



## Drug and Alcohol Abuse Prevention Program

Revised 12/1/2022

**Campus Location:** Aviation Institute of Maintenance  
3711 S. Ashland Ave, Chicago IL 60609  
872-365-3500

The Drug Free Schools and Campus Regulations (EDGAR Part 86.100, Subpart B) require that, as a condition of receiving funds or any other form of financial assistance under any federal program, an institution of higher education must certify that it has adopted and implemented a program designed to prevent the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees, both on the institution's premise and as part of its activities. This Drug and Alcohol Abuse Prevention Program (DAAPP) policy was developed to inform the Institute, students, and employees of the seriousness of the use and abuse of illicit drugs and alcohol and to set forth the standards of conduct regarding such activity.

Aviation Institute of Maintenance supports the Drug-Free Schools and Campuses Regulations and is committed to providing a safe, healthy educational and work environment for all students and employees.

### (1) Distribution of Annual Notification

The EDGAR Part 86 requires that schools annually distribute alcohol and drug policy notification in writing to students and employees. On or before October 1 of each year, an email is sent to all employees and students which contains a direct link to a PDF version of this policy. All new students who enroll after the distribution date will receive a copy of this policy during mandatory orientation prior to starting classes. New employees hired after the annual distribution date will receive a copy as part of the new employee materials. Additionally, a copy of the PDF is posted to the school's consumer information website for continuous reference.

Through the annual distribution of this policy, the school certifies that they have implemented a drug and alcohol prevention program in accordance with the Drug-Free Schools and Communities Act (DFSCA), as articulated in the Education Department General Administrative Regulations (EDGAR) Part 86, known as the Drug-Free Schools and Campuses Regulations pertaining to Drug and Alcohol Abuse Prevention.

## A. Standards of Conduct

The unlawful possession, use, or distribution of illicit drugs and alcohol on Institute property or at any school sponsored activity by all students, staff, and faculty is strictly prohibited, even by individuals who are otherwise of legal age to do so. This includes the campus buildings, campus grounds, and parking areas, or while participating in off-site school/work-related activities such as but not limited to field trips, graduation ceremonies, school-sanctioned community service activities, or professional meetings attended by employees on behalf of the school.

These standards of conduct apply to all students who are registered at the Institution for at least one course as well as all full time and part time staff and faculty.

The Institution reserves the right to take whatever measures it deems necessary in response to an allegation of alcohol or other drug use in order to protect employees and students and the personal safety of the entire Institute's community. A student or employee who violates the drug and alcohol policy, including underaged drinking, is subject to both the campus policies and to criminal sanctions provided by federal, state, and local law. All instances of illegal drug use or underage drinking will be referred to the local authorities. Additionally, the school will impose disciplinary sanctions as defined in the Student Code of Conduct or the Employee Handbook for failure to abide by the standards of conduct.

## B. Legal Sanctions

A student or employee who violates the drug and alcohol policy is subject to both the Institute's policies and to criminal sanctions provided by federal, state, and local law. The following are a summary of the applicable legal sanctions.

### FEDERAL PENALTIES FOR TRAFFICKING AND POSSESSION OF A CONTROLLED SUBSTANCE

DRUG/SCHEDULE	QUANTITY	PENALTIES	QUANTITY	PENALTIES
Cocaine (Schedule II)	500–4999 grams mixture	<b>First Offense:</b> Not less than 5 yrs, and not more than 40 yrs. If death or serious injury, not less than 20 or more than life. Fine of not more than \$5 million if an individual, \$25 million if not an individual.	5 kgs or more mixture	<b>First Offense:</b> Not less than 10 yrs, and not more than life. If death or serious injury, not less than 20 or more than life. Fine of not more than \$10 million if an individual, \$50 million if not an individual.
Cocaine Base (Schedule II)	28–279 grams mixture		280 grams or more mixture	
Fentanyl (Schedule II)	40–399 grams mixture		400 grams or more mixture	
Fentanyl Analogue (Schedule I)	10–99 grams mixture		100 grams or more mixture	
Heroin (Schedule I)	100–999 grams mixture		1 kg or more mixture	
LSD (Schedule I)	1–9 grams mixture	<b>Second Offense:</b> Not less than 10 yrs, and not more than life. If death or serious injury, life imprisonment. Fine of not more than \$8 million if an individual, \$50 million if not an individual.	10 grams or more mixture	<b>Second Offense:</b> Not less than 15 yrs, and not more than life. If death or serious injury, life imprisonment. Fine of not more than \$20 million if an individual, \$75 million if not an individual.
Methamphetamine (Schedule II)	5–49 grams pure or 50–499 grams mixture		50 grams or more pure or 500 grams or more mixture	
PCP (Schedule II)	10–99 grams pure or 100–999 grams mixture		100 gm or more pure or 1 kg or more mixture	<b>2 or More Prior Offenses:</b> Not less than 25 years. 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 product containing Gamma Hydroxybutyric Acid)	Any amount	<b>First Offense:</b> Not more than 20 yrs. If death or serious injury, not less than 20 yrs, or more than life. Fine \$1 million if an individual, \$5 million if not an individual.	
Flunitrazepam (Schedule IV)		<b>Second Offense:</b> Not more than 30 yrs. If death or serious bodily injury, life imprisonment. Fine \$2 million if an individual, \$10 million if not an individual.	
Other Schedule III drugs	Any amount	<b>First Offense:</b> Not more than 10 years. If death or serious injury, not more than 15 yrs. Fine not more than \$500,000 if an individual, \$2.5 million if not an individual.	
		<b>Second Offense:</b> Not more than 20 yrs. If death or serious injury, not more than 30 yrs. Fine not more than \$1 million if an individual, \$5 million if not an individual.	
All other Schedule IV drugs	Any amount	<b>First Offense:</b> Not more than 5 yrs. Fine not more than \$250,000 if an individual, \$1 million if not an individual.	
Flunitrazepam (Schedule IV)		<b>Second Offense:</b> Not more than 10 yrs. Fine not more than \$500,000 if an individual, \$2 million if other than an individual.	
All Schedule V drugs	Any amount	<b>First Offense:</b> Not more than 1 yr. Fine not more than \$100,000 if an individual, \$250,000 if not an individual.	
		<b>Second Offense:</b> Not more than 4 yrs. Fine not more than \$200,000 if an individual, \$500,000 if not an individual.	

#### FEDERAL TRAFFICKING PENALTIES—MARIJUANA

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 15 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.
	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, \$75 million if other than an individual.
	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.
	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	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
	1 kg or less	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

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\* The minimum sentence for a violation after two or more prior convictions for a felony drug offense have become final is not less than 25 years imprisonment and a fine up to \$20 million if an individual and \$75 million if other than an individual.

## Federal Law, Alcohol

Alcohol is not considered a controlled substance under the USE Code and is not subject to the same federal regulations as other drugs. The Federal Uniform Drinking Age Act of 1984 sets the minimum legal drinking age to 21. Individual states control the regulations and penalties relating to the possession and distribution of alcohol.

## Illinois State Law, Controlled Substance

The Institute complies with all federal, state, and local laws. A summary of the relevant sections of the Code of Illinois are provided in this policy. Full details of the Code of Illinois can be found <https://ilga.gov/legislation/ilcs/ilcs5.asp?ActID=1941>

The Illinois Controlled Substance Act places controlled substances into categories called Schedules.

Schedule	Description	Penalties for manufacture, sell, or deliver, or possess with intent to manufacture, sell, or deliver.	Possession penalties in Illinois depend on the type of drug, amount, and whether you have past drug offenses.
<b>Schedule I §203</b>	High potential for abuse and no accepted medical use. Includes heroin, LSD, GHB, peyote, Ecstasy, and PCP.	<b>Class 1 felony</b> Fine not more than \$250,000 <b>Class 2 felony</b> LSD, amphetamine, fentanyl Fine not more than \$200,000	<b>Class 1 felony</b> <b>Range of incarceration 4 years and not more than 50 years</b>
<b>Schedule II §205</b>	High potential for abuse and severe dependence, but have a currently accepted medical use. Includes methamphetamine, cocaine, Vicodin, Ritalin, and methadone	<b>Class 3 felony</b> Methamphetamine Fine not more than \$150,000	<b>Class 1 felony</b> <b>Methamphetamine is Class 4 felony.</b> <b>Range of incarceration 4 years and not more than 50 years</b>
<b>Schedule III §207</b>	Have less potential for abuse , a potential for moderate or low dependency and an accepted medical use. Includes ketamine and anabolic steroids	<b>Class 3 felony</b> Fine not more than \$125,000	<b>Class C misdemeanor</b> for first offense <b>Class B misdemeanor</b> for second offense within 2 years of a prior conviction.
<b>Schedule IV §209</b>	Low potential for abuse, a limited potential for dependency, and are accepted in medical treatment. Includes valium, Xanax, Ambien, and rohypnol	<b>Class 3 felony</b> Fine not more than \$100,000	<b>Class C misdemeanor</b> for first offense <b>Class B misdemeanor</b> for second offense within 2 years of a prior conviction.
<b>Schedule V §211</b>	Low potential for abuse, accepted medical use, limited physical or psychological dependency. Includes codeine,	<b>Class 3 felony</b> Fine not more than \$75,000	

	opium, and cough suppressants		
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**Possession penalties in Illinois depend on the type of drug, amount, and whether you have past drug offenses.**

Type of Controlled substance	Weight of Controlled Substances	Penalties
<b>Heroin Cocaine Morphine LSD §401</b>	1-15 grams of heroin or cocaine 10-15 grams of morphine 5-15 grams of LSD	<b>Class 1 felony</b> Fine not more than \$250,000
	15 grams or more but less than 100 grams	<b>Class X felony</b> 6 years - 30 years incarceration, max fine \$10,000
	100 grams or more but less than 400 grams	<b>Class X felony</b> 9 years - 40 years; Fine not more than \$500,000 or full street value whichever is greater
	400 grams or more but less than 900 grams	<b>Class X felony</b> 12 years - 50 years; Fine not more than \$500,000 or the full street value whichever is greater
	900 grams or more	<b>Class X felony</b> 15 years - 60 years; Fine not more than \$500,000 or the full street value whichever is greater
<b>Fentanyl §401</b>	1 gram or more but less than 15 grams	<b>Class 1 felony</b> Fine not more than \$250,000
	15 grams - 100 grams 100 grams - 400 grams 400 grams - 900 grams 900 grams or more	<b>Class X felony</b> 3 years shall be added to the term of imprisonment imposed by the court, maximum sentence shall be increased by 3 years
<b>Marijuana</b>	more than 35 grams up to 30 kg.  more than 10 grams but less than 35 grams of marijuana  not more than 10 grams of marijuana of any synthetic cannabinoid;	<b>Class D felony</b> -7 years incarceration, max fine \$10,000 <b>Class A misdemeanor</b> - one year incarceration, Max fine \$2000 <b>Class D misdemeanor</b> <b>First offense:</b> no incarceration, max fine \$500, <b>Second/subsequent offense-</b> <b>Class A misdemeanor</b> - one year incarceration, max fine \$2000

### **Illinois State Law, Alcohol**

In Illinois, it is illegal to drive a motor vehicle while noticeably impaired or with an alcohol concentration of 0.08 percent or higher. While driving a commercial motor vehicle, the limit is 0.04. **§ 11.501**

Illinois alcohol laws **§11.501** a person is guilty of DUI if he or she operates a motor vehicle while in an intoxicated or drugged condition. A person is in an intoxicated condition, when his is under the influence of alcohol, a controlled substance, or drug, or any combination thereof.

#### **First offense: Class A misdemeanor**

Minimum revocation of driver's license for one year, Car registration suspension, Fines up to \$2500. Minimum of 5 days in prison or 10 days of community service

**Second offense:** mandatory minimum of either 5 days in jail or 240 hours community service

Fines up to \$25,000, Between 3 to 7 years in prison with two or more prior convictions

In Illinois, anyone arrested for driving under the influence of alcohol and/or drugs (DUI) must undergo an alcohol and drug evaluation before sentencing can occur for DUI offense, or restricted or full driving privileges can be granted by the Office of the Secretary of State.

#### **C. Health Risks**

The use of drugs, including alcohol and tobacco, can produce serious short and long term health risks. Substance use can lead to dependency and addiction, health problems, mental illness, social issues, and violence. Beyond the harmful consequences for the individual, drug and alcohol use can cause serious emotional, mental, and physical health problems for others.

Alcohol consumption causes a number of marked changes in behavior. Even low doses significantly impair the judgement and coordination required to drive a car safely, increasing the likelihood that the driver will be involved in an accident. Low-to-moderate doses of alcohol also increase the incidence of a variety of aggressive acts including domestic and child abuse. Moderate-to-high doses of alcohol cause marked impairments in higher mental functions, severely altering a person's ability to learn and remember information. Very high doses cause respiratory depression and death. If combined with other depressants of the central nervous system, much lower doses of alcohol 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 large 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 intellectual disabilities. In addition, research indicates that children of alcoholic parents are at greater risk of becoming alcoholics than are other youngsters.

A summary of the health risks associated with the substances covered by the Controlled Substances Act (21 USC 811) are summarized in the Appendix. For additional health risks specifically related to your situation, contact your health care provider.

Reference: U.S. Department of Justice Drug Enforcement Administration. Drugs of Abuse: A DEA Resource Guide.

#### **D. Drug and Alcohol Programs**

Students and employees who use controlled substances or who abuse alcohol are encouraged to seek assistance through the campus Student Services office or the office of the Campus Executive Director. A binder of community resources can also be found in the Learning Resource Center at the campus. Employees are also encouraged to seek confidential assistance from the Human Resources department at the corporate office by calling 757-456-5065. The staff will assist you or provide an appropriate referral. Although the school does not have in-house counseling or treatment services, many options are

available in the surrounding areas for employees and students in need of substance-abuse counseling, treatment, or rehabilitation and reentry programs.

You can find treatment facilities in your area by searching at [www.findtreatment.gov](http://www.findtreatment.gov). In addition, the school maintains the following list of national and local services and hotlines related to substance abuse. For more information relating to your area and needs, contact the Campus Executive Director or the Student Services Coordinator for a confidential discussion.

### National Hotlines

Organization	Phone/Web	Services
Substance Abuse and Mental Health Services Administration (SAMHSA)	1-800-662-HELP	information on alcohol and drug abuse, local treatment options, support through hotline counselors about to speak with about alcohol, drug or family problems
Alcoholic Anonymous	<a href="http://www.aa.org">www.aa.org</a>	Recovery assistance from alcoholism
Al-Anon and Alateen	<a href="http://www.al-anon.org">www.al-anon.org</a>	Guide for family whose lives have been affect by someone else's drinking
Narcotics Anonymous	<a href="http://www.na.org">www.na.org</a>	Recovery assistance from addiction
National Alcoholism and Substance Abuse Information Center	1-800-784-6776	National database of the alcohol rehab treatment and drug rehab treatment centers for every level of treatment option
HelpGuide	<a href="http://www.helpguide.org">www.helpguide.org</a>	Guides to mental health and wellness, including addition and recovery information
National Suicide Prevention Lifeline	1-800-273-TALK Call or text: 988	24/7 support for people in distress
National Sexual Assault Hotline	800-565-4673	24/7 assistance for survivors of sexual violence and harassment
National Domestic Violence Hotline	800-799-7233	24/7 assistance for survivors of domestic violence
Veteran Crisis	Dial 988, press 1	27/4 crisis support for Veterans and their loved ones

### Local Drug and Alcohol Related Services

Facility	Services	Address	Phone
Chicago Treatment & Counseling Center	Addiction treatment, counseling, DUI services	3520 S. Ashland Ave, Chicago IL 60609	773-523-3400
Pilsen Wellness Center	Substance abuse, maintenance therapy	3232 W 55 <sup>th</sup> St, Chicago IL 60632	773-424-3060
Southwood Intervention	Substance abuse treatment, detox, short and long term, DUI services	5701 S. Wood Street, Chicago IL 60636	773-737-4600
Eva Mae Recovery Hope	Abuse treatment, inpatient/outpatient, residential services, detox	6614 S. Halsted St, Chicago IL 60621	773-952-6861
Aspire Inpatient Program	Addiction treatment	850 S. Wabash Ave, Chicago IL 60605	312-757-7750
Life Treatment Recovery	Drug and alcohol treatment	230 S. Clark Street, Chicago IL 60604	312-967-7444

### E. Disciplinary Sanctions

**Student Sanctions.** In accordance with the Student Code of Conduct, use, possession, or distribution of illegal narcotic, alcoholic, or other controlled substances, except as expressly permitted by law, to include public intoxication, is a Level I violation and is deemed to be among the most serious types of violations. As a condition of enrollment, students must abide by the terms of this policy and the Student Code of Conduct. If any violation of the standards of conduct are violated, sanctions will be imposed which would include the following.

- Reporting the violation to law enforcement officials.
- Remove a student from Institution activities, to include classroom lecture, practical labs, and externships, when impairment is noted or feared.
- Taking appropriate disciplinary action against such student, up to and including probation, expulsion, termination of enrollment

**Employee Sanctions.** Our Institute's reputation depends entirely on the ethical and legal behavior of its employees. The Institute is committed to a standard of ethics, integrity and compliance with applicable laws in all aspects of conducting business. As such, employees are expected to observe standards of ethical conduct as described in the Employee Handbook and in this policy. If any violation of the standards of conduct are violated, sanctions will be imposed which would include the following.

- Reporting the violation to law enforcement officials.
- Remove the employee from the workplace or any Institution activities when impairment is noted or feared.
- Submission to a drug, alcohol, or illegal substance test.
- Taking appropriate disciplinary action against such employee in accordance with the Employee Handbook, which could include verbal or written warning, performance improvement plan, demotion, suspension, or separation of employment.
- Require participation in a substance abuse rehabilitation program approved for such purposes by a federal, state, local health, law enforcement or other appropriate agencies as a condition of continued employment.

## **(2) Biennial Review**

The school will complete a review of the Drug and Alcohol Abuse Prevention (DAAPP) policies and procedures. The biennial review will occur no later than February of each odd numbered year (2023, 2025, 2027, etc) and cover the previous two calendar years. For example, the review conducted in February 2023 will cover the calendar years 2021 and 2022.

The school will form a task force to accomplish the biennial review, to include at a minimum the following individuals. The task force will include the Campus Executive Director or Assistant Campus Director, the Student Services Coordinator, the Director of Education, and other campus representatives as needed. The objective of the review is to determine the effectiveness of, and to implement any needed changes to the DAAPP and to ensure the campus is enforcing the disciplinary sanctions and policies consistently. In accomplishing the objectives, the following steps will be considered during the review.

1. Determine the number of drug and alcohol-related violations and fatalities that occurred on campus or as part of any institution's activities and are reported to campus officials during the last 2 years. Document the particulars of the offense(s), any mitigating circumstances, and the

- school sanctions imposed. Cover student and employee violations. Remove all personally identifying information from the documentation.
2. Review the offenses and subsequent institutional sanction. Compare data obtained year over year. Have the sanctions been enforced consistently?
  3. Are there any recommendations for improvement in consistency of the disciplinary policies?
  4. Review the educational programming held at the campus during the previous 2 years relation to the policy. Has the DAAPP policy been effective in preventing the possession, use, or distribution of drugs or alcohol, as defined in this statement?
  5. If not, what action plans are in place to improve the process.

The Biennial Review Report, at a minimum, should include answers to the above questions. The report will also include a written statement certifying that the school has adopted and implemented the drug prevention program described in § 86.100. The report and the certification statement will be kept on campus and a copy emailed to the Director of Academic Affairs at the corporate office no later than February 28 of each odd numbered year. A copy of the Biennial Review Report will be posted on the school's consumer information web site.

### **3) Record Keeping**

The school will keep a copy of the annual Drug and Alcohol Prevention Plan policies, reports and backup documentation from the biennial review, and any other records reasonably related to the school's compliance with the drug and alcohol abuse prevention program for a minimum of 5 years.

## Appendix: Health Risks Associated with Use of Illicit Drugs and Abuse of Alcohol

<b>Drug</b>	<b>Schedule</b>	<b>Trade Names</b>	<b>Medical use</b>	<b>Dependency</b>	<b>Usual method of abuse</b>	<b>Possible effects</b>	<b>Effects of Overdose</b>	<b>Withdrawal</b>
<b>Narcotics</b>								
Fentanyl	II	Apache, China Girl, Dance Fever, Friend, Goodfellas, Great Bear, He-Man, King Ivory, Murder 8, Tango & Cash.	Analgesic, anesthetic	High	Injected, snorted, smoked, oral,	Drowsiness, inability to concentrate, apathy. Slowed physical activity, constriction of the pupils, flushing of the face and neck, constipation, nausea, vomiting, and slowed breathing	Overdoses of narcotics are not uncommon and can be fatal. Constricted (pinpoint) pupils, cold clammy skin, confusion, convulsions, extreme drowsiness, and slowed breathing	Restlessness, irritability, loss of appetite, nausea, tremors, drug craving, severe depression, vomiting, increased heart rate and blood pressure, and chills alternating with flushing and excessive sweating
Heroin	I	Big H, Black Tar, Chiva, Hell Dust, Horse, Negra, Smack, and Thunder	None	High	injected, smoked, snorted			
Hydromorphone	II	D, Dillies, Dust, Footballs, Juice, Smack	Pain reliever	High	Oral, ingestion			
Methadone	II	Amidone, Chocolate Chip Cookies, Fizzies with MDMA, and Wafer	Analgesic	High	Swallowed, injected			
Morphine	II	Dreamer, Emsel, First Line, God's Drug, Hows, MS, Mister Blue, Morf, Morpho, Unkie	Pain reliever	High	Oral, injected			
Opium	II	Aunti, BigO, Black ill, Chinese Molasses, Dopiump, Dreams, FiDoNIE, G, God's medicine, Guma, Joy, Midnight Oil, O, OP, Pox.	None	High	Smoked, injected, oral			
Oxycodone	II	Hillbilly Heroin, Kicker, OC, Ox, Roxy, Perc, and Oxy, OxyContin	Analgesic	High	Oral, injected			
<b>Stimulants</b>								
Amphetamines	II	Bennies, Black Beauties, Crank, Ice, Speed, and Uppers	Treat ADHD	High	Oral, injected	Sense of exhilaration, enhanced self-esteem, improve mental and physical performance, increase activity, reduce appetite, extend wakefulness for prolonged period, Chronic, high-dose use is frequently associated with agitation, hostility, panic, aggression, and suicidal or homicidal tendencies, tolerance	In overdose, unless there is medical intervention, high fever, convulsions, and cardiovascular collapse may precede death. Because accidental death is partially due to the effects of stimulants on the body's cardiovascular and temperature-regulating systems, physical exertion increases the hazards of stimulant use	Abrupt cessation is commonly followed by depression, anxiety, drug craving, and extreme fatigue
Cocaine	II	Blow, Coca, Coke, Crack, Flake, Snow	Rare	High	Snorted, injected, smoked			
Khat	I, IV	Abyssinian Tea, African Salad, Catha, Chat, Kat, and Oat	None	High	Chewed, smoked			
Methamphetamine	II	Batu, Bikers Coffee, Black Beauties, Chalk, Chicken Feed, Crank, Crystal, Glass, Go-Fast, Hiropon, Ice, Meth, Methlies Quick, Poor Man's Cocaine, Shabu, Shards, Speed, Stove Top, Tina, Trash, Tweak, Uppers, Ventana, Vidrio, Yaba, and Yellow Bam	Obesity, ADHD	Moderate	Swallowed, snored, injected, smoked			
<b>Depressant</b>								
Barbiturates	I, III, IV	Barbs, Block Busters, Christmas Trees, Goof Balls, Pinks, Red Devils, Reds & Blues, and Yellow Jackets	Sedatives, hypnotics, anesthetics, anticonvulsants	High	Swallowed, injected	Sleepiness, amnesia, impaired mental function, confusion. Slurred speech, loss of motor coordination, weakness, headache, dizziness	Extreme drowsiness, confusion, impaired coordination, decreased reflexes,	Withdrawal can be life threatening

<b>Drug</b>	<b>Schedule</b>	<b>Trade Names</b>	<b>Medical use</b>	<b>Dependency</b>	<b>Usual method of abuse</b>	<b>Possible effects</b>	<b>Effects of Overdose</b>	<b>Withdrawal</b>
Benzodiazepine	IV	Benzos and Downers, valium, zanax, Ativan, klonopin, flurazepam,	Anesthesia, insomnia, anticonvulsant	Low	Oral, snorted	vomiting, low blood pressure. Prolonged use produces physical and psychological dependence and tolerance	respiratory depression, coma, and possible death. Overdose effects of concomitant use of benzodiazepines and opioids include: Profound sedation, respiratory depression, coma, and death	
GHB	I III	Sodium oxybate, xyrem	None	High	Ingested			
Rohypnol	IV	Date rape drug, Forget Pill, La Rocha, Lunch Money Drug, Mexican Valium, Pingus, R2, Reynolds, Roach, Roopies, Roofies, Row-Shay, Wolfies	None		Oral			
<b>Hallucinogens</b>								
Ecstasy/MDMA	I	Adam, Beans, Clarity, Disco Biscuit, E, Ecstasy, Eve, Go, Hug Drug, Lover's Speed, MDMA, Peace, STP, X, and XTC	None	High	Oral	Sensory effects, perceptual distortions, flashbacks, elevated heart rate, increased blood pressure, dilated pupils, nausea and vomiting.	Psychological harm, fear, depression, anxiety, and paranoia. Deaths generally occur due to suicide, accidents, dangerous behavior, inadvertently eating poisonous plant material. Respiratory depression, coma, convulsions, seizures, and death due to respiratory arrest	
Ketamine	III	Cat Tranquilizer, Cat Valium, Jet K, Kit Kat, Purple, Special K, Special La Coke, Super Acid, Super K, and Vitamin K	anesthetic	Moderate	Snorted, smoked, oral, injected			
LSD	I	Acid, Dots, Mellow Yellow, Window Pane	None	High	Oral			
Peyote & Mescaline	I	Buttons, Cactus, Mesc, and Peyoto	None	High	Oral, smoked			
Psilocybin	I	Magic Mushrooms, Mushrooms, and Shrooms	None	High	Oral			
<b>Steroids</b>								
Anabolic Steroids	III	Arnolds, Juice, Pumpers, Roids, Stackers	Hormone deficiencies, delayed puberty		Oral, injected, applied to skin	Mood swings, hostility, impaired judgement, aggression, growth stunt in adolescents, changes in sexual development, high cholesterol levels, acne and fluid retention, liver damage	Anabolic steroids are not associated with overdoses.	Depression
<b>Marijuana/ Cannabis</b>								
Marijuana	I	Aunt Mary, Bud, Blunts, Chronic, Dope, Gangster, Ganja, Grass, Hash, Herb, Joint, Kif, Mary Jane, Mota, Pot, Reefer, Sinsemilla, Skunk, Smoke, Weed, Yerba	None	Moderate	Smoked, oral	Learning impairments, dizziness, nausea, tachycardia, flushing, tremors, merriment, relaxation, sedation, blood shot eyes, coughing, increased appetite, increased blood pressure, burnt lung tissue	None	Restlessness, irritability, sleep difficulties
Marijuana concentrates	I	710, wax, honey oil, budder, butane honey oil, shatter, dabs, black glass, errl.	None	Moderate	Smoked, oral			
Vaping	--	E-cigs, e-hookahs, mods, vape pens, vapes, and Juuls or Juuling	None	Moderate	Inhaling			
<b>Inhalants</b>								
Inhalants	--	Gluey, Huff, Rush, and Whippets	None		inhaled	Brain damage, cognitive abnormalities, slow body function,	Loss of consciousness, death by asphyxiation	

<b>Drug</b>	<b>Schedule</b>	<b>Trade Names</b>	<b>Medical use</b>	<b>Dependency</b>	<b>Usual method of abuse</b>	<b>Possible effects</b>	<b>Effects of Overdose</b>	<b>Withdrawal</b>
						loss of consciousness, drowsy		
<b>Designer Drugs</b>								
Bath Salts		Bliss, Blue Silk, Cloud Nine, Drone, Energy-1, Ivory Wave, Lunar Wave, Meow Meow, Ocean Burst, Pure Ivory, Purple Wave, Red Dove, Snow Leopard, Stardust, Vanilla Sky, White Dove, White Knight, White Lightning	None		Snorting, oral, smoking, injected	Euphoria and alertness, confusion, psychosis, hallucination agitation, aggression, self destructive behavior, rapid heartbeat, hypertension, sweating, headaches, palpitations	Nausea, anxiety, seizures, stroke, coma, organ injury, death	
K2/Spice		Spice, K2, Blaze, RedX Dawn, Paradise, Demon, Black Magic, Spike, Mr. Nice Guy, Ninja, Dream, Genie, Sence, Smoke, Skunk, Serenity, Yucatan, Fire, Skooby Snax, and Crazy Clown	None					
<b>Drugs of Concern</b>								
DSM		CCC, Dex, DXM, Poor Man's PCP, Robo, Rojo, Skittles, Triple C, and Velvet	Cough suppressant, cold medication		Oral	Confusion, agitation, paranoia, sensor changes, euphoria and hallucinations, excitability, sweating	Impairment of the senses	
Kratom		Thang, kakuam, thom, ketum, and biak	None		Oral, chewed	Nausea, itching, sweating, constipation, vomiting, drowsiness, loss of appetite, seizure, hallucination		
Salvia Divinorum		Maria Pastora, Sally-D, and Salvia	None		Chewed, smoked	Distorted perception, fear and panic, paranoia, hallucination, impaired judgment, loss of coordination, slurred speech		
<b>Alcohol</b>								
		Undistilled: Beer, wine hard cider, mead, sake Distilled: Gin, brandy, whiskey, rum, tequila, vodka, absinthe, everclear	None	Common	Oral	Short term risks: injuries, violence, alcohol poisoning, risky behaviors, miscarriage Long term risks: Long term risks: high blood pressure, heart disease, stroke, liver disease, cancer, weakened immune system, memory problems, mental health problems, social problems	Alcohol poisoning: confusion, difficulty remaining conscious, vomiting, seizures, slow breathing, clammy skin, low body temperature	Anxiety, shaking, insomnia, headache, nausea, hallucinations, seizures, delirium tremens

Reference: U.S. Department of Justice Drug Enforcement Administration. Drugs of Abuse: A DEA Resource Guide.