/01/Policy-7-Alcoholic-Beverages-on-Campus.pdf>

**ASSESSMENT**

WLU has participated in the American College Health Association/National College Health Assessment (ACHA/NCHA) every two years since 2010. Several West Virginia Colleges and Universities that belong to the WVCIA participated in the assessment to collect campus, statewide, and national data.

ACHA/NCHA supports the health of the campus community by fulfilling the academic mission, supporting short and long term healthy behaviors and gaining a current profile of health trends within the campus, state, and national college communities. The survey has been administered via a web survey. The survey received WLU IRB approval. The survey is purchased by the WVCIA. WLU survey results can be found in the WLU Counseling Office. The Spring 2016 ACHA-NCHA Reference Group Report documents can be found at the ACHA/NCHA website at: <http://www.acha-ncha.org/reports_ACHA-NCHAIIc.html>

**DRUG AND ALCOHOL EDUCATION, COUNSELING, TREATMENT AND REFERRAL**

Help is available on campus at the WLU Counseling Office for students. Stability and Safety Assessments for Faculty and Staff as needed with referral information. Counseling Services are free and confidential. Appointments can be made by:

Calling 304-336-8215

Sign into your Wins account,

Click Student Services,

Click schedule a Counseling Session

Submit

Email - [lwitzberger@westliberty.edu](mailto:lwitzberger@westliberty.edu)

Referral box beside office door

Walk – In (first floor of Main Hall (East Wing) Rm 138 & 139)

**RECOMMENDATIONS FOR IMPROVEMENTS**

1. To assure that each new student member of the campus community receives the annual notification, in the future, notification will be sent fall and spring semester. Further, attempts will be made to include an acknowledgement of receipt.

1. Continue relationships with local substance abuse prevention coalition (OCSAPC). Research shows that several carefully conducted community initiatives aimed at reducing alcohol problems among college-age youth have been effective, leading to reductions in underage drinking, alcohol-related assaults,
2. AOD Awareness events, use of Parent Power to disseminate information to parents, and Education Brochures for students, parents, faculty, and staff.
3. Develop an AOD committee and collaboratively review AOD education, intervention, prevention, standards of conduct and sanctions.

**CONCLUSION**

WLU recognizes the ongoing need nationwide to address AOD issues. A strength of the AOD prevention is the cooperation that comes from asupportive Administration, Student Services, Residence Life, Campus Police, Academic Departments, and Athletics. WLU will continue involvement in the WVCIA and the local OCSAPC. Both of these coalitions work with WV Colleges and Universities, the Highway Safety office, the ABCA and various other WV prevention agencies. Both coalitions work toward AOD prevention, networking, training, resources, and strategic prevention planning to address college AOD issues.

**Health Risks**

| Tobacco | | | |
| --- | --- | --- | --- |
| **Category & Name** | **Examples of Commercial & Street Names** | **DEA Schedule** | **How Administered\*** |
| **Nicotine** | Found in cigarettes, cigars, bidis, and smokeless tobacco (snuff, spit tobacco, chew) | Not scheduled | Smoked, snorted, chewed |

**Acute Effects** - Increased blood pressure and heart rate

**Health Risks** - Chronic lung disease; cardiovascular disease; stroke; cancers of the mouth, pharynx, larynx, esophagus, stomach, pancreas, cervix, kidney, bladder, and acute myeloid leukemia; adverse pregnancy outcomes; addiction

| Alcohol | | | |
| --- | --- | --- | --- |
| **Category & Name** | **Examples of Commercial & Street Names** | **DEA Schedule** | **How Administered\*** |
| **Alcohol (ethyl alcohol)** | Found in liquor, beer, and wine | Not scheduled | Swallowed |

**Acute Effects** - In low doses, euphoria, mild stimulation, relaxation, lowered inhibitions; in higher doses, drowsiness, slurred speech, nausea, emotional volatility, loss of coordination, visual distortions, impaired memory, sexual dysfunction, loss of consciousness

**Health Risks** - Increased risk of injuries, violence, fetal damage (in pregnant women); depression; neurologic deficits; hypertension; liver and heart disease; addiction; fatal overdose

| Cannabinoids | | | |
| --- | --- | --- | --- |
| **Category & Name** | **Examples of Commercial & Street Names** | **DEA Schedule** | **How Administered\*** |
| **Marijuana** | Blunt, dope, ganja, grass, herb, joint, bud, Mary Jane, pot, reefer, green, trees, smoke, sinsemilla, skunk, weed | Schedule I drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule I drugs are available for research only and have no approved medical use. | Smoked, swallowed |
| **Hashish** | Boom, gangster, hash, hash oil, hemp | Schedule I drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule I drugs are available for research only and have no approved medical use. | Smoked, swallowed |

**Acute Effects** - Euphoria; relaxation; slowed reaction time; distorted sensory perception; impaired balance and coordination; increased heart rate and appetite; impaired learning, memory; anxiety; panic attacks; psychosis

**Health Risks** - Cough, frequent respiratory infections; possible mental health decline; addiction

| Opioids | | | |
| --- | --- | --- | --- |
| **Category & Name** | **Examples of Commercial & Street Names** | **DEA Schedule** | **How Administered\*** |
| **Heroin** | *Diacetylmorphine*: smack, horse, brown sugar, dope, H, junk, skag, skunk, white horse, China white; cheese (with OTC cold medicine and antihistamine) | Schedule I drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule I drugs are available for research only and have no approved medical use. | Injected, smoked, snorted |
| **Opium** | *Laudanum, paregoric*: big O, black stuff, block, gum, hop | Schedule II drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule II drugs are available only by prescription (unrefillable) and require a form for ordering. Schedule III drugs are available by prescription, may have five refills in 6 months, and may be ordered orally. Some Schedule V drugs are available over the counter. | Swallowed, smoked |

**Acute Effects** - Euphoria; drowsiness; impaired coordination; dizziness; confusion; nausea; sedation; feeling of heaviness in the body; slowed or arrested breathing

**Health Risks** - Constipation; endocarditis; hepatitis; HIV; addiction; fatal overdose

| Stimulants | | | |
| --- | --- | --- | --- |
| **Category & Name** | **Examples of Commercial & Street Names** | **DEA Schedule** | **How Administered\*** |
| **Cocaine** | *Cocaine hydrochloride*: blow, bump, C, candy, Charlie, coke, crack, flake, rock, snow, toot | Schedule II drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule II drugs are available only by prescription (unrefillable) and require a form for ordering. | snorted, smoked, injected |
| **Amphetamine** | *Biphetamine, Dexedrine*: bennies, black beauties, crosses, hearts, LA turnaround, speed, truck drivers, uppers | Schedule II drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule II drugs are available only by prescription (unrefillable) and require a form for ordering. | swallowed, snorted, smoked, injected |
| **Methamphetamine** | *Desoxyn*: meth, ice, crank, chalk, crystal, fire, glass, go fast, speed | Schedule II drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule II drugs are available only by prescription (unrefillable) and require a form for ordering. | swallowed, snorted, smoked, injected |

**Acute Effects** - Increased heart rate, blood pressure, body temperature, metabolism; feelings of exhilaration; increased energy, mental alertness; tremors; reduced appetite; irritability; anxiety; panic; paranoia; violent behavior; psychosis

**Health Risks** - Weight loss, insomnia; cardiac or cardiovascular complications; stroke; seizures; addiction

**Also, for cocaine** – Nasal damage from snorting

**Also, for methamphetamine** – Severe dental problems

| Club Drugs | | | |
| --- | --- | --- | --- |
| **Category & Name** | **Examples of Commercial & Street Names** | **DEA Schedule** | **How Administered\*** |
| **MDMA (methylenedioxy-methamphetamine)** | Ecstasy, Adam, clarity, Eve, lover's speed, peace, uppers | Schedule I drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule I drugs are available for research only and have no approved medical use. | swallowed, snorted, injected |
| **Flunitrazepam\*\*** | *Rohypnol*: forget-me pill, Mexican Valium, R2, roach, Roche, roofies, roofinol, rope, rophies | Schedule IV drugs are available by prescription, may have five refills in 6 months, and may be ordered orally. | swallowed, snorted |
| **GHB\*\*** | *Gamma-hydroxybutyrate*: G, Georgia home boy, grievous bodily harm, liquid ecstasy, soap, scoop, goop, liquid X | Schedule I drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule I drugs are available for research only and have no approved medical use. | swallowed |

**Acute Effects, for MDMA** - Mild hallucinogenic effects; increased tactile sensitivity; empathic feelings; lowered inhibition; anxiety; chills; sweating; teeth clenching; muscle cramping

**Also, for Flunitrazepam** - Sedation; muscle relaxation; confusion; memory loss; dizziness; impaired coordination

**Also, for GHB** - Drowsiness; nausea; headache; disorientation; loss of coordination; memory loss

**Health Risks, for MDMA** - Sleep disturbances; depression; impaired memory; hyperthermia; addiction

**Also, for Flunitrazepam** - Addiction

**Also, for GHB** - Unconsciousness; seizures; coma

| Dissociative Drugs | | | |
| --- | --- | --- | --- |
| Category & Name | **Examples of Commercial & Street Names** | **DEA Schedule** | **How Administered\*** |
| **Ketamine** | *Ketalar SV:* cat Valium, K, Special K, vitamin K | Schedule III drugs are available by prescription, may have five refills in 6 months, and may be ordered orally. | injected, snorted, smoked |
| **PCP and analogs** | *Phencyclidine:* angel dust, boat, hog, love boat, peace pill | Schedule I & II drugs have a high potential for abuse. They require greater storage security & have a quota on manufacturing. Schedule I drugs are available for research only & have no approved medical use; Schedule II drugs are only by prescription. | swallowed, smoked, injected |
| **Salvia divinorum** | Salvia, Shepherdess's Herb, Maria Pastora, magic mint, Sally-D | Not Scheduled | chewed, swallowed, smoked |
| **Dextromethorphan (DXM)** | Found in some cough and cold medications: Robotripping, Robo, Triple C | Not Scheduled | swallowed |

**Acute Effects** - Feelings of being separate from one’s body and environment; impaired motor function

**Also, for ketamine** - Analgesia; impaired memory; delirium; respiratory depression and arrest; death

**Also, for PCP and analogs** - Analgesia; psychosis; aggression; violence; slurred speech; loss of coordination; hallucinations

**Also, for DXM** - Euphoria; slurred speech; confusion; dizziness; distorted visual perceptions

**Health Risks** - Anxiety; tremors; numbness; memory loss; nausea

| Hallucinogens | | | |
| --- | --- | --- | --- |
| **Category & Name** | **Examples of Commercial & Street Names** | **DEA Schedule** | **How Administered\*** |
| **LSD** | *Lysergic acid diethylamide:* acid, blotter, cubes, microdot yellow sunshine, blue heaven | Schedule I drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule I drugs are available for research only and have no approved medical use. | swallowed, absorbed through mouth tissues |
| **Mescaline** | Buttons, cactus, mesc, peyote | Schedule I drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule I drugs are available for research only and have no approved medical use. | swallowed, smoked |
| **Psilocybin** | Magic mushrooms, purple passion, shrooms, little smoke | Schedule I drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule I drugs are available for research only and have no approved medical use. | swallowed |

**Acute Effects** - Altered states of perception and feeling; hallucinations; nausea

**Also, for LSD** - Increased body temperature, heart rate, blood pressure; loss of appetite; sweating; sleeplessness; numbness, dizziness, weakness, tremors; impulsive behavior; rapid shifts in emotion

**Also, for Mescaline** - Increased body temperature, heart rate, blood pressure; loss of appetite; sweating; sleeplessness; numbness, dizziness, weakness, tremors; impulsive behavior; rapid shifts in emotion

**Also, for Psilocybin** - Nervousness; paranoia; panic

**Health Risks, for LSD** - Flashbacks, Hallucinogen Persisting Perception Disorder

| Other Compounds | | | |
| --- | --- | --- | --- |
| **Category & Name** | **Examples of Commercial & Street Names** | **DEA Schedule** | **How Administered\*** |
| **Anabolic steroids** | *Anadrol, Oxandrin, Durabolin, Depo-Testosterone, Equipoise*: roids, juice, gym candy, pumpers | Schedule III drugs are available by prescription, may have five refills in 6 months, and may be ordered orally. | Injected, swallowed, applied to skin |
| **Inhalants** | *Solvents (paint thinners, gasoline, glues); gases (butane, propane, aerosol propellants, nitrous oxide); nitrites (isoamyl, isobutyl, cyclohexyl)*: laughing gas, poppers, snappers, whippets | Not scheduled | Inhaled through nose or mouth |

**Acute Effects, for Anabolic steroids** - No intoxication effects

**Also, for Inhalants (varies by chemical)** - Stimulation; loss of inhibition; headache; nausea or vomiting; slurred speech; loss of motor coordination; wheezing

**Health Risks, for Anabolic steroids** - Hypertension; blood clotting and cholesterol changes; liver cysts; hostility and aggression; acne; in adolescents—premature stoppage of growth; in males—prostate cancer, reduced sperm production, shrunken testicles, breast enlargement; in females—menstrual irregularities, development of beard and other masculine characteristics

**Also, for Inhalants** - Cramps; muscle weakness; depression; memory impairment; damage to cardiovascular and nervous systems; unconsciousness; sudden death

**Prescription Medications**

| Depressants | | | |
| --- | --- | --- | --- |
| **Name** | **Examples of *Commercial* & Street Names** | **DEA Schedule** | **How Administered\*** |
| **Barbiturates** | *Amytal, Nembutal, Seconal, Phenobarbital*; barbs, reds, red birds, phennies, tooies, yellows, yellow jackets | Schedule II drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule II drugs are available only by prescription (unrefillable) and require a form for ordering. Schedule III drugs are available by prescription, may have five refills in 6 months, and may be ordered orally. Some Schedule V drugs are available over the counter. | injected, swallowed |
| **Benzodiazepines** | *Ativan, Halcion, Librium, Valium, Xanax*; candy, downers, sleeping pills, tranks | Schedule IV drugs are available by prescription, may have five refills in 6 months, and may be ordered orally. | swallowed |
| **Sleep Medications** | *Ambien (zolpidem), Sonata (zaleplon), Lunesta (eszopiclone)*; forget-me pill, Mexican Valium, R2, Roche, roofies, roofinol, rope, rophies | Schedule IV drugs are available by prescription, may have five refills in 6 months, and may be ordered orally. | swallowed, snorted |

**Intoxication Effects** - Sedation/drowsiness, reduced anxiety, feelings of well-being, lowered inhibitions, slurred speech, poor concentration, confusion, dizziness, impaired coordination and memory

**Potential Health Consequences** - lowered blood pressure, slowed breathing, tolerance, withdrawal, addiction; increased risk of respiratory distress and death when combined with alcohol

**Also, for barbiturates** - euphoria, unusual excitement, fever, irritability/life-threatening withdrawal in chronic users

| Opioids and Morphine Derivatives\*\* | | | |
| --- | --- | --- | --- |
| **Name** | **Examples of *Commercial* & Street Names** | **DEA Schedule** | **How Administered\*** |
| **Codeine** | *Empirin with Codeine, Fiorinal with Codeine, Robitussin A-C, Tylenol with Codeine*; Captain Cody, Cody, schoolboy; (with glutethimide: doors & fours, loads, pancakes and syrup) | Schedule II drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule II drugs are available only by prescription (unrefillable) and require a form for ordering. Schedule III drugs are available by prescription, may have five refills in 6 months, and may be ordered orally. Some Schedule V drugs are available over the counter. | injected, swallowed |
| **Morphine** | *Roxanol, Duramorph*; M, Miss Emma, monkey, white stuff | Schedule II drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule II drugs are available only by prescription (unrefillable) and require a form for ordering. Schedule III drugs are available by prescription, may have five refills in 6 months, and may be ordered orally. | injected, swallowed, smoked |
| **Methadone** | *Methadose, Dolophine*; fizzies, amidone, (with MDMA: chocolate chip cookies) | Schedule II drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule II drugs are available only by prescription (unrefillable) and require a form for ordering. | swallowed, injected |
| **Fentanyl & analogs** | *Actiq, Duragesic, Sublimaze*; Apache, China girl, China white, dance fever, friend, goodfella, jackpot, murder 8, TNT, Tango and Cash | Schedule II drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule II drugs are available only by prescription (unrefillable) and require a form for ordering. | injected, smoked, snorted |
| **Other opioid pain relievers: Oxycodone HCL, Hydrocodone Bitartrate Hydromorphone, Oxymorphone, Meperidine, Propoxyphene** | *Tylox, Oxycontin, Percodan, Percocet:* Oxy, O.C., oxycotton, oxycet, hillbilly heroin, percs *Vicodin, Lortab, Lorcet*; Vike, Watson-387 *Dilaudid*; juice, smack, D, footballs, dillies *Opana, Numporphan, Numorphone*; biscuits, blue heaven, blues, Mrs. O, octagons, stop signs, O bomb *Demerol, meperidine hydrochloride*; demmies, pain killer *Darvon, Darvocet* | Schedule II drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule II drugs are available only by prescription (unrefillable) and require a form for ordering. Schedule III drugs are available by prescription, may have five refills in 6 months, and may be ordered orally. Some Schedule V drugs are available over the counter. | chewed, swallowed, snorted, injected, suppositories |

**Intoxication Effects** - Pain relief, euphoria, drowsiness, sedation, weakness, dizziness, nausea, impaired coordination, confusion, dry mouth, itching, sweating, clammy skin, constipation

**Potential Health Consequences** - slowed or arrested breathing, lowered pulse and blood pressure, tolerance, addiction, unconsciousness, coma, death; risk of death increased when combined with alcohol or other CNS depressants

**Also for fentanyl** - 80-100 times more potent analgesic than morphine

**Also for oxycodone** - muscle relaxation/twice as potent analgesic as morphine; high abuse potential

**Also for codeine** - less analgesia, sedation, and respiratory depression than morphine

**Also for methadone** - used to treat opioid addiction and pain; significant overdose risk when used improperly

*\*\* Taking drugs by injection can increase the risk of infection through needle contamination with staphylococci, HIV, hepatitis, and other organisms. Injection is a more common practice for opioids, but risks apply to any medication taken by injection..*

| Stimulants | | | |
| --- | --- | --- | --- |
| **Name** | **Examples of *Commercial* & Street Names** | **DEA Schedule** | **How Administered\*** |
| **Amphetamines** | *Biphetamine, Dexedrine, Adderall*; bennies, black beauties, crosses, hearts, LA turnaround, speed, truck drivers, uppers | Schedule II drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule II drugs are available only by prescription (unrefillable) and require a form for ordering. | injected, swallowed, smoked, snorted |
| **Methylphenidate** | *Concerta, Ritalin*; JIF, MPH, R-ball, Skippy, the smart drug, vitamin R | Schedule II drugs have a high potential for abuse. They require greater storage security and have a quota on manufacturing, among other restrictions. Schedule II drugs are available only by prescription (unrefillable) and require a form for ordering. | injected, swallowed, snorted |

**Intoxication Effects** - Feelings of exhilaration, increased energy, mental alertness

**Potential Health Consequences** - increased heart rate, blood pressure, and metabolism, reduced appetite, weight loss, nervousness, insomnia, seizures, heart attack, stroke

**Also, for amphetamines** - rapid breathing, tremor, loss of coordination, irritability, anxiousness, restlessness/delirium, panic, paranoia, hallucinations, impulsive behavior, aggressiveness, tolerance, addiction

**Also, for methylphenidate** - increase or decrease in blood pressure, digestive problems, loss of appetite, weight loss

| Other Compounds | | | |
| --- | --- | --- | --- |
| **Name** | **Examples of *Commercial* & Street Names** | **DEA Schedule** | **How Administered\*** |
| **Dextromethorphan (DXM)** | *Found in some cough and cold medicines*; Robotripping, Robo,  Triple C | Not scheduled | swallowed |

**Intoxication Effects** - Euphoria, slurred speech

**Potential Health Consequences** - increased heart rate and blood pressure, dizziness, nausea, vomiting, confusion, paranoia, distorted visual perceptions, impaired motor function

**Notes** *Some of the health risks are directly related to the route of drug administration. For example, injection drug use can increase the risk of infection through needle contamination with staphylococci, HIV, hepatitis, and other organisms.*

*\*\* Associated with sexual assaults.*