

MAJOR INDICATORS	CNS DEPRESSANTS	CNS STIMULANTS	HALLUCINOGENS	PHENCYCLIDINE	NARCOTIC ANALGESIC	INHALANTS	CANNABIS
HGN	PRESENT	NONE	NONE	PRESENT	NONE	PRESENT	NONE
VERTICAL NYSTAGMUS	PRESENT * HIGH DOSES	NONE	NONE	PRESENT	NONE	PRESENT * HIGH DOSES	NONE
LACK OF CONVERGENCE	PRESENT	NONE	NONE	PRESENT	NONE	PRESENT	PRESENT
PUPIL SIZE	NORMAL (1)	DILATED	DILATED	NORMAL	CONSTRICTED	NORMAL (4)	DILATED (6)
REACTION TO LIGHT	SLOW	SLOW	NORMAL (3)	NORMAL	LITTLE OR NONE VISIBLE	SLOW	NORMAL
PULSE RATE	DOWN (2)	UP	UP	UP	DOWN	UP	UP
BLOOD PRESSURE	DOWN	UP	UP	UP	DOWN	UP/DOWN (5)	UP
BODY TEMPERATURE	NORMAL	UP	UP	UP	DOWN	UP/DOWN/ NORMAL	NORMAL
MUSCLE TONE	FLACCID	RIGID	RIGID	RIGID	NORMAL TO FLACCID	FLACCID	NORMAL
GENERAL INDICATORS	<p>UNCOORDINATED DISORIENTED SLUGGISH THICK, SLURRED SPEECH DRUNK-LIKE BEHAVIOR DROWSINESS DROOPY EYES FUMBLING GAIT ATAXIA</p> <p>*NOTE: METHAQUALONE, PULSE ELEVATED & BODY TREMORS</p> <p>ETOH & QUAALUDES ELEVATE PULSE</p> <p>SOMA & QUAALUDES DILATE PUPILS</p>	<p>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</p>	<p>DAZED APPEARANCE BODY TREMORS SYNTHESIA HALLUCINATIONS PARANOIA UNCOORDINATED NAUSEA DISORIENTED DIFFICULTY IN SPEECH PERSPIRING POOR PERCEPTION OF TIME & DISTANCE MEMORY LOSS DISORIENTATION FLASHBACKS</p> <p>*NOTE: LSD, PULOERECTON MAY BE OBSERVED (GOOSE BUMPS, HAIR STANDING ON END)</p>	<p>PERSPIRING WARM TO THE TOUCH BLANK STARE VERY EARLY ANGLE OF HGN ONSET DIFFICULTY IN SPEECH INCOMPLETE VERBAL RESPONSES REPETITIVE SPEECH INCREASED PAIN THRESHOLD CYCLIC BEHAVIOR CONFUSED AGITATED HALLUCINATIONS POSSIBLY VIOLENT & COMBATIVE CHEMICAL ODOR *MOON WALKING*</p>	<p>DROOPY EYELIDS (PTOSIS) *ON THE NOD* DROWSINESS DEPRESSED REFLEXES LOW, RASPY, SLOW SPEECH DRY MOUTH FACIAL ITCHING EUPHORIA FRESH PUNCTURE MARKS NAUSEA TRACK MARKS</p> <p>*NOTE: TOLERANT USERS EXHIBIT RELATIVELY LITTLE PSYCHOMOTOR IMPAIRMENT (HIPPIUS - RHYTHMIC PULSATING OF PUPILS AS THEY DILATE AND CONSTRICT)</p>	<p>RESIDUE OF SUBSTANCE AROUND NOSE & MOUTH ODOR OF SUBSTANCE POSSIBLE NAUSEA SLURRED SPEECH DISORIENTATION BLOODSHOT, WATERY EYES LACK OF MUSCLE CONTROL FLUSHED FACE NON-COMMUNICATIVE INTENSE HEADACHES **NOTE: ANESTHETIC GASES CAUSE BELOW NORMAL BLOOD PRESSURE; VOLATILE SOLVENTS AND AEROSOLS CAUSE ABOVE NORMAL BLOOD PRESSURE.</p>	<p>MARKED REDDENING OF CONJUNCTIVA ODOR OF MARIJUANA MARIJUANA DEBRIS IN MOUTH BODY TREMORS EYELID TREMORS RELAXED INHIBITIONS INCREASED APPETITE IMPAIRED PERCEPTION OF TIME & DISTANCE DISORIENTATION POSSIBLE PARANOIA</p> <p>(REBOUND - PUPILS PULSATE IN SIZE, GROWING LARGER ON EXPANSION PULSATIONS)</p>
DURATION OF EFFECTS	<p>BARBITURATES: 1-16 HOURS</p> <p>TRANQUILIZERS: 4-8 HOURS</p> <p>METHAQUALONE: 4-8 HOURS</p>	<p>COCAINE: 5-90 MINUTES</p> <p>AMPHETA-MINES: 4-8 HOURS</p> <p>METHAMPHETAMINE: 12 HOURS</p>	<p>DURATION VARIES WIDELY FROM ONE HALLUCINOGEN TO ANOTHER</p>	<p>ONSET: 1-5 MINUTES</p> <p>PEAK EFFECTS: 15-30 MINUTES</p> <p>EXHIBITS EFFECTS UP TO 4-6 HOURS</p>	<p>HEROIN: 4-6 HOURS</p> <p>METHADONE: UP TO 24 HOURS</p> <p>Others: vary</p>	<p>6-8 HOURS FOR MOST VOLATILE SOLVENTS - ANESTHETIC GASES AND AEROSOLS VERY SHORT DURATION</p>	<p>2-3 HOURS EXHIBITS EFFECTS - (IMPAIRMENT MAY LAST UP TO 24 HOURS WITHOUT AWARENESS OF EFFECT.</p>
USUAL METHODS OF ADMINISTRATION	<p>ORAL</p> <p>INJECTED-OCCASIONALLY</p>	<p>INSUFFLATION (SNORTING)</p> <p>SMOKED</p> <p>INJECTED</p> <p>ORAL</p>	<p>ORAL</p> <p>INSUFFLATION</p> <p>SMOKED</p> <p>INJECTED</p> <p>TRANSFERMAL</p>	<p>SMOKED</p> <p>ORAL INSUFFLATION</p> <p>INJECTED</p> <p>EYE DROPS</p>	<p>INJECTED</p> <p>ORAL</p> <p>SMOKED</p> <p>INSUFFLATED</p>	<p>INSUFFLATED (HISTORICALLY, HAVE BEEN TAKEN ORALLY.)</p>	<p>SMOKED</p> <p>ORAL</p>
OVERDOSE SIGNS	<p>SHALLOW BREATHING COLD, CLAMMY SKIN PUPILS DILATED RAPID, WEAK PULSE COMA</p>	<p>AGITATION INCREASED BODY TEMP HALLUCINATIONS CONVULSIONS</p>	<p>LONG INTENSE TRIP</p>	<p>LONG INTENSE TRIP</p>	<p>SLOW, SHALLOW BREATHING CLAMMY SKIN - COMA CONVULSIONS</p>	<p>COMA</p>	<p>FATIGUE</p> <p>PARANOIA</p>
<p>FOOTNOTE: THESE INDICATORS ARE THE MOST CONSISTENT WITH THE CATEGORY. KEEP IN MIND THAT THERE MAY BE VARIATIONS DUE TO INDIVIDUAL REACTION, DOSE TAKEN AND DRUG INTERACTIONS.</p> <p>1. SOMA, QUAALUDES USUALLY DILATE PUPILS</p> <p>2. QUAALUDES AND ETOH MAY ELEVATE</p> <p>3. CERTAIN PSYCHADELIC AMPHETAMINES CAUSE SLOWING</p> <p>4. NORMAL BUT MAY BE DILATED</p> <p>5. DOWN WITH ANESTHETIC GASES, BUT UP WITH VOLATILE SOLVENTS AND AEROSOLS</p> <p>6. PUPIL SIZE POSSIBLY NORMAL</p>				<p>NORMAL RANGES</p> <p>PULSE: 60 - 90 BEATS PER MINUTE</p> <p>PUPIL SIZE: 3.0MM - 6.5MM</p> <p>BLOOD PRESSURE: 120 - 140 SYSTOLIC 70 - 90 DIASTOLIC</p> <p>BODY TEMPERATURE: 98.6 +/- 1.0 DEGREE</p>			