SAFER ROADS ARE IN YOUR HANDS

COMPREHENSIVE ANSWERS

ADVANCING ROADSIDE DRUG TESTING

NCSL TRAFFIC SAFETY PRE-CONFERENCE
JULY 31, 2022
Impaired driving investigation: Oral fluid screening

- **Screening** = qualitative result (+/-); can aid in establishing probable cause; not admitted in court as evidence
- **Confirmation** = quantitative result (ng level); analysis performed in a forensic laboratory to confirm presence of drug(s) in body; admissible as evidence in court

**SOURCES**
Advantages of roadside drug testing

Roadside drug testing programs that utilize oral fluid screening have multiple benefits:

- Aid the investigative process (e.g., help establish probable cause)
- Enhance public safety
- Support strategic use/allocation of resources
- Create general deterrence
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Oral fluid screening technology

- Analyzer devices use lateral flow immunoassay technology.
- Simple and quick collection process; subject performs oral fluid collection using swab.
- Cartridges inserted into instruments analyze oral fluid sample.
- Most devices test for common drugs of abuse (e.g., cannabis (THC), cocaine, amphetamines, methamphetamines, opioids, benzodiazepines).
- Devices use pre-set cut-off levels for each drug.
- Rapid screening results returned in minutes.
- Officers do not have to interpret results - analyzer provides qualitative result for each drug (objective measure).
- Ability to print results (e.g., to attach to arrest reports); technology can store test results (including date/time).
- Technology has built-in quality checks and procedures.
Benefits of oral fluid screening technology

• Easy and rapid sample collection
• Portability (ideal for roadside environment)
• Minimally invasive; comparable to a preliminary breath test
• Ability to collect sample proximal to the time of a traffic stop
• Active drug detection shows recent use
• Gender-neutral collections
• Medical personnel are not required for sample collection
• Real-time information to support decision-making
• Results can support search warrant requests for evidential samples (e.g., blood)
• Ability to identify polysubstance-impaired drivers
• Can lead to creation of ALS/ALR process for drug-impaired drivers
SoToxa: Drugs and cut-offs

- Cut-off level - the decision point which differentiates a test result as being either positive or negative.
- The cut-off for a test is given as a defined drug concentration.
- For drug screening tests, a cut-off is chosen that will minimize the number of false positive results.

<table>
<thead>
<tr>
<th>DRUG GROUP</th>
<th>TARGET COMPOUND</th>
<th>CUT-OFF (ng/mL)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amphetamine</td>
<td>(S) Amphetamine</td>
<td>50</td>
</tr>
<tr>
<td>Benzodiazepine</td>
<td>Temazepam</td>
<td>20</td>
</tr>
<tr>
<td>Cannabis</td>
<td>Delta-9-THC</td>
<td>25</td>
</tr>
<tr>
<td>Cocaine</td>
<td>Benzoylecgonine</td>
<td>30</td>
</tr>
<tr>
<td>Methamphetamine</td>
<td>(S) Methamphetamine</td>
<td>50</td>
</tr>
<tr>
<td>Opiates</td>
<td>Morphine</td>
<td>40</td>
</tr>
</tbody>
</table>
STRENGTHENING THE DUI/D SYSTEM

Current policy landscape: Oral fluid authorization

- Oral fluid can be authorized for screening, evidential testing, or both.
- 23 states authorize oral fluid testing in statute in some form (approaches include: implied consent, preliminary testing, pilot laws, etc.).
- Oral fluid pilots have been completed in numerous jurisdictions.
- Shift towards conducting feasibility studies and implementing permanent programs.

ORAL FLUID AUTHORIZED TO DETECT DRUGS?

October 2020

- Covered by implied consent law (14)
- Authorized by impaired driving statute; implied consent N/A (8)
- Authorized for state pilot program (1)
- Not authorized (27 plus DC)

In practice, oral fluid is not collected/used even if authorized.

SOURCES
Legalization lessons

- Traffic safety must be considered when debating legalization.
- States should take a proactive and comprehensive approach to address drug and polysubstance-impaired driving.
- Roadside drug testing can provide better insight into the magnitude and characteristics of the DUID problem to inform decision-making.
- Canadian example - roadside oral fluid screening was authorized in advance of legalization to protect public safety and create general deterrence.
Roadside programs: Pathways to implementation

- Established via legislation and funded by the **STATE LEGISLATURE**. (e.g., Michigan)
- Established and funded by a **STATE HIGHWAY SAFETY OFFICE** (program implemented by law enforcement agencies). (e.g., Indiana)
- Launched by a **LAW ENFORCEMENT AGENCY**. (e.g., California, Illinois)
- Established by a **STATE AGENCY** (e.g., forensic laboratory) in coordination with law enforcement agencies and other partners. (e.g., Alabama)
Michigan pilot findings

- Michigan State Police (MSP) pilot study concluded:
  - Oral fluid has been found to be accurate for purposes of preliminary roadside testing.
  - It is one of many tools that officers can use during impaired driving investigations.
  - SoToxa is easy to use, requires minimum training, and provides a result within 5 minutes after collection of the sample.

- Legislation is pending that would authorize preliminary oral fluid screening in Michigan, establishing parity with preliminary breath testing.

- Michigan pilot data used to establish a permanent statewide program in Indiana.
ADVANCING PROGRESS

Indiana: Benchmark for success

• Program launched in November 2020 with phased rollout.

• Statewide implementation at local level; ARIDE-trained officers.

• Significant indicators of success:
  – Increase in identification of drug-impaired drivers including drivers under the influence of multiple drugs.
  – Increase in DRE drug evaluations.
  – Increase in drug submissions to forensic laboratory.
  – Increase in officer engagement with training (all-time high participation in ARIDE trainings).

![Total SoToxa Tests](chart.png)

- **Negative**: 607
- **Positive**: 739
- **Total**: 1345
ADVANCING PROGRESS

Indiana: Benchmark for success

- Significant increase in submissions to lab for drug analysis:
  - 61 of 92 (78%) of counties increased submissions by 15% or more.
  - 42 of 92 (46%) of counties increased submissions by 50% or more.
  - 71.1% of submissions positive for one or more drugs (6,246 vs. 6,720).
  - THC positives increased from 40.4% in 2019 to 53.4% in 2021 (+13%).
Contact information

Erin Holmes  |  Director, Global Road Safety Abbott  |  erin.holmes@abbott.com