

DRUG EVALUATION AND CLASSIFICATION PROGRAM

Symptomatology Matrix

MAJOR INDICATORS	CNS DEPRESSANTS	CNS STIMULANTS	HALLUCINOGENS	DISSOCIATIVE	NARCOTIC ANALGESICS	INHALANTS	CANNABIS
Horizontal Gaze Nystagmus	Present	Not Present	Not Present	Present	Not Present	Present	Not Present
Vertical Nystagmus	Possibly Present	Not Present	Not Present	Possibly Present	Not Present	Possibly Present	Not Present
Lack of Convergence	Present	Not Present	Not Present	Present	Not Present	Present	Present
Pupil Size	Within Normal Range	Dilated	Dilated	Within Normal Range	Constricted	Depends on Substance	Within Normal or Dilated
Reaction to Light	Slowed	Slowed	near Normal	Near Normal	Little or No Visible reaction	Depends on Substance	Near Normal
Pulse Rate	Below Normal	Above Normal	Above Normal	Above Normal	Below Normal	Above Normal	Above Normal
Blood Pressure	Below Normal	Above Normal	Above Normal	Above Normal	Below Normal	Depends on Substance	Above Normal
Body Temperature	Within Normal Range	Above Normal	Above Normal	Above Normal	Below Normal	Depends on Substance	Within Normal Range
Muscle Tenseness		May be Present	May be Present	Present			
GENERAL INDICATORS	Uncoordinated Disorientation Sluggish Thick, slurred speech Drunk-like behavior Gait ataxia Drowsiness Droopy eyes Fumbling	Restlessness Body Tremors Excited Euphoric Talkative Exaggerated reflexes Anxiety Grinding teeth (bruxism) Redness to nasal area Runny nose Loss of appetite Insomnia Increased alertness Dry mouth Irritability	Dazed appearance Body tremors Synesthesia Hallucinations Paranoia Uncoordinated Nausea Disorientation Difficulty in speech Perspiring Poor perception of time & distance Memory loss Flashbacks	Perspiring Warm to the touch Blank stare Very early angle of HGN onset Difficulty in speech Incomplete verbal response Repetitive speech Increased pain threshold Cyclic behavior Confused agitation Hallucinations Possibly violent & combative Chemical odor "Moon walking"	Droopy eyelids (ptosis) "On the nod" Drowsiness Depressed reflexes Low, raspy speech Dry mouth Facial itching Euphoria Fresh puncture marks Nausea Track marks	Residue of substance around nose and mouth Odor of substance Possible nausea Slurred speech Disorientation Confusion Bloodshot, watery eyes Lack of muscle control Flushed face Non-communicative	Marked reddening of sclera Odor of marijuana Marijuana debris in mouth Body tremors Eyelid tremors Relaxed inhibitions Increased appetite Impaired perception of time & distance Disorientation Possible paranoia
	*NOTE: With methaqualone, pulse will be elevated and body tremors will be evident. Pupils will be dilated with ludes		NOTE: With LSD, piloerection may be observed (goose bumps, hair standing on end)		NOTE1: Hippus may be evident during withdrawal NOTE2: Tolerant users exhibit relatively little psychomotor impairment	**NOTE: Anesthetic gases usually cause below normal blood pressure; volatile solvents & aerosols may cause above normal blood pressure	
DURATION OF EFFECTS	Barbiturates: 1-16 hours Tranquilizers: 4-8 hours Chloralhydrates: 5-8 hours Methaqualone: 4-8 hours	Cocaine: 5-90 minutes Amphetamines: 4-8 hours	varies widely from one hallucinogen to another - roughly 7-9 hours	Onset: 1-5 minutes Peek effects: 15-30 minutes	3-6 hours	6-8 hours	2-3 hours
USUAL METHOD OF ADMINISTRATION	Oral Injected (Occasionally)	Insufflation (snorting) Smoked Injected Oral	Oral Insufflation Smoked Injected	Smoked Oral Insufflation Injected Eye drops	Injected Oral Smoked	Insufflation	Smoked Oral
OVERDOSE SIGNS	Shallow breathing Cold, clammy skin Dilated pupils Rapid, weak pulse Coma	Agitation Hallucinations Convulsions Increased body temperature	Long intense "trip" Psychosis	Long intense "trip" Psychosis	Clamy skin Coma Convulsions Slow, shallow breathing	Coma	Fatigue Paranoia