Handbook and Policy Review

September 2009 – General updates approved by President

September 2011 – No changes

August 2013 – Revised Student Alcohol Policy item 1.
   Sentence in Legal Sanctions summary section. Changed sanction location in
   Student Code to match updated code.
   Approved by the President.

August 2015 – No changes

August 2016 – Updated MO work comp rules for employees
   Update federal drug chart
   Update sanction references to student code

August 2017 – Updated student alcohol policy

August 2019 – Updated references to student code

August 2021 -
UNIVERSITY OF HEALTH SCIENCES AND PHARMACY IN ST. LOUIS

DRUG AND ALCOHOL ABUSE

PREVENTION HANDBOOK

In accordance with the Drug Free Workplace Act and Drug Free Schools and Communities Act of 1989, University of Health Sciences and Pharmacy in St. Louis prohibits the unlawful manufacture, distribution, dispensation, possession, sale, or use of illicit drugs or alcohol on University premises. Institutions of higher education must certify that a program has been adopted and implemented to prevent the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees. An annual distribution of this document to each employee and to each student who is taking one or more classes for any type of academic credit except for continuing education units is required. A bi-annual review of the program will be conducted by the University to determine the effectiveness of the program and to insure that disciplinary sanctions are consistently enforced.

POSITION STATEMENT

University of Health Sciences and Pharmacy in St. Louis is committed to maintaining a safe, healthful, and efficient environment, which enhances the welfare of our faculty, staff and students. It is the policy of the University to maintain an environment that is free of impairment from substance abuse by any of its employees and students.

University of Health Sciences and Pharmacy in St. Louis believes that chemical dependency is a disease that can endanger the health and well-being of students, staff and faculty and can have a negative effect on the public that they serve.

University of Health Sciences and Pharmacy in St. Louis advocates treatment and rehabilitation for affected students, staff and faculty in a manner that first protects the public, while allowing a reasonable opportunity for recovery and re-entry into the work place/classroom.

University of Health Sciences and Pharmacy in St. Louis does not discriminate against individuals who are in recovery from chemical dependency in its academic programs or employment practices.

Additionally, University of Health Sciences and Pharmacy in St. Louis takes a community leadership role in health care professional education, research and public education on substance use, abuse and dependency.
POLICY ON USE OF ALCOHOL BEVERAGES ON AND OFF CAMPUS

Student Alcohol Policy

From Student Code (Section XXIV)

A. Policy on use of alcoholic beverages on campus

1. The possession consumption of alcoholic beverages by students on campus property is prohibited except to the extent that persons of lawful drinking age in Missouri are allowed to consume and store alcohol in University housing or at specific University events approved by the president. Examples include the graduate reception and specific alumni events. Efforts are made to ensure that such events include only students of drinking age.

2. Students found to be intoxicated on the University campus, regardless of where they consumed the alcohol, will have violated this policy.

3. Individual violations of this alcohol policy and/or federal or state regulations will be subject to disciplinary action as outlined in Section VI, of the Code of Non-Academic Student Conduct.

4. Proven violations of this alcohol policy and/or federal or state regulations by school organizations carry the potential penalty of suspension or revocation of official recognition of a group by the University, thereby prohibiting it from functioning on campus. All official student organizations are governed by the University policy on the use of alcoholic beverages. Many official student organizations also may be governed by the policies of national organizations. In any situation addressed by the University, or a group’s national organization, official student organizations will be required to adhere to the strictest policy regarding the use of alcoholic beverages.

5. Off-campus activities sponsored by official student organizations are not subject to direct control by the University. Student organizations, however, are expected to supervise and conduct their off-campus activities in a responsible and lawful manner and to follow the University’s Policy on the Use of Alcoholic Beverages. Students attending such off-campus student organization activities are expected to take personal responsibility for their conduct and to comply with this policy as well as all local, state, and federal laws and statutes.

B. Guidelines for off-campus events that include the serving of alcoholic beverages

1. The possession, use, serving, and/or consumption of alcoholic beverages during any event sponsored by a University-sanctioned student organization shall be in compliance with any and all local, state, and federal laws and statutes.

2. Valid age determinations will be made to assure compliance with minimum age requirements, including efforts to determine if a person is using a false ID.
3. The State of Missouri has a statute regarding falsification of ID cards for whatever purpose. The statute and consequent penalties for its violation are set forth below:
   a. As established in section 311.320 RSMO Any person who shall represent that s/he has attained the age of twenty-one years for the purpose of purchasing, asking for or in any way receiving any intoxicating liquor, or any other such identification card which indicates that the person represented on the card is over 21 years of age, is guilty of a misdemeanor and shall be subject to a fine of five hundred dollars for each separate offense.

4. Sale of alcoholic beverages by a University sponsored organization is prohibited. No portion of any charge levied for attendance at an event shall be used to pay for any alcoholic beverages.
   a. The serving and/or consumption of alcoholic beverages shall be carried out only by individuals 21 years of age or older.
   b. The serving and/or consumption of alcoholic beverages shall not be promoted as the primary focus of any event.
   c. Organizations are responsible for ensuring that moderation is encouraged during the lawful consumption of alcoholic beverages.
   d. A person’s decision not to use alcohol is to be respected.
   e. Food or snacks as well as non-alcoholic beverages must be readily available at any event in which alcoholic beverages are served.
   f. An appropriate number of designated drivers will be available at any event where alcoholic beverages are served.
   g. Professional security personnel will be employed at organizational events involving alcohol. Any school event held in an acceptable public facility that provides its own security is exempted from this requirement.
   h. Any student who feels that he/she has been incorrectly or falsely accused of an above offense may file an appeal as outlined in Section III.E of the Student Code

See also the University’s policy on Alcohol in the Residence Hall.

Staff and Faculty Alcohol Policy

1. Employees are prohibited from consuming or being under the influence of alcohol on campus, unless at an event sanctioned by the president or their designee.

2. When alcoholic beverages are officially sanctioned for University events, employees are expected to comply with all federal, state laws or local ordinances related to alcohol and act responsibly. It is a violation of policy to be intoxicated while working or attending University events. Some specific positions performing some types of
work (for example, technicians working with potentially dangerous equipment) are prohibited from alcohol consumption while working.

3. All employees attending University-sponsored student events shall abide by the University’s student policies on use of alcoholic beverages, on and off campus.

POLICY ON DRUG PARAPHERNALIA

Any and all types of drug paraphernalia including, but not limited to, bongs, pipes, hookahs, water pipes, or any items modified or adopted so that they can be used to consume drugs, are not permitted on University property. Drugs and drug paraphernalia will be confiscated when found on University property.

POLICY ON ILLICIT SUBSTANCES

The unlawful manufacture, distribution, dispensation, diversion, possession or use of controlled substances is prohibited on the University’s property or as a part of University activities. Violators are subject to University disciplinary action, as well as possible referral for criminal prosecution.

POLICY ON SUBSTANCE USE, ABUSE, OR DEPENDENCY REFERRALS AND SUPPORT

The University is committed to taking a community leadership role in health care professional and public education on substance use, abuse, and dependency. Every effort will be made to assist individuals experiencing difficulty related to substance use, abuse, or dependency. Students, faculty and staff who voluntarily seek help will be assisted with a referral to an appropriate licensed program.

Student Referrals and Support

Referral services for appropriate counseling and care related to drug and alcohol dependency are available through the UHSP Counseling Center and student affairs staff. Student confidentiality will be maintained as mentioned in the Student Code.

- **UHSP Counseling Center** 314-446-8338 or counselingcenter@UHSP.edu
1. Every effort will be made to assist students experiencing difficulty related to substance use, abuse, or dependency. Students who voluntarily seek help will be assisted with a referral to an appropriate licensed program. This referral process is outlined below.

2. The University provides referral services through the Counseling Center and Student Affairs Office. Students requesting or needing substance abuse evaluation or treatment will be referred to an appropriate health care professional for initial assessment and referral counseling. Student’s confidentiality will be maintained in accordance with state regulations, the Federal Register, and the Student Code (Policy on Confidentiality). Students will be responsible for any expense incurred as a result of the referral.

3. The University recognizes its obligation to be supportive of students who are chemically impaired and voluntarily seek help. The extent and nature of such support will vary depending on the specifics associated with the impairment and include a commitment by the individual to an evaluation at a licensed program.

4. Objectives associated with the University support program require that the dependent student:

   a. Acknowledge such impairment in writing
   b. Agree to professional evaluation
   c. Undergo appropriate treatment
   d. Remain chemically free

5. In return the University will maintain confidentiality regarding the student dependency and will agree to assure continued enrollment or reenrollment following compliance with objectives subject to professional evaluation and recommendations.

**Staff and Faculty Referrals and Support**

1. As a condition of employment staff and faculty are required to comply with policies above and notify the University.

   a. If an employee is convicted, (including a plea of no contest) of a criminal drug violation **IN OUR WORKPLACE**, the employee must inform his/her supervisor or Director, Human Resources within five days after the conviction. Failure to do so will result in discipline up to and may include termination of employment.

   b. Notify the University Director of Human Resources of any prescribed medical treatment with any drug which interferes with the ability to do his/her job. An
employee should be able to provide proof of the legal prescription.

2. University of Health Sciences and Pharmacy in St. Louis encourages employees to voluntarily seek assistance in dealing with any substance abuse problem. However, personnel found to be in violation of this policy may be required, at the discretion of the University, to participate in a drug or alcohol abuse counseling or rehabilitation program at the employee’s expense, and/or may be subject to discipline, including suspension or termination of employment. The University can make available a clinical psychologist for initial assessment and referral counseling. Should it be found necessary, the employee will be referred to a treatment-diagnostic facility for total diagnosis. Diagnostic findings determine the need, the mode, and the intensity of rehabilitation to be employed. The faculty or staff member will be liable for all costs, except to the extent they are covered by health insurance, the employee assistance program or other University benefits.

- Employee Assistance Program (EAP) 314-845-8302 or 800-832-8302

UNIVERSITY SANCTIONS AND APPEALS

Students

Refer to the Student Code: Section XVIII: Conduct Sanctions

Staff and Faculty

Refer to Faculty or Staff Handbook:

Personnel in violation of this policy may be subject to discipline, including suspension or termination of employment. Measures and/or penalties assessed for drug or alcohol violations in the workplace are dependent on the nature of the violation, and shall be within the sole discretion of the University.

Sanctions will be determined by an assessment committee chaired by the Director, Human Resources. This committee will include the individual’s immediate supervisor, Vice President/Dean, and a resource person knowledgeable in substance abuse and dependency. Appropriate discipline will be recommended to the President of the University, up to and including termination.

CRIMINAL/LEGAL SANCTIONS

Illicit Drugs
Criminal sanctions for violations of state and federal laws prohibiting the unlawful possession and distribution of illicit drugs are provided for your information.

**Missouri Law**

Missouri Drug Regulations (Mo. REV. STAT § 579.055) make it unlawful for any person to distribute, deliver, manufacture, produce or attempt to distribute, deliver, manufacture or produce a controlled substance or to possess with intent to distribute, deliver, manufacture, or produce a controlled substance. Any person who violates or attempts to violate this section with respect to any controlled substance except 35 grams or less of marijuana is guilty of a class D felony. Additionally, it is a class A felony to distribute or deliver a controlled substance on or near University property. Persons convicted of this offense can be sentenced to imprisonment for not less than 10 years. Conviction for possession of illicit drugs may result in up to 7 years of imprisonment and a maximum fine of $10,000, unless the offense involves more than 10 grams but less than 35 grams of marijuana, which entails up to 1 year in prison and a fine of $2,000. Anyone who violates this law with respect to distributing or delivering 35 grams of marijuana may be guilty of a Class E felony.

**Illinois Law**

The Illinois Controlled Substances Act (720ILCS570/201) makes possession of a controlled substance a felony criminal offense under Illinois law. Generally, possession convictions result in a Class 4 felony with a sentence of 1-3 years in prison or a fine of $25,000. Conviction for possession of illicit drugs results in a Class 1 felony with 6 to 50 years’ imprisonment and a fine up to $200,000, unless the offense involves a smaller amount (100 grams or less) of certain drugs, which elicits 4 to 15 years in prison or a fine of $25,000.

The Illinois Drug Paraphernalia Act (720 ILCS 600/2) makes it a Class A misdemeanor to knowingly possess drug paraphernalia. The law does not distinguish between the types of drug paraphernalia used except for methamphetamine manufacturing materials. The penalties for possessing a pipe to smoke marijuana are the same as a needle to shoot heroin, even though heroin is regarded as a more dangerous drug.

**Federal Law**

The Federal Controlled Substances Act prohibits the knowing, intentional, and unauthorized manufacture, distribution, or dispensing of any controlled substance or the possession of any controlled substance with intent to manufacture, distribute, or dispense. A detailed description of the penalties associated with illegal drug trafficking is provided in the chart, Federal Trafficking Penalties, published by the U.S. Department of Justice’s Drug Enforcement Administration as found in Chart Two.

The severity of the sanctions imposed for both possession and distribution offenses depend on the type and quantity of drugs, prior convictions, and whether death or
serious injury resulted. Sanctions may be increased for offenses which involve
distribution to minors or occur on or near University premises.

Other Consequences
In addition, other federal laws require or permit forfeiture of person or real property used
to illegally possess, facilitate possession, transport or conceal a controlled substance. A
person’s right to purchase a firearm or receive federal benefits, such as student loans,
grants, contracts, or professional or commercial licenses, may be revoked or denied as a
result of a drug conviction. Additionally, federal law mandates that any student who has
been convicted of an offense under any federal or state law involving the possession or
sale of a controlled substance shall not be eligible to receive any grant, loan, or work
assistance during the period on the date of such conviction and ending after the interval
specified.

Alcohol

Missouri Law
Alcohol: Missouri’s Liquor Control Law makes it illegal, among other things, for a person under
the age of 21 years to purchase, attempt to purchase, or possess any intoxicating liquor
(Mo.REV. STAT. 311.325). Violation of this provision can result in a fine between $50 and $2000
and/or imprisonment for a maximum term of one year. County and municipality ordinances
contain similar prohibitions and sanctions.

Illinois Law
It is against Illinois law to sell or distribute alcoholic beverages to persons under 21 years of age
or to anyone who is intoxicated. Violation is a Class A misdemeanor with a minimum fine of $500.
Persons under 21 who possess alcoholic beverages on the street or in a public area may be
subject to a Class A misdemeanor.

Risk of Loss of Workers’ Compensation Rights

The Missouri Workers’ Compensation Act requires the forfeiture of benefits or compensation
otherwise payable to an employee when the use of alcohol or illicit drugs is the proximate cause
of the employee’s injury. At a minimum, the Act provides for a reduction in compensation or
death benefit when the employee is injured while using alcohol or illicit drugs. Employees who
have been involved in a work related accident may be asked to take drug and alcohol testing if
there is reasonable suspicion. This applies to all paid employees (faculty, staff and students).

EFFECTS OF DRUGS AND ALCOHOL

Drugs
There are numerous health risks associate with the use of illicit drugs. Substance abuse may lead to damaged vital organs such as liver, brain and kidneys. For further information see Chart One.

**Alcohol**

Alcohol consumption causes a number of marked changes in behavior. Even small quantities can significantly impair the judgment and coordination required to drive a car safely, increasing the likelihood that the driver will be involved in an accident. Low to moderate alcohol use also increases the incidence of a variety of aggressive acts, including spouse and child abuse. Moderate to high alcohol use causes marked impairments in higher manual functions, severely altering a person’s ability to learn and remember information. Very high alcohol use causes respiratory depression and death. If combined with other depressants of the central nervous system, much lower doses of alcohol will produce the effects just described. Repeated use of alcohol can lead to dependence. Sudden cessation of alcohol intake is likely to produce withdrawal symptoms, including severe anxiety, tremors, hallucinations, and convulsions. Alcohol withdrawal can be life threatening. Long-term consumption of larger quantities of alcohol, particularly when combined with poor nutrition can also lead to permanent damage to vital organs such as the brain and the liver. Mothers who drink alcohol during pregnancy may give birth to infants with fetal alcohol syndrome. These infants have irreversible physical abnormalities and mental retardation. In addition, research indicated that children of alcoholic parents are at greater risk of becoming alcoholics than other children.

**DEFINITIONS**

For purposes of this policy; the following definitions apply:

**Illicit Substance:** Any controlled substance listed in Schedules I through V of Section 202 of the Federal Controlled Substance Act, Chapter 195 of the Missouri Revised Statutes, Chapter 56 1/2 of the Illinois Revised Statutes, Title 35 of the Indiana Code, or other applicable laws.

**Substance Abuse:**

1. A pattern of intentional and inappropriate use of any substance, legal or illegal, that interferes with any of several major life functions, including an individual’s education and/or job performance;

2. Use of any illegal drug;

3. Intentional misuse of any over-the-counter drug, in cases where such misuse impairs job performance; or
4. Use of any prescription drug in a manner inconsistent with its medically prescribed, intended use, or under circumstances where use is not permitted.

**Campus:** Includes all land, facilities and other property in the possession of, or owned, used or controlled by the University (including adjacent streets and sidewalks).

**University Activities:** Includes any on-campus or off-campus student events or function conducted, sponsored, approved or funded, in whole or in part, by the University.
## Chart One: CONTROLLED SUBSTANCES – Uses and Effects

<table>
<thead>
<tr>
<th>Drugs CSA Schedules</th>
<th>Trade or Other Names</th>
<th>Medical Uses</th>
<th>Dependence</th>
<th>Physical</th>
<th>Psychological</th>
<th>Toleranc</th>
<th>Duration (Hours)</th>
<th>Usual Methods of Administration</th>
<th>Possible Effects</th>
<th>Effects of Overdose</th>
<th>Withdrawal Syndrome</th>
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</thead>
<tbody>
<tr>
<td><strong>NARCOTICS</strong></td>
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<tr>
<td>Opium</td>
<td>II  III  V</td>
<td>Dover’s Powder, Paregonic, Paracotolin</td>
<td>Analgesic, Antidiarrheal</td>
<td>High</td>
<td>High</td>
<td>Yes</td>
<td>3-6</td>
<td>Oral, smoked</td>
<td>• Euphoria</td>
<td>• Slow and shallow breathing</td>
<td>• Watery eyes, runny nose</td>
</tr>
<tr>
<td>Morphine</td>
<td>II  III</td>
<td>Morphin, Ms-Cortin, Roxanol, Roxanol-SR</td>
<td>Analgesic, Antitussive</td>
<td>High</td>
<td>High</td>
<td>Yes</td>
<td>3-6</td>
<td>Oral, Smoked injected</td>
<td>• Drowsiness</td>
<td>• Clammy skin</td>
<td>• Yawning</td>
</tr>
<tr>
<td>Codeine</td>
<td>II  III  V</td>
<td>Tylenol w/ Codeine, Empirin w/ Codeine, Robitussin A-C</td>
<td>Analgesic, Antitussive</td>
<td>Moderate</td>
<td>Moderate</td>
<td>Yes</td>
<td>3-6</td>
<td>Oral, injected</td>
<td>• Respirator depression</td>
<td>• Constricted pupils</td>
<td>• Loss of appetite</td>
</tr>
<tr>
<td>Heroin</td>
<td>I</td>
<td>Dicetylmorphine, Horse, Smack</td>
<td>None</td>
<td>High</td>
<td>High</td>
<td>Yes</td>
<td>3-6</td>
<td>Injected, sniffed, smoked</td>
<td>• Constricted pupils</td>
<td>• Coma</td>
<td>• Intiminity</td>
</tr>
<tr>
<td>Hydromorphone</td>
<td>II</td>
<td>Dilaudid</td>
<td>Analgesic</td>
<td>High</td>
<td>High</td>
<td>Yes</td>
<td>3-6</td>
<td>Oral, injected</td>
<td>• Nausea</td>
<td>• Possible death</td>
<td>• Tremors</td>
</tr>
<tr>
<td>Meperidine (Pethidine)</td>
<td>II</td>
<td>Demerol, Mepergan</td>
<td>Analgesic</td>
<td>High</td>
<td>High</td>
<td>Yes</td>
<td>3-6</td>
<td>Oral, injected</td>
<td>• Watery eyes, runny nose</td>
<td>• Yawning</td>
<td>• Cramps</td>
</tr>
<tr>
<td>Methadone</td>
<td>II</td>
<td>Dolophine, Methadone, Methadose</td>
<td>Analgesic</td>
<td>High</td>
<td>High-Low</td>
<td>Yes</td>
<td>Variable</td>
<td>Oral, injected</td>
<td>• Chills and sweating</td>
<td>• Nausea</td>
<td>• Anorexia</td>
</tr>
<tr>
<td>Other Narcotics</td>
<td>I  II  III  IV V</td>
<td>Numorphan, Percodan, Percocet, Tylox, Tussionex, Fentanyl, Darvon, Lomotil, Talwin</td>
<td>Analgesic, antidiarrheal, antitussive</td>
<td>High-Low</td>
<td>High-Low</td>
<td>Yes</td>
<td>12-24</td>
<td>Oral, injected</td>
<td>• Altered speech</td>
<td>• Shallow respiration</td>
<td>• Anxiety</td>
</tr>
<tr>
<td><strong>DEPRESSANTS</strong></td>
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<tr>
<td>Chloral Hydrate</td>
<td>IV</td>
<td>Noctec</td>
<td>Hypnotic</td>
<td>Moderate</td>
<td>Moderate</td>
<td>Yes</td>
<td>5-18</td>
<td>Oral</td>
<td>• Slurred speech</td>
<td>• Shallow respiration</td>
<td>• Anxiety</td>
</tr>
<tr>
<td>Barbiturates</td>
<td>II  III  IV</td>
<td>Amytal, Butisol, Flonal, Lotusate, Nembutal, Seconal, Tuinal, Phenobarbital</td>
<td>Anesthetic, anticonvulsant, sedative hypnotic, veterinary euthanasia agent</td>
<td>High-Moderate</td>
<td>High-Moderate</td>
<td>Yes</td>
<td>1-16</td>
<td>Oral</td>
<td>• Disorientation</td>
<td>• Clammy skin</td>
<td>• Tremors</td>
</tr>
<tr>
<td>Benzodiazepines</td>
<td>IV</td>
<td>Ativan, Darmaine, Dazepam, Librium, Xanax, Serax, Valium, Tranxene, Venshen, Versed, Halcion, Paxipam, Restoril</td>
<td>Antianxiety, anticonvulsant, sedative, hypnotic</td>
<td>Low</td>
<td>Low</td>
<td>Yes</td>
<td>4-8</td>
<td>Oral</td>
<td>• Drunken behavior without odor of alcohol</td>
<td>• Dilated pupils</td>
<td>• Delirium</td>
</tr>
<tr>
<td>Methaqualone</td>
<td>I</td>
<td>Quaalude</td>
<td>Sedative, hypnotic</td>
<td>High</td>
<td>High</td>
<td>Yes</td>
<td>4-8</td>
<td>Oral</td>
<td>• Coma</td>
<td>• Weak and rapid pulse</td>
<td>• Possible death</td>
</tr>
<tr>
<td>Glutethimide</td>
<td>III</td>
<td>Dormin</td>
<td>Sedative, hypnotic</td>
<td>High</td>
<td>Moderate</td>
<td>Yes</td>
<td>4-8</td>
<td>Oral</td>
<td>• Nausea</td>
<td>• Increased alerterness</td>
<td>• Apathy</td>
</tr>
<tr>
<td>Other Depressants</td>
<td>III  IV</td>
<td>Equanil, Miltown, Noludar, Placidyl, Vamil</td>
<td>Antianxiety, sedative, hypnotic</td>
<td>Moderate</td>
<td>Moderate</td>
<td>Yes</td>
<td>4-8</td>
<td>Oral</td>
<td>• Agitation</td>
<td>• Increase in body temperature</td>
<td>• Long periods of sleep</td>
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<tr>
<td><strong>STIMULANTS</strong></td>
<td></td>
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<tr>
<td>Cocaine</td>
<td>II</td>
<td>Coke, Flake, Snow, Crack</td>
<td>Local Anesthetic</td>
<td>Possible</td>
<td>High</td>
<td>Yes</td>
<td>1-2</td>
<td>Sniffled, smoked, injected</td>
<td>• Increased alertness</td>
<td>• Agitation</td>
<td>• Apathy</td>
</tr>
<tr>
<td>Amphetamines</td>
<td>II</td>
<td>Bephateamine, De tolubase, Desoxyx, Dexedrine, Obothol</td>
<td>Attention deficit disorders, narcolepsy, weight control</td>
<td>Possible</td>
<td>High</td>
<td>Yes</td>
<td>2-4</td>
<td>Oral, injected</td>
<td>• Excitation</td>
<td>• Increase in body temperature</td>
<td>• Long periods of sleep</td>
</tr>
<tr>
<td>Phenmetrazine</td>
<td>II</td>
<td>Preludin</td>
<td>Weight control</td>
<td>Possible</td>
<td>High</td>
<td>Yes</td>
<td>2-4</td>
<td>Oral, injected</td>
<td>•</td>
<td>•</td>
<td>•</td>
</tr>
<tr>
<td>Drugs CSA Schedules</td>
<td>Trade or Other Names</td>
<td>Medical Uses</td>
<td>Dependence</td>
<td>Physical Psychological</td>
<td>Tolerance</td>
<td>Duration (Hours)</td>
<td>Usual Methods of Administration</td>
<td>Possible Effects</td>
<td>Effects of Overdose</td>
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<tr>
<td>Methylphenidate</td>
<td>II</td>
<td>Ritalin</td>
<td>Attention deficit disorders, narcolepsy</td>
<td>Possible</td>
<td>Moderate</td>
<td>Yes</td>
<td>2-4 Oral, injected</td>
<td>• Euphoria</td>
<td>• Hiccups</td>
<td>• Inability</td>
<td></td>
</tr>
<tr>
<td>Other Stimulants</td>
<td>III IV</td>
<td>Adipex, Cyber, Bidex, Ionamin, Meplat, Plegine, Sanorex, Tenuate, Tepani, Preli-2</td>
<td>Weight control</td>
<td>Possible</td>
<td>High</td>
<td>Yes</td>
<td>2-4 Oral, injected</td>
<td>• Increased pulse rate &amp; blood pressure</td>
<td>• Insomnia</td>
<td>• Depression, Disorientation</td>
<td></td>
</tr>
</tbody>
</table>

**HALLUCINOGENS**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>None</th>
<th>None</th>
<th>Unknown</th>
<th>Yes</th>
<th>8-12</th>
<th>Oral</th>
<th>province or time and distance</th>
<th>Possible death</th>
<th>Withdrawal syndrome not reported</th>
</tr>
</thead>
<tbody>
<tr>
<td>LSD</td>
<td>Acids, Microdot</td>
<td>None</td>
<td>None</td>
<td>Unknown</td>
<td>Yes</td>
<td>8-12</td>
<td>Oral</td>
<td>• Illusions and Hallucinations</td>
<td>• Longer more intense “trip” episodes</td>
<td>• Psychosis</td>
</tr>
<tr>
<td>Mescaline and Peyote</td>
<td>Mex, Buttons, Cactus</td>
<td>None</td>
<td>None</td>
<td>Unknown</td>
<td>Yes</td>
<td>8-12</td>
<td>Oral</td>
<td>• Poor perception of time and distance</td>
<td>• Possible death</td>
<td>• Withdrawal syndrome not reported</td>
</tr>
<tr>
<td>Amphetamine Variants</td>
<td>2,5-DMA, PMA, ETP, MDA, MDMA, TMA, DOM, DOB</td>
<td>None</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Yes</td>
<td>Variable</td>
<td>Oral, injected</td>
<td>• Virileze</td>
<td>• Fatigue</td>
<td>• Insomnia</td>
</tr>
<tr>
<td>Phencyclidine</td>
<td>PCP, Angel Dust, Hog</td>
<td>None</td>
<td>Unknown</td>
<td>High</td>
<td>Yes</td>
<td>Days</td>
<td>Smoked, oral, injected</td>
<td>• Acne</td>
<td>• Hyperactivity and decreased appetite occasionally reported</td>
<td>• Insomnia</td>
</tr>
<tr>
<td>Phencyclidine Analogues</td>
<td>PCE, PCPy, TCP</td>
<td>None</td>
<td>Unknown</td>
<td>High</td>
<td>Yes</td>
<td>Days</td>
<td>Smoked, oral, injected</td>
<td>• Testicular atrophy</td>
<td>• Aggressive Behavior</td>
<td>• Edema</td>
</tr>
<tr>
<td>Other Hallucinogens</td>
<td>Bufotenine, Ibogaine, DMT, DET, Psilocybin, Psilocyn</td>
<td>None</td>
<td>None</td>
<td>Unknown</td>
<td>Possible</td>
<td>Variable</td>
<td>Smoked, oral, injected, sniffed</td>
<td>• Gynecomastia</td>
<td>• Possible psychosis</td>
<td>• Depression, Disorientation</td>
</tr>
</tbody>
</table>

**CANNABIS**

<table>
<thead>
<tr>
<th></th>
<th>None</th>
<th>Unknown</th>
<th>Moderate</th>
<th>Yes</th>
<th>2-4</th>
<th>Smoked, oral</th>
<th>• Euphoria</th>
<th>• Relaxed inhibitions</th>
<th>• Anemia, Breast</th>
<th>• Possible depression</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marijuana</td>
<td>Pain, Acapuko Gold, Grass, Reelft, Sinsemilla, Thai Sticks</td>
<td>None</td>
<td>Unknown</td>
<td>Moderate</td>
<td>Yes</td>
<td>2-4</td>
<td>Smoked, oral</td>
<td>• Fatigue</td>
<td>• Acne</td>
<td>• Testicular atrophy</td>
</tr>
<tr>
<td>Tetrahydrocannabinol I</td>
<td>THC, Mariol</td>
<td>Cancer chemotherapy antiinflammatory</td>
<td>Unknown</td>
<td>Moderate</td>
<td>Yes</td>
<td>2-4</td>
<td>Smoked, oral</td>
<td>• Paranoia</td>
<td>• Gynecomastia</td>
<td>• Aggressive Behavior</td>
</tr>
<tr>
<td>Hashish I</td>
<td>Hash</td>
<td>None</td>
<td>Unknown</td>
<td>Moderate</td>
<td>Yes</td>
<td>2-4</td>
<td>Smoked, oral</td>
<td>• Increased appetite</td>
<td>• Possible psychosis</td>
<td>• Edema</td>
</tr>
<tr>
<td>Hashish Oil I</td>
<td>Hash Oil</td>
<td>None</td>
<td>Unknown</td>
<td>Moderate</td>
<td>Yes</td>
<td>2-4</td>
<td>Smoked, oral</td>
<td>• Disoriented behavior</td>
<td>•</td>
<td></td>
</tr>
</tbody>
</table>

**ANABOLIC STEROIDS**

<table>
<thead>
<tr>
<th></th>
<th>Dopo-Testosterone, Delaexityl</th>
<th>Hypogonadism</th>
<th>Unknown</th>
<th>Unknown</th>
<th>Unknown</th>
<th>14-28</th>
<th>Injected</th>
<th>• Virileze</th>
<th>• Unknown</th>
<th>• Possible depression</th>
</tr>
</thead>
<tbody>
<tr>
<td>Testosterone (Cyproterone, Ethaneate)</td>
<td>III</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nandrolone (Decaneate, Phenpropoate) III</td>
<td>Nordestosterone, Durabolin, Deca-Durabolin, Deca</td>
<td>Anemia, Breast</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>14-21</td>
<td>Injected</td>
<td>• Testicular atrophy</td>
<td>• Gynecomastia</td>
<td>• Aggressive Behavior</td>
</tr>
<tr>
<td>Oxymethabrone III</td>
<td>Anadrol-50</td>
<td>Anemia</td>
<td>Unknown</td>
<td>Unknown</td>
<td>Unknown</td>
<td>13-14</td>
<td>Oral</td>
<td>• Edema</td>
<td>•</td>
<td></td>
</tr>
</tbody>
</table>