FORENSIC TOXICOLOGY & Drug Impaired Driving

2025 Texas Impaired Driving Forum March 5, 2025 Hilton Austin Airport – Austin, TX



Hello!

I am Joseph Jones



- Forensic Sciences Human Performance Toxicology
- M.S. Philadelphia College of Osteopathic Medicine
 - Forensic Medicine
- · B.S. Baylor University
 - Forensic Science/Chemistry/Biology
 - Adjunct Instructor for the Ohio, Indiana, Oklahoma, Louisiana, and Georgia DEC Programs





















The NSC Alcohol, Drugs and Impairment Division tackles substance abuse and prescription drug issues and makes recommendations to combat the drinking and driving problem through legislation, education and other countermeasures.

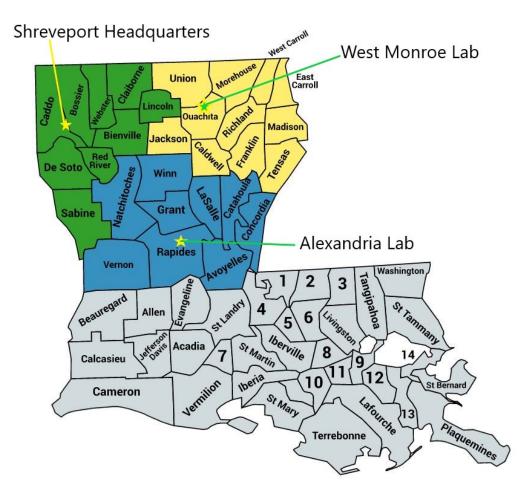
The Division also offers plenty of opportunities for safety-focused networking with others in your field.



North La Criminalistics Laboratory @NLCL.ORG



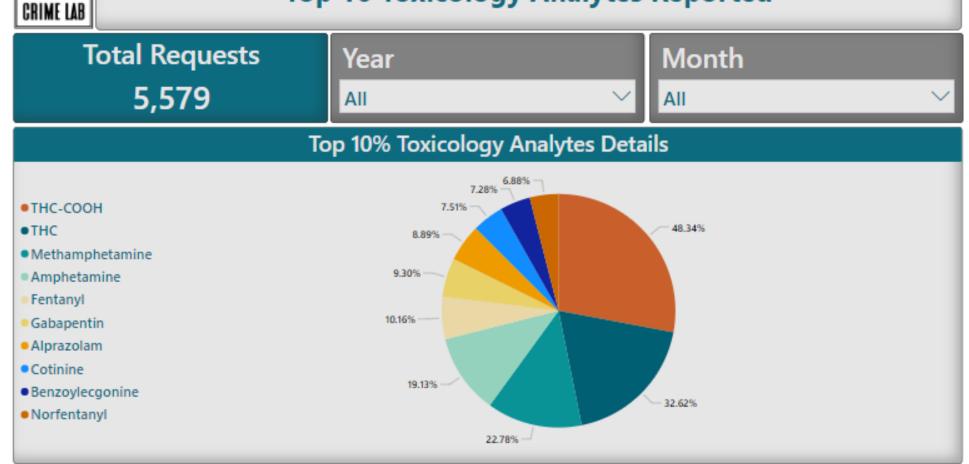
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- DUI & DUID Current Landscape
- A Closer Look at Methamphetamine in Impaired Driving
- Addressing methods of ingestion in DUID
- Delta-8 THC
- Therapeutic Concentrations

Top 10 Toxicology Analytes Reported



*Request count does not include requests where no analyte was detected.

THE BIG QUESTION

> EtOH + 0.043 g%

- Amphetamine 17 ng/mL
- Methamphetamine 240 ng/mL
- Fentanyl 6.3 ng/mL
- NorFentanyl 7.1 ng/mL
- Clonazolam 13 ng/mL
- Gabapentin 17,360 ng/mL
- Buprenorphine 1.2 ng/mL
- Norbuprenorphine 2.6 ng/mL
- 0.043 g% Tramadol 66 ng/mL
 - Acetone + 0.022 g%







	HR & BP	Resp.	Temperature	Pupils	Bowel Sounds	Diaphoresis
Anticholinergics – Atropine, scopolamine, glycopyrrolate benztropine, trihexyphenidyl Antihistamines – Chlorpheniramine, Cyproheptadine, Doxylamine, Hydroxyzine, Dimenhydrinate, Diphenhydramine, Meclizine Promethazine	<u> </u>	No change		Dilated		4
Cholinergic Organic Phosphorous Compounds: Carbamates • Arecholine, Pilocarpine, Urecholine (Betanechol), Carbachol, Choline, Metacholine, Mushrooms	No change	No change	No change	Pinpoint • • • • • • • • • • • • • • • • • • •		
Opioid Morphine • Codeine • Tramadol • Heroin • Meperidine • Diphenoxylate • Hydromorphone • Fentanyl • Methadone • Propoxyphene • Pentazocine • DXM • Oxycodone • Hydrocodone	Junhanda		N LK	Pinpoint •		Ŷ
Sympathomimetic Caffeine, cocaine, amphetamines, methamphetamines, Ritalin, LSD, Theophylline, MDMA				Dilated		
Sedative-Hypnotic anti-anxiety agents, muscle relaxants, antiepileptics and preanesthetic medications –Barbituates –Benzodiazepines	J.			No change		A

Toxidrome: Sympathomimetics

	HR & BP	Resp.	Temperature	Pupils	Bowel Sounds	Diaphoresis
Sympathomimetic Caffeine, cocaine, amphetamines, methamphetamines, Ritalin, LSD, Theophylline, MDMA		1		Dilated		

- DRE CNS Stimulants:
 - HGN None
 - $\bullet \ VGN-None$
 - LOC None
 - Reaction to Light Slow

Blood results – What do they mean?

BASELT

<u>30 NG/ML</u>



WINEK

<u>10-50 NG/ML</u>

Winek's Drug & Chemical Blood-Level Data 2001

Prepared by: Charles L. Winek, Ph.D., Wagdy W. Wahba, Ph.D., Charles L. Winek, Jr., B.S. (Pharm.), M.S., and Tracey Winek Balzer B.S. (Pharm.), M.S.

Units Drugs and mg% and լ. MITLER, ET AL.

- <u>100 NG/ML</u>
 <u>AFTER DOSING 60</u>
 <u>MG</u>
- <u>20 NG/ML AFTER</u> DOSING 10 MG

Sleep. 1993 Jun;16(4):306-17.

Treatment of narcolepsy with methamphetamine.

Mitler MM¹, Hajdukovic R, Erman MK.

- Author information
- 1 Sleep Disorders Center, Scripps Clinic and Research Foundation, La Jolla, California 92037.

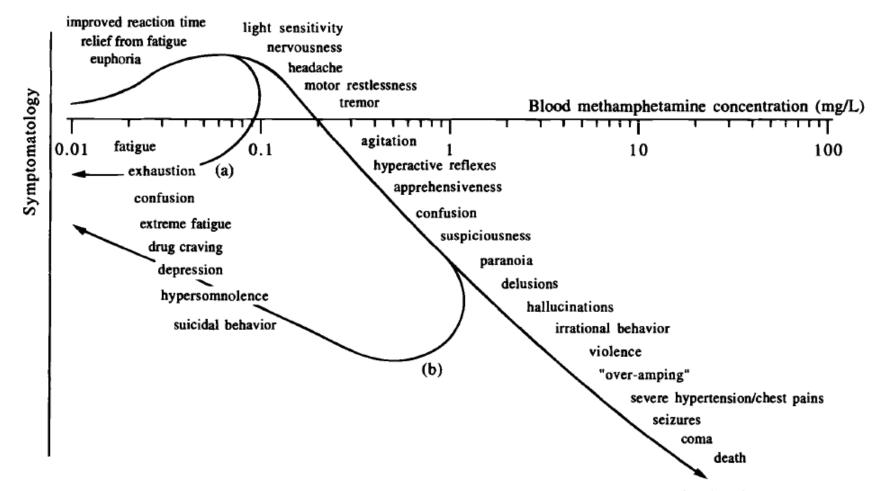
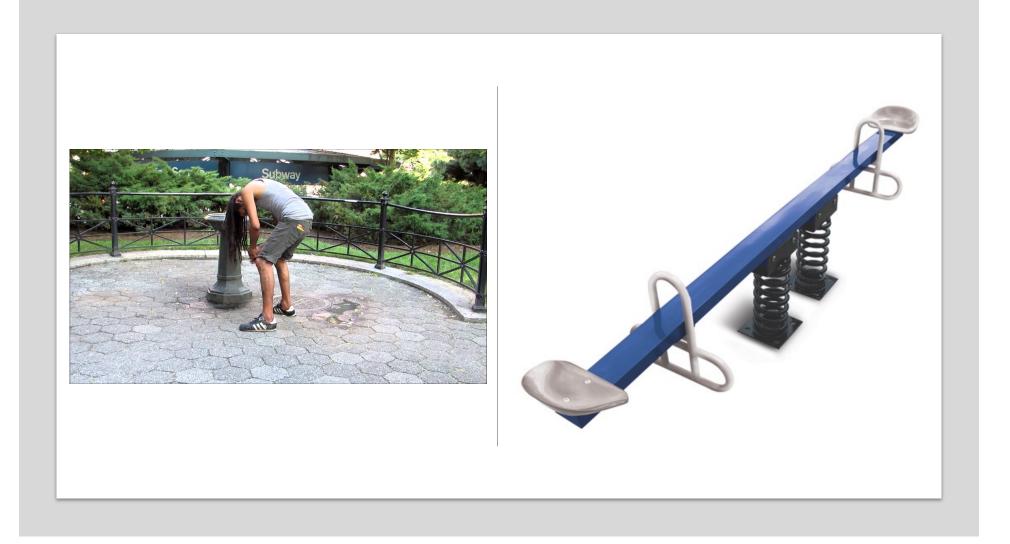


FIG. 1—Hysteresis plot showing effects of methamphetamine that impact driving performance with respect to blood methamphetamine concentration (mg/L). The figure shows examples of withdrawal effects from (a) low dose and (b) high dose drug use.

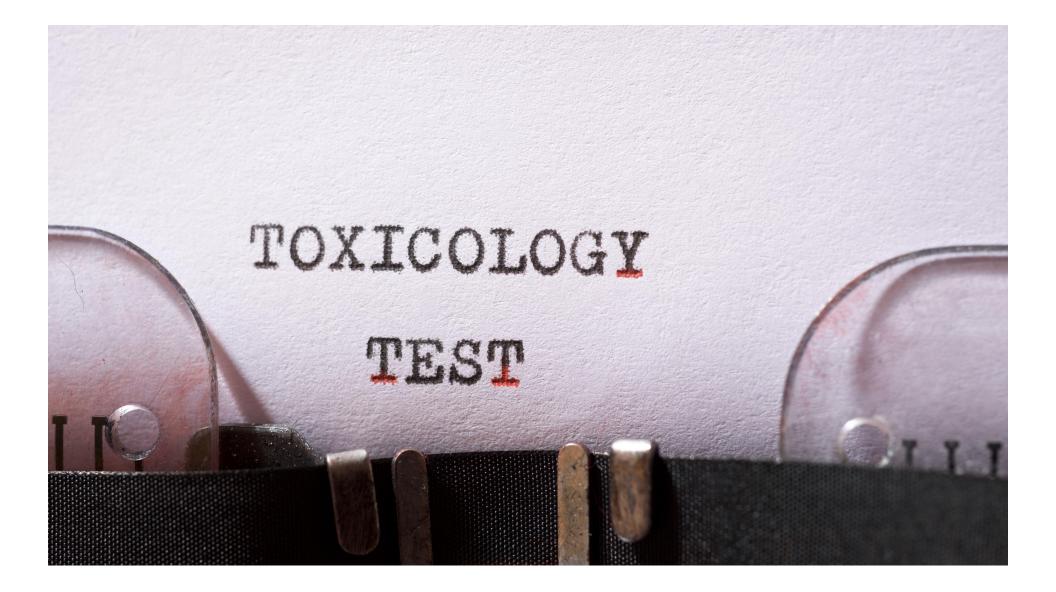
	Acute	Downside	
HGN	None	None	
VGN	None	None	
LOC	None	None	
Pupil Size	Dilated	Normal/Constricted	
Rxn to Light	Slow	Slow	
Pulse Rate	Up	Normal to Slow	
BP	Up	Up Normal	
Body Temp.	Up	Normal	

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	Acute	Downside	Narc. Analgesic	
HGN	None	None	None	
VGN	None	None	None	
LOC	None	None	None	
Pupil Size	Dilated	Normal/Constricted	Constricted	
Rxn to Light	Slow	Slow	Little/None	
Pule Rate	Up	Normal to Slow	Down	
BP	Up	Normal	Down	
Body Temp.	Up	Normal	Down	





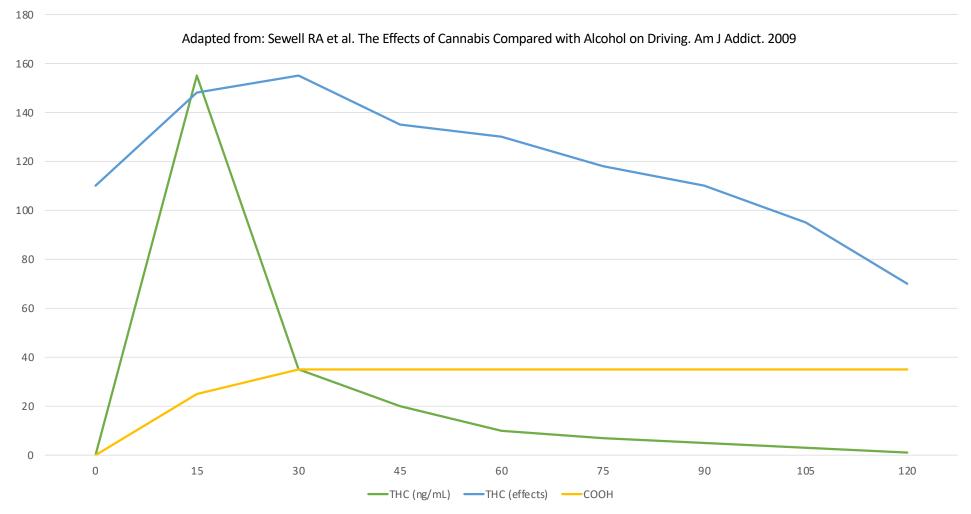




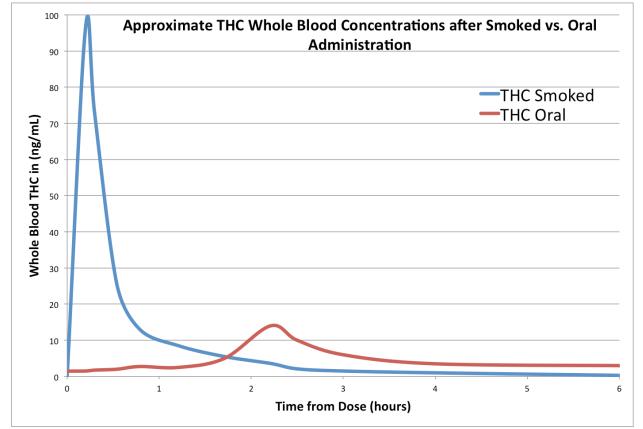


How was the Drug Administered??





THC Levels in Whole Blood – Smoked vs. Oral



Journal of Analytical Toxicology, Vol. 28. September 2004 Relationship of Delta 9-Tetrahydrocannabinol Concentrations in Oral Fluid and Plasma after Controlled Administration of Smoked Cannabis. Marilyn Huestis, Edward Cone.

Clinical Chemistry 55:12 2180–2189 (2009) Delta 9-Tetrahydrocannabinol (THC), 11-Hydroxy-THC, and 11-Nor-9-carboxy-THC Plasma Pharmacokinetics during and after Continuous High-Dose Oral THC. Eugene W. Schwilke, David M. Schwope, Erin L. Karschner, et. al.

Subjective Effects?

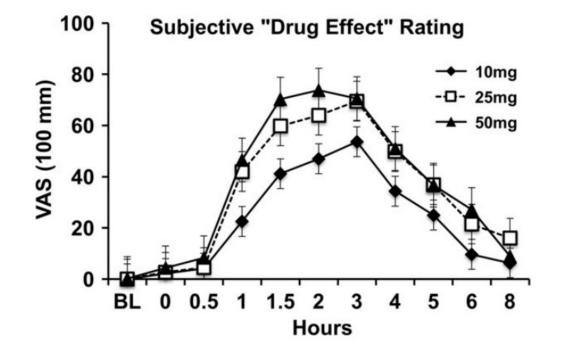


Figure 5. Subjective rated "Drug Effect" by dose.

Journal of Analytical Toxicology, 2017;41:83–99 doi: 10.1030/jat/bkx012 Advance Access Publication Date: 3 February 2017 Article

Article

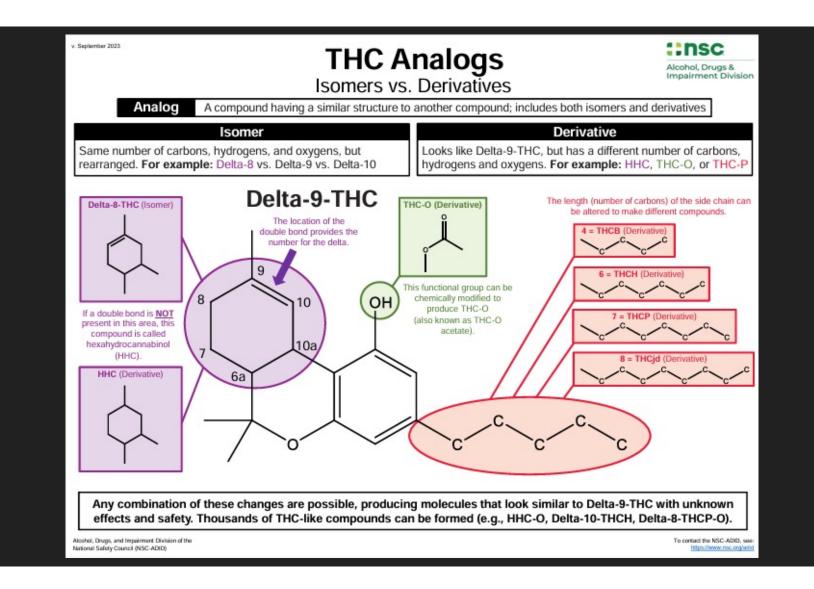
Pharmacokinetic Profile of Oral Cannabis in Humans: Blood and Oral Fluid Disposition and Relation to Pharmacodynamic Outcomes

- Dumn Vandrey^{1,*}, Evan S. Herrmann², John M. Mitchell³, rge E. Bigelow¹, Ronald Flegel⁴, Charles LoDico⁴, and Edward J. Cone¹
 - Onset of Effects
 30-60 min
 - Peak Effects
 - 90-180 min
 - Gradual Return to Baseline
 - 6-8 hours





Routes of Administration



Delta-8-THC: A "Hemp-Derived" Analog

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Synthetic Derivation

Derived synthetically from CBD.

Impairing Effects

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Similar to Delta-9-THC (50-70% potency).

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Regulatory Challenges

Contamination risks and regulatory issues.

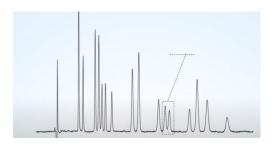
Delta-8-THC is less potent than Delta-9 but can still cause euphoria and impairment. Unregulated products often contain contaminants and high concentrations of Delta-9-THC. Mislabeling as "hemp-derived" creates enforcement difficulties.

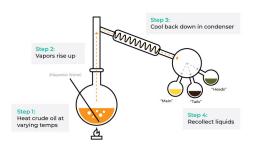


Summary: The Basic Process For Converting CBD to Delta 8 THC

CBD + Acid + Time = $\Delta 8$ THC

- Catalyze CBD with an acid
- 2 Neutralize or remove the acid & solvent
- **3** Purify the final product
- 4 Test for purity











Shopping List Short Path Distillation Kit

Steel Wool

Heating Mantle

Vacuum Pump

CBD Extract or Isolate

T41 Bleaching Clay

T-41 ACID ACTIVATED BLEACHING CLAY

SKU: T1038-500g

Size *

2kg

Size

\$100.00

Acid-activated bentonite clay (*or activated bleaching clay*) is an excellent filtration media.

The clay is rich in carbon, and it has a low pH. This product is most commonly used during oil purification, distillation preparation, pesticide removal, and product improvement (odor removal).

5kg





Premium CBD Isolate Powder 🍞

500g

Quantity

1



VEVOR 5L Distillation Apparatus Max.380°C, Short Path Distillation with Cold Trap, Heating Mantle Short Path Distillation Kit, Lab Distillation Glassware Apparatus (5L) Visit the VEVOR Store

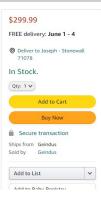
10 Grams

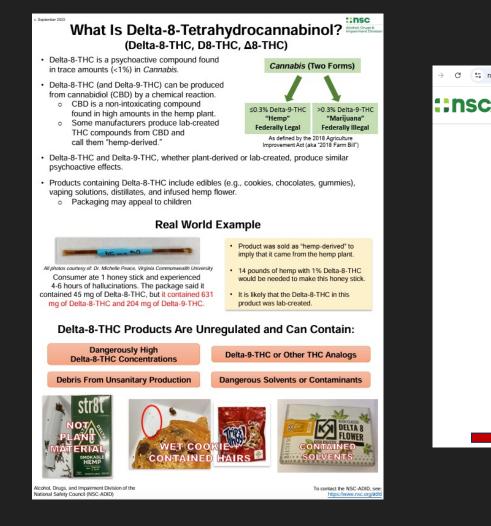


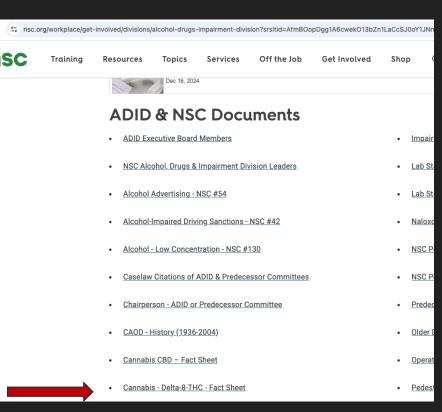
 [PRODUCT DETAILS] - This professional liquid distillation apparatus includes a heating mantle, cold trap, thermometer, support stand, lab jack stand, and heating glassware kit. It provides the whole set to convenient your work.

 [HEATING MANTLE] - The distillation apparatus kit has a liquid heating mantle used to heat. Anticorrosive, heating area of the container up to > 65%. The heating temperature is settable, max. 380°C/716'F.

EXTENSIVE USE] - Short path distillation kit is the ideal tool for distillation, liquid heating, chemical industry, purification in new oil, sanitary field, biochemistry, experimental analysis, education, and research







NUMBERS MEAN EVERYTHING ...and nothing

• What does therapeutic mean to you?



REFERENCES FOR THERAPEUTIC

ele conteres



MOLINA – HANDBOOK OF FORENSIC TOXICOLOG Y FOR MEDICAL EXAMINERS

*IMPORTAN

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SINGLE DOSE vs. STEADY STATE?

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• PLASMA/SERUM vs. WHOLE BLOOD?





Final Thoughts

"It takes more than a toxicologist to say they were impaired"

Steps Needed to Address DUI/DUID Interpretation

This step requires looking at the totality of the investigation. Here consider all the elements of the case and determine if the parts start to make sense. While one point alone might not be indicative of impairment, the sum of all parts start to provide clarity.

SFST PERFORMANCE

These tests are considered tests of impairment – meaning they are tests that a normal sober individual can perform without much difficulty. Any cognitive or psychomotor impairment limits the ability of someone to complete the tests.

LOOK INTO THE EYES

The absence or presence of HGN, VGN, and LOC are critical observations. Having pupil measurments help to explain thte timeline. Consider the color of the conjunctiva.



BUILD THE TIMELINE

This critical step is often the number one reason why you have negative toxicology results – know it first and build the case from here.

ADDRESS INGESTION

We must know how the drug was taken. Was it orally, smoked, IV, transdermal? Thiis question is key to interpreting toxicology results.

CONSIDER ALCOHOL

When alcohol is present, its importance cannot be ignored. It can be additive to other depressants and increase the absorption of other compounds.

Contact Information

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