



LIBI

LONG ISLAND
BUSINESS INSTITUTE

**DRUG-FREE SCHOOLS
AND COMMUNITIES ACT
AMENDMENTS OF 1989**

**ANNUAL NOTIFICATION
FALL 2023**

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- **The Long Island Business Institute (LIBI)** adheres to and complies with the *Drug-Free Schools and Communities Act (DFSCA)* Amendments of 1989, as articulated in the Education Department General Administrative Regulations (EDGAR) Part 86, which require an Institution of Higher Education (IHE) to certify with the United States Department of Education that it has adopted and implemented programs to prevent the illicit use of drugs and the abuse of alcohol by students and its employees. The Drug-Free Schools Act, which has been adopted by LIBI, will be published and disseminated to students and employees, in writing annually, and will be enforced under this section.
- This notification serves as a reminder of the institutional standards of conduct and sanctions relating to drugs and alcohol, provides a description of sanctions for violating federal, state, and local drug and alcohol laws, highlights the health risks associated with drug and alcohol abuse, and summarizes the availability of resources and support for those members of the LIBI community experiencing drug or alcohol problems.

OVERVIEW

LIBI's primary focus and priority is to ensure the safety and wellbeing of our students and employees. An important component of this commitment is the prevention of substance abuse by members of the LIBI community. Substance abuse obstructs learning, teaching, and personal development. Additionally, there are serious criminal and disciplinary implications for students and employees who possess, use, manufacture, distribute or sell controlled or illicit substances on any of LIBI's properties, at LIBI-sponsored events, or while representing the College. This notification recognizes LIBI's responsibility to implement and to enforce alcohol and drug regulations that are consistent with New York State laws.

DRUG / ALCOHOL USE AMNESTY POLICY

LIBI's Drug/Alcohol Use Amnesty Policy is intended to encourage students to seek medical assistance related to drug and/or alcohol use without fear of being disciplined for such use. Drugs/Alcohol can result in addiction and may be life-threatening. It is LIBI's intent to reduce barriers to getting medical and/or other forms of help in order to diminish dependency.

- LIBI wishes to encourage any student under the influence of drugs and/or alcohol who may be the victim of, witness to, or otherwise becomes aware of violence whether it is domestic violence, dating violence, stalking, sexual assault, sexual harassment, gender-based harassment, to report that violence or harassment to LIBI's administration or to the proper law enforcement authorities.
- Likewise, if the student is the victim of, witness to, or otherwise becomes aware of violence, sexual harassment, or gender-based harassment, and who reports such violence or harassment will not be disciplined for the consumption of alcohol, drugs, or other controlled substances.
- If in good faith, a student who seeks medical assistance for him, her, or others and/or who receives medical assistance as a result of seeking help will not be disciplined for the consumption of alcohol, drugs, or other controlled substances.
- In the interest of the student, LIBI, however, will support the student in seeking help in the form of alcohol and/or drug treatment/therapy.
- This policy is intended both to implement Article 129-B of the Education Law (which mandates drug and alcohol amnesty for reporters of violence) and to complement New York State's Good Samaritan Law, which is designed to encourage individuals to call 911 in the event of an alcohol or drug-related emergency. Generally, the Good Samaritan Law protects persons who witness or suffer from a medical emergency involving drugs or alcohol from being arrested or prosecuted for drug or underage alcohol possession after they call 911. It does not protect against arrest or prosecution for other offenses, such as the sale of drugs.
- LIBI's Amnesty Policy is intended to encourage a student under the influence, or who is a victim of or is witness to any activity considered to be against LIBI's policies, to seek help without the added pressure of disciplinary actions being taken. However, the policy will not tolerate sexual misconduct as defined by LIBI's Policy on Sexual Misconduct. This policy does not protect those who cause or threaten physical harm to others or cause damage to property not belonging to them. This policy does not protect against arrest or prosecution for other offenses, such as the sale of drugs.

MEDICAL AMNESTY AND GOOD SAMARITAN POLICY

Student health and safety are primary concerns of the Long Island Business Institute. Because LIBI has a strict policy against alcohol and drug use on its campuses, students may be reluctant to seek medical help because of the disciplinary repercussions for themselves or the person in need of assistance. To encourage students to seek medical attention for a fellow student suffering an alcohol or other drug overdose on campus when the emergency is potentially life threatening, LIBI will treat that report under its Medical Amnesty and Good Samaritan Policy.

Students are expected to contact the Registrar, the Provost, the Director of Operations and Institutional Effectiveness, a member of the Academic Advising staff, or any senior college administrator on duty, when they believe that medical assistance is urgently needed for an individual suffering an alcohol or other drug overdose. The administrator on duty will contact ambulance emergency crews to assist the student. If there is more than one student involved in alcohol and drug use on campus, and one of them attempts to help the other(s) by making a 911 phone call or notifying the school administration, this student will not be subject to LIBI's disciplinary actions under the alcohol and drug policies if he or she completed the recommended alcohol/drug education activities, assessment, and/or treatment depending on the level of concern for student health and safety in a specified time frame.

Serious or repeated incidents will prompt a higher degree of medical concern. Failure to complete recommended follow-up normally will result in disciplinary action up to and including dismissal without recourse.

POLICY FOR ALCOHOL AND/OR DRUG USE AMNESTY IN SEXUAL VIOLENCE CASES

The health and safety of every student at the Long Island Business Institute (LIBI) is of utmost importance. LIBI recognizes that students who have been drinking and/or using drugs (whether such use is voluntary or involuntary) at the time a sexual violence incident occurs may be hesitant to report such incidents due to fear of potential consequences for their own conduct. LIBI strongly encourages students to report incidents of sexual violence to campus officials. A bystander reporting in good faith or a victim/survivor reporting sexual violence to LIBI officials or law enforcement will not be subject to campus conduct action for violations of alcohol and/or drug use policies occurring at or near the time of the sexual violence.

CONTROLLED SUBSTANCES

Federal law has numerous penalties for the illegal possession of controlled substances, possession of crack cocaine, and trafficking in methamphetamine, heroin, cocaine, cocaine base, PCP, LSD, fentanyl, and fentanyl analogue.

Possession sentences range from up to one-year imprisonment and \$1,000 fine to 15 years imprisonment and fines up to \$5,000. Forfeiture of personal and real property used to possess or to facilitate possession of a controlled substance can be a sanction for convictions. Sanctions also can include **denial of federal benefits*** such as contracts, public housing tenancy, eligibility to receive or purchase firearms, and professional commercial licenses. Federal trafficking sanctions can range from one-year imprisonment and \$100 fine to life in prison and a fine of \$20 million. All students wishing to discuss financial aid eligibility due to a drug conviction are encouraged to set up a private meeting with the Financial Aid Director or the Associate Director of Administration and Financial Aid Systems as soon as feasible.

See [Appendix C](#) for more information.

***DENIAL OF FEDERAL AID (20 USC 1091)**

As of July 01, 2023, Students convicted of drug-related offenses are now eligible for Title IV aid under the FAFSA Simplification Act that amended Section 484 of the Higher Education Act of 1965 (HEA). Having a drug conviction while receiving Title IV aid no longer impacts a student's Title IV aid eligibility, and a student who has a drug conviction may be eligible to receive Title IV aid if they meet all other eligibility criteria. The Department has removed the drug convictions questions from the 2023-24 FAFSA, and students with drug convictions are eligible for Title IV aid if they meet all other eligibility requirements. However, it is essential to note that the eligibility criterion related to the Anti-Drug Abuse Act is unaffected by removing the drug conviction question. For further information, see the link below:

<https://studentaid.gov/understand-aid/eligibility/requirements/criminal-convictions>

For a complete list of FEDERAL TRAFFICKING PENALTIES, please refer to pages 30 and 31 of: https://www.dea.gov/sites/default/files/drug_of_abuse.pdf

NY CODE - SECTION 220.00: CONTROLLED SUBSTANCES; DEFINITIONS

Section 220 of the New York Penal Law defines those drugs considered “Controlled Substances,” including narcotic drugs, narcotic preparations, hallucinogens (LSD, “hallucinogenic mushrooms,” etc.), stimulants, depressants, and concentrated forms of cannabis. Individual statutes deal with the criminal possession or sale of these substances and are categorized as misdemeanors or felonies depending on the specific substance, the amount of the substance in question, or the circumstances surrounding the possession or sale of the substance. Possession or sale (or possession with intent to sell) of even a very small amount of some substances is considered a felonious offense and may result in a lengthy jail sentence. The exception is “Criminal Possession of a Controlled Substance in the Seventh Degree,” covered under Federal, State, and Local Legal sanctions.

Conviction of possession and sale of controlled substances carries a number and variety of penalties under New York State law. Sanctions range from fines to prison terms of 8 years to 30 years, depending upon the nature of the substance, the criminal act, and the character of the crime. Federal Trafficking Law convictions also carry a variety of penalties which range from 5 years to life in prison and substantial fines.

NEW YORK PENALTIES AND SENTENCES

A defendant convicted of a class A-1 felony (possession of eight or more ounces of substances containing a narcotic drug or 5,760 milligrams of methadone) may be sentenced to a term of 8 to 30 years imprisonment or a fine of \$100,000. Convictions of class B to class E felonies range from sentences of a minimum of one year to a maximum of 1.5 to 9 years or fines ranging from \$15,000 to \$30,000 for class B and class C felonies.

PENALTY DETAILS

Marijuana and its synthetic “equivalents” are considered Schedule I hallucinogenic substances under New York Public Health Law. Synthetic equivalents include resinous extracts and derivatives with similar chemical properties.

As of May 10, 2020, covered employers are not permitted to test job candidates for marijuana or tetrahydrocannabinols (THC) as a condition of employment. There are several exceptions, discussed further below, where testing job applicants for marijuana or THC for specific kinds of jobs is still permitted.²

The law prohibits employers from testing job applicants for marijuana or THC, with some exceptions. However, it does not change employers’ ability to drug test current employees.

There are some exceptions to this law. Employers may require tests for job applicants applying for specific types of jobs. Testing is permissible where:

- 1.** Required by the U.S. Department of Transportation under 49 C.F.R. Part 40 or related state and local rules (e.g., flight crew and train dispatchers) (as defined in the applicable DOT rules);
- 2.** Required by the federal government as a condition of receiving a contract or **grant (such as Title IV)**;
- 3.** Required by federal or state law “for purposes of safety or security”;
- 4.** A collective bargaining agreement includes terms related to pre-employment drug testing of job applicants.

For more information, please see:

New York Pub. Health §3306(d)(13) New York Pub. Health §3306(d)(21)

<https://www.health.ny.gov/professionals/narcotic/>

² New York City Human Rights Law Ban On Pre-Employment Marijuana Testing Takes Effect: <https://www.natlawreview.com/article/new-york-city-human-rights-law-ban-pre-employment-marijuana-testing-takes-effect>

OTHER LEGAL SANCTIONS UNDER NEW YORK STATE LAW - SECTION 11-100

Compensation for injury or damage caused by the intoxication of a person under the age of 21 years.

General obligations (GOB) <https://www.nysenate.gov/legislation/laws/GOB/11-100>

- 1.** Any person who shall be injured in person, property, means of support or otherwise, by reason of the intoxication or impairment of ability of any person under the age of 21 years, whether resulting in his or her death or not, shall have a right of action to recover actual damages against any person who knowingly causes such intoxication or impairment of ability by unlawfully furnishing to or unlawfully assisting in procuring alcoholic beverages for such person with knowledge or reasonable cause to believe that such person was under the age of 21 years.
- 2.** In case of the death of either party, the action or right of action established by the provisions of this section shall survive to or against his or her executor or administrator, and the amount so recovered by either a husband, wife, or child shall be his or her sole and separate property.
- 3.** Such action may be brought in any court of competent jurisdiction.
- 4.** In any case where parents shall be entitled to such damages, either of such parents may bring an action; therefore, but that recovery by either one of such parties shall constitute a bar to suit brought by the other.

LIBI'S DRUG AND ALCOHOL POLICY

The standards of conduct under this policy apply to all students who are registered at LIBI for at least one course for any type of credit. Students who are employed by LIBI either on a part-time job basis or as part of the Federal Work Study program must adhere to both student and employee policies. Furthermore, potential students seeking admission at LIBI must comply with this policy during the enrollment process.

LIBI strongly supports comprehensive substance abuse prevention initiatives, including education, early intervention, and treatment programs as the most effective means to help reduce and to deter alcohol and drug abuse. LIBI expressly prohibits the unlawful possession, use, or distribution of drugs and alcohol by students, faculty, or staff members while on LIBI property, while participating in LIBI-sponsored activities, or while representing LIBI at events outside of the College. All members of the LIBI community are responsible for complying with federal, state, and local laws on the possession, use, and sale of alcohol and illicit drugs. Any member of the LIBI community (including staff, faculty, and students) found to be in violation of this policy will be subject to strict disciplinary actions, up to and including dismissal from the College or termination of employment, as applicable.

Employees and individuals engaged in directly performing work for LIBI may not report to work under the influence of drugs or alcohol. All employees or individuals performing work for LIBI are expected to exercise discretion in consuming alcohol while attending LIBI-sponsored events at which alcohol is being served.

ALCOHOL TESTS FOR EMPLOYEES

When requesting or requiring an alcohol test, LIBI will consider an employee with a blood alcohol level of 0.06 or greater to be “impaired.”

Behaviors Explicitly Prohibited by this policy include but are not limited to:

- Appearing at work under the influence of alcohol or illegal drugs;
- Conducting LIBI business while under the influence of alcohol or illegal drugs (whether or not the employee is actually on work premises at the time);
- Consuming alcohol or using illegal drugs on campus;
- Consuming alcohol or illegal drugs while conducting LIBI business (whether or not the employee is actually on work premises at the time);
- Possessing, buying, selling, or distributing alcohol or illegal drugs on campus;
- Possessing, buying, selling, or distributing alcohol or illegal drugs while conducting LIBI business (whether or not the employee is actually on work premises at the time).

This policy also covers times when employees are on call but not working.

Employees who violate this policy will face disciplinary action, up to and including termination of employment.

We do not prohibit employees from consuming alcohol at social or business functions that we sponsor where alcohol is served. Even at these functions, however, employees may not consume alcohol to the point of intoxication or to the point where they endanger their own safety or the safety of others.

Employees must conduct themselves professionally and appropriately while conducting business on

LIBI's behalf or while representing LIBI at a third-party function.

Students who arrive on campus intoxicated will not be permitted to remain in school and will face disciplinary sanctions commensurate with the level of transgression. Students who are found to be consuming alcohol on campus, or engaging in illegal drug use, will face immediate suspension and sanctions described in the section below.

Depending on the severity of the infraction under this policy, student sanctions may include but are not limited to: written warning to be retained in the student's file, parental notification, educational sanctions (workshop attendance, research/reflec-

tion papers), disciplinary probation, referral for appropriate rehabilitation, substance abuse assessment*, loss of privileges, suspension, dismissal, and prosecution to the fullest extent of the law.

** Students whose alcohol or drug use results in harm or the threat of harm to themselves, others in the College community, or to LIBI's property, regardless of the location of the incident, may face disciplinary action by the College up to and including expulsion and/or arrest.*

If deemed necessary by the President, the Provost, or the Student Disciplinary Hearing Committee, a student accused of violating LIBI's drug-related policies may be required to submit to testing for the presence of illegal substances. In these cases, students will be required to get drug-tested by a medical professional at the student's expense as often as deemed necessary by the College. The student will be required to submit results of the tests to the appropriate administrator. Any student whose test results indicate continued drug use may face additional disciplinary action by the College up to and including expulsion.

DRUG ABUSE

Drug abuse is defined by the National Institute on Drug Abuse (NIH) as “the use of illegal drugs or the inappropriate use of prescription drugs.

The repeated use of drugs to produce pleasure, alleviate stress, and/or alter or avoid reality. In research and clinical practice, the term “drug abuse” is often used diagnostically to indicate that a patient continues to use a drug despite adverse social, legal, or occupational consequences, but is not subject to drug tolerance or withdrawal.” For more information see: <http://easyread.drugabuse.gov/>

Because LIBI strongly supports comprehensive substance abuse prevention initiatives, including education, all students and employees are expected to view the link below to better understand **“Why Are Drugs So Hard to Quit?”** https://www.youtube.com/watch?v=Xbk35VFpUPI&feature=emb_title

DRUG ADDICTION / DRUG DEPENDENCY

Drug addiction is a multifarious disease. Overcoming a drug addiction takes more than good intentions or a strong will. Addiction is widely considered a brain disease because drug use changes the structure of the brain and how it works. A key characteristic of drug addiction is the compulsive desire to seek and to use the drug despite its harmful consequences.

Although most people experiment with drugs voluntarily, over time a person's ability to exert self-control becomes seriously compromised. Brain imaging studies from drug-addicted individuals show actual physical changes in areas of the brain that are critical to judgment, decision-making, memory, and behavior control.²

Drugs introduced into the body through smoking or injections have an increased addictive potential.³ This is because both smoked and injected drugs enter the brain within seconds and produce a powerful "high." Researchers studying addiction to smoked and injectable drugs believe that because the intense "high" from these drugs generally fades within a few minutes and produces an intense and harshly felt contrast, individuals are driven to repeated drug abuse in order to recapture the euphoric feeling of pleasure.

Under the Controlled Substances Act, the FDA defines "addict" as any individual who habitually uses any narcotic drug so as to endanger the public morals, health, safety, or welfare, or who is so far addicted to the use of narcotic drugs as to have lost the power of self-control with reference to his or her addiction.

Costs of substance abuse in the United States (including productivity and health and crime related costs) exceed \$600 billion annually. Approximately \$193 billion is spent nationally because of illicit drug use,⁴ \$193 billion for tobacco,⁵ and \$235 billion for alcohol.⁶

2 Fowler JS, Volkow ND, Kassand CA, Chang L. *Imaging the addicted human brain*. Sci Pract Perspect 3(2):4-16, 2007.

3 Verebey K, Gold MS. *From coca leaves to crack: the effects of dose and routes of administration in abuse liability*. Psychiatr Annals 18:513-520, 1988.

4 Hatsukami DK, Fischman MW. *Crack cocaine and cocaine hydrochloride: Are the differences myth or reality*. JAMA 276:1580- 1588, 1996.

5 Centers for Disease Control and Prevention. *Smoking-Attributable Mortality, Years of Potential Life Lost, and Productivity Losses— United States, 2000–2004*. Morbidity and Mortality Weekly Report. Available at: <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5745a3.htm>

6 Rehm, J., Mathers, C., Popova, S., Thavorncharoensap, M., Teerawattananon Y., Patra, J. *Global burden of disease and injury and economic cost attributable to alcohol use and alcohol-use disorders*. Lancet, 373(9682):2223–2233, 2009.

References:

- Tintinalli JE, Kelen GD, Stapczynski JS, Ma OJ, Cline DM. Toxicology and pharmacology. In: Tintinalli JE, Kelen GD, Stapczynski JS, Ma OJ, Cline DM, eds. *Emergency Medicine: A Comprehensive Study Guide*. 6th ed. Columbus, OH: McGraw-Hill; 2006: section 14.
- McPherson RA, Pincus MR. Toxicology and therapeutic drug monitoring. In: McPherson RA, Pincus MR, eds. *Henry's Clinical Diagnosis and Management by Laboratory Methods*. 21st ed. Philadelphia, Pa: Saunders Elsevier; 2006: chap 23.
- Sachs C, Wheeler M. Examination of the sexual assault victim. In: Roberts JR, Hedges JR, eds. *Clinical Procedures in Emergency Medicine*. 5th ed. Philadelphia, Pa: Saunders Elsevier; 2009: chap 58.

COMMONLY ABUSED SUBSTANCES

The information below was taken from, and is available in greater detail at:

<https://www.drugabuse.gov/publications/teaching-addiction-science/neurobiology-drug-addiction>

<https://www.drugabuse.gov/publications/media-guide/most-commonly-used-addictive-drugs>

- Opiates and narcotics are powerful painkillers that cause drowsiness (sedation) and feelings of euphoria. These include heroin, opium, codeine, meperidine (Demerol), hydromorphone (Dilaudid), and Oxycontin.
- Central nervous system stimulants include amphetamines, cocaine, dextroamphetamine, methamphetamine, and methylphenidate (Ritalin). Caffeine and nicotine are the most commonly used stimulants. These drugs have a stimulating effect, and people can start needing higher amounts of these drugs to feel the same effect (tolerance).
- Central nervous system depressants include barbiturates (amobarbital, pentobarbital, secobarbital), benzodiazepine (Valium, Ativan, Xanax), chloral hydrate, and paraldehyde. The most commonly used, by far, is alcohol. These substances produce a soothing sedative and anxiety-reducing effect and can lead to dependence.
- Hallucinogens include LSD, mescaline, psilocybin ("mushrooms"), and phencyclidine (PCP or "Angel Dust"). They can cause people to see things that aren't there (hallucinations) and can lead to psychological dependence.
- Tetrahydrocannabinol (THC) is the active ingredient found in marijuana (cannabis) and hashish. Although used for their relaxing properties, THC-derived drugs can also lead to paranoia and anxiety.

For more information also see [Appendix D](#).

HEALTH EFFECTS OF MARIJUANA

According to the National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, Marijuana is the most commonly used federally illegal drug in the United States, with an estimated 48.2 million people using it in 2019. Marijuana use may have a wide range of health effects on the body and brain.

Available at CDC website: <https://www.cdc.gov/marijuana/health-effects/index.html> (last accessed September 19, 2021)

Approximately 1 in 10 people who use marijuana will become addicted. When they start before age 18, the rate of addiction rises to 1 in 6.

More information is available at SAMHSA website: <https://www.samhsa.gov/marijuana> (last accessed September 19, 2021)

Marijuana Risks

Marijuana use can have negative and long-term effects:



Brain health: Marijuana can cause permanent IQ loss of as much as 8 points when people start using it at a young age. These IQ points do not come back, even after quitting marijuana.



Mental health: Studies link marijuana use to depression, anxiety, suicide planning, and psychotic episodes. It is not known, however, if marijuana use is the cause of these conditions.



Athletic Performance: Research shows that marijuana affects timing, movement, and coordination, which can harm athletic performance.



Driving: People who drive under the influence of marijuana can experience dangerous effects: slower reactions, lane weaving, decreased coordination, and difficulty reacting to signals and sounds on the road.



Baby's health and development: [Marijuana use during pregnancy](#) may cause fetal growth restriction, premature birth, stillbirth, and problems with brain development, resulting in hyperactivity and poor cognitive function. Tetrahydrocannabinol (THC) and other chemicals from marijuana can also be passed from a mother to her baby through breast milk, further impacting a child's healthy development.



Daily life: Using marijuana can affect performance and how well people do in life. Research shows that people who use marijuana are more likely to have relationship problems, worse educational outcomes, lower career achievement, and reduced life satisfaction.

Available at SAMHSA website: <https://www.samhsa.gov/marijuana> (last accessed September 19, 2021)

Also see [Appendix B](#).

LOOKING FOR TREATMENT?

If you or someone you know or care about, should be seeking help for drug-related problems, call **1- 800-662-HELP (4357)** at any time to find drug treatment centers near you.

For an extensive list of local and national organizations helping individuals recover from substance abuse, students should speak to their Academic Advisor or the Registrar.

Quick Links to HELP:

- **Substance Use Treatment Locator**
findtreatment.gov
Millions of Americans have a substance use disorder. Help is available, treatment works and people recover every day. Find a state-licensed treatment facility near you.
- **National Suicide Prevention Lifeline**
1-800-273-TALK (8255)
TTY: 1-800-799-4889
suicidepreventionlifeline.org
24-hour, toll-free, confidential support for people in distress. Prevention and crisis resources for you or your loved ones.
- **Behavioral Health Treatment Services Locator**
findtreatment.samhsa.gov
A confidential and anonymous source of information for persons seeking treatment facilities in the United States or U.S. Territories for substance use/addiction and/or mental health problems.
- **SAMHSA's National Helpline**
1-800-662-HELP (4357)
TTY: 1-800-487-4889
samhsa.gov/find-help/national-helpline
This Helpline provides 24-hour free and confidential treatment referral and information about mental and/or substance use disorders, prevention, and recovery in English and Spanish.
- **Buprenorphine Practitioner & Treatment Program Locator**
samhsa.gov/medication-assisted-treatment/practitioner-program-data/treatment-practitioner-locator
Find information on locating practitioners and treatment programs authorized to treat opioids, such as heroin or prescription pain relievers.
- **Disaster Distress Helpline**
1-800-985-5990
samhsa.gov/find-help/disaster-distress-helpline
SAMHSA's Disaster Distress Helpline provides 24/7, 365-day-a-year crisis counseling and support to people experiencing emotional distress related to natural or human-caused disasters.
- **Early Serious Mental Illness Treatment Locator**
samhsa.gov/esmi-treatment-locator
Find treatment programs in your state that treat recent onset of serious mental illnesses such as psychosis, schizophrenia, bi-polar disorder, and other conditions.
- **Opioid Treatment Program Directory**
dpt2.samhsa.gov/treatment/
Find treatment programs in your state that treat addiction and dependence on opioids, such as heroin or prescription pain relievers.

- **Veterans Crisis Line**
1-800-273-TALK (8255)
TTY: 1-800-799-4889
Text: 838255
veteranscrisisline.net
Reach caring, qualified responders with the Department of Veterans Affairs. Many of them are Veterans themselves.
- **Drug-Free Workplace**
1-800-WORKPLACE (967-5752)
samhsa.gov/workplace/resources/drug-free-helpline
Assists employers and union representatives with policy development, drug testing, employee assistance, employee education, supervisor training, and program implementation.

Last Updated: 07/29/2021

ALCOHOL USE DISORDER

Four out of five college students admit to drinking alcohol. Approximately half of the college students, who admit to drinking, consume it through binge drinking.

Alcohol consumed irresponsibly or illegally (by those under the legal drinking age) affects college communities across the nation. According to the National Institute on Alcohol Abuse and Alcoholism (NIAAA), about 18 million people in the United States have an alcohol use disorder, classified as alcohol dependence (i.e. alcoholism).

The following consequences of excessive alcohol consumption were reported by the NIAAA:

<https://www.niaaa.nih.gov/alcohol-health/overview-alcohol-consumption/alcohol-facts-and-statistics>

- **Death:** 1,825 college students between the ages of 18 and 24 die each year from alcohol-related unintentional injuries.
- **Assault:** More than 690,000 students between the ages of 18 and 24 are assaulted by another student who has been drinking.
- **Sexual Abuse:** More than 97,000 students between the ages of 18 and 24 are victims of alcohol-related sexual assault or date rape.
- **Injury:** 599,000 students between the ages of 18 and 24 receive unintentional injuries while under the influence of alcohol.
- **Academic Problems:** About 25 percent of college students report academic consequences of their drinking including missing class, falling behind, doing poorly on exams or papers, and receiving lower grades overall.
- **Health Problems/Suicide Attempts:** More than 150,000 students develop an alcohol-related health problem and between 1.2 and 1.5 percent of students indicate that they tried to commit suicide within the past year due to drinking or drug use.
- **Drunk Driving:** 2.8 million students between the ages of 18 and 24 reported driving under the influence of alcohol.

DRIVING WHILE INTOXICATED AND DRIVING WITH ABILITY IMPAIRED BY DRUGS: IF YOU DRINK, DON'T DRIVE!

Alcohol or drug related driving offenses in New York State carry criminal, penal, civil, or administrative consequences. The criminal consequences may include all or some of the following: court-imposed fines and surcharges, a sentence of probation or conditional discharge with a condition that you install and maintain an Ignition Interlock Device (IID) in all vehicles you own or operate, and imprisonment. If the IID detects alcohol on the driver's breath, the engine will not start.

A driver causing a death or serious injury as a result of a traffic accident while intoxicated or impaired by alcohol or drugs, may face additional criminal charges under the Penal Law for vehicular assault, aggravated vehicular assault, vehicular manslaughter, and aggravated vehicular homicide, punishable by up to 15-25 years in prison.

The civil or administrative consequences will include fines, mandatory surcharges, and related fees levied by the Department of Motor Vehicles ("DMV"), and the suspension or revocation of your driver's license by the DMV.

Convictions under these statutes may lead to fines, legal fees, and increased insurance premiums. Further, conviction under a misdemeanor drug or alcohol-related driving offense results in a criminal record which may have to be reported when seeking employment, applying to other college programs, and applying for financial aid.

HOW MANY DRINKS MAKE YOU LEGALLY INTOXICATED?

In New York State, you are legally intoxicated when your BAC reaches .08%. You are considered driving while ability impaired (“DWAI”) when your BAC is more than .05%, but less than .08%.

Alcohol consumption in any amount affects the judgment and coordination of a driver. The degree of impairment depends on four basic factors: (a) how much is consumed; (b) how long the person drinks; c) eating before or during drinking, as food slows absorption of alcohol; and (d) the person’s body weight.

A 12-ounce can of beer, a 5-ounce glass of wine, or a shot of 86-proof liquor all contain the same amount of alcohol. Your body metabolizes about one drink each hour. Only time will truly sober you up, not coffee, a walk, or a cold shower.

WHAT IS EXCESSIVE DRINKING?

- **Excessive drinking** includes binge drinking, heavy drinking, and any drinking by pregnant women or people younger than age 21.
- **Binge drinking**, the most common form of excessive drinking, is defined as consuming.
- **For women**, 4 or more drinks during a single occasion.
- **For men**, 5 or more drinks during a single occasion.
- **Heavy drinking** is defined as consuming.
- **For women**, 8 or more drinks per week.
- **For men**, 15 or more drinks per week.

Most people who drink excessively are not alcoholics or alcohol dependent.

Available at CDC website: <https://www.cdc.gov/marijuana/factsheets/teens.htm> (last accessed September 19, 2021); <https://www.cdc.gov/marijuana/health-effects.html> (last accessed Sept 19, 2021).

SHORT-TERM AND LONG-TERM HEALTH RISKS ASSOCIATED WITH ALCOHOL CONSUMPTION

Please review the Alcohol Use and Your Health information located on the CDC website:

<https://www.cdc.gov/alcohol/fact-sheets/alcohol-use.htm>

Please see [Appendix A](#).

NEW YORK STATE'S "ZERO TOLERANCE" LAW BECAME EFFECTIVE ON NOVEMBER 1, 1996. LEGISLATION AFFECTS DRIVERS UNDER 21 YEARS OF AGE

The Zero Tolerance law applies to a person under age 21 who operates a motor vehicle with a blood alcohol concentration (BAC) of .02% or more, but not more than .07%.

Even though the law is called "zero tolerance," the minimum BAC is .02 and not 0. This is because certain cough syrups and mouthwashes contain alcohol, and/or some families will permit the consumption of small amounts of alcohol as part of religious or family functions. The Legislature decided to set the standard at .02% in order to address only those young people who had willfully consumed alcohol and operated a motor vehicle.

Individuals deemed by a police officer to be younger than 21 who appear to have consumed alcohol, will be temporarily detained for the purpose of taking a breathalyzer test to determine their blood alcohol content (BAC), usually at the police station.

Those refusing to take a breath test will be subject to a license revocation of at least one year.

BLOOD ALCOHOL CONTENT (BAC) AND HOW YOU MAY BE CHARGED

BAC	OFFENSE	PROCEDURES
0.02% or more, but not more than 0.07%	Driving after having consumed alcohol (a zero-tolerance violation)	Administrative Hearing
more than 0.05% and less than 0.08%	Driving while ability is impaired by alcohol (DWAI)	Criminal Court
0.08% or more	Driving while intoxicated (DWI)	Criminal Court

For more information, please go to: <http://www.safeny.ny.gov/zero-tol.htm>

PREVENTION THROUGH EDUCATION

LIBI strongly believes that education and awareness is the best method of preventing alcohol and drug abuse. As such, periodically throughout the year LIBI offers workshops and sponsors speakers on the dangers of drug and alcohol abuse. LIBI also distributes and makes available informational materials dealing with drug and alcohol consumption through the library and the Academic Success Center at all three locations. All LIBI students and employees are highly urged to attend these seminars and to read the informational materials provided. To obtain more information regarding the dangers and health risks associated with alcohol or chemical substance consumption and dependency, please visit the LIBI library or speak to an Academic Advisor or the Registrar.

- Help is available 24-hours a day, 365 days a year for alcoholism, drug abuse, and problem gambling.
Call **877-8-HOPENY (1-877-846-7369)**
<https://findaddictiontreatment.ny.gov/>
All calls are toll-free, anonymous, and confidential.
- Help is also available through the Substance Abuse and Mental Health Services Administration (SAMHSA).
Call the SAMHSA Treatment Referral Helpline:
1-800-662-HELP (4357) / 1-800- 487-4889 (TDD).
- To report synthetic drug abuse, sale, manufacturing, distribution, or possession:
Call **1-888-99-SALTS (1-888-997-2587).**

DISTRIBUTION OF POLICIES

LIBI distributes the Drugs and Alcohol and Drug-Alcohol Use Amnesty policies to all students in a communitywide email each year, as required by college policy and the federal regulations. In addition, students receive a printed handout entitled “What’s in it for ME?”. The document describes legal sanctions for drug and alcohol misuse, health risks associated with substance abuse, and lists treatment and help centers. The Drugs and Alcohol policy is also distributed to all new employees as part of our onboarding process.

ONLINE RESOURCES

Education plays a critical role in preventing substance abuse. The links below provide additional important information about the harms and consequences of drug use by describing a drug's effects on the body and mind, overdose potential, origin, legal status, and other key facts.

- https://www.dea.gov/sites/default/files/drug_of_abuse.pdf
- www.DEA.gov;
- **Aimed at teenagers:**
www.JustThinkTwice.com,
- **Designed for parents, educators, and caregivers:**
www.GetSmartAboutDrugs.com
www.operationprevention.com.
- **Commonly Abused Prescription Drugs and OTCS:**
https://d14rmgtrwzf5a.cloudfront.net/sites/default/files/nida_commonlyabuseddrugs_rx_final_printready.pdf
- **Commonly Abused Drugs and Withdrawal Symptoms:**
https://d14rmgtrwzf5a.cloudfront.net/sites/default/files/nida_commonlyabused_withdrawalsymptoms_10062017-508-1.pdf
- **Opioid Overdose Crisis:**
<https://www.drugabuse.gov/drugs-abuse/opioids/opioid-overdose-crisis>
- **Slang Terms and Code Words: A Reference for Law Enforcement Personnel**
<https://www.dea.gov/documents/2018/07/01/2018-slang-terms-and-code-words>

STEP-BY-STEP GUIDES

WHAT TO DO IF YOU HAVE A PROBLEM WITH DRUGS:

- For Teens and Young Adults:
<https://archives.nida.nih.gov/publications/step-by-step-guides-to-finding-treatment-drug-use-disorders/if-you-have-problem-drugs-teens-young-adults/how-to-find-help>
- For Adults:
<https://archives.nida.nih.gov/publications/step-by-step-guides-to-finding-treatment-drug-use-disorders/if-your-adult-friend-or-loved-one-has-problem-drugs>

WHAT TO DO IF SOMEONE YOU KNOW HAS A PROBLEM WITH DRUGS:

- Your Teen or Young Adult:
<https://archives.nida.nih.gov/publications/step-by-step-guides-to-finding-treatment-drug-use-disorders/if-you-have-problem-drugs-teens-young-adults/how-to-find-help>
- Your Adult Friend or Loved One:
<https://archives.nida.nih.gov/publications/step-by-step-guides-to-finding-treatment-drug-use-disorders/if-your-adult-friend-or-loved-one-has-problem-drugs>

WHAT TO DO IF YOU OR A LOVED ONE HAS A PROBLEM WITH DRUGS:

- Opioid Overdose Reversal with Naloxone (Narcan, Evzio)
<https://www.drugabuse.gov/drug-topics/opioids/opioid-overdose-reversal-nalox-one-narcan-evzio>

BIENNIAL REVIEW

Long Island Business Institute conducts a biennial review of our drug and alcohol programs and policies to determine program effectiveness and consistency of policy enforcement and to identify and implement any changes needed to either. Members of the community may request a copy of the Biennial Review in the library at each location (Flushing Campus, NYC Extension Center, and Commack Campus), or by sending a request through e-mail to the **Director of Operations** (doo@libi.edu). The biennial review is also available in LIBI's website: <https://libi.edu/alcohol-and-other-drugs/>.

For a detailed list of potential health problems caused by prolonged use of illicit drugs or dependence on alcohol and a comprehensive listing of associations and organizations, please review the LIBI's Annual Campus Safety and Security Report.

LIBI QUEENS CAMPUS LIBRARY RESOURCES ON DRUGS, ALCOHOL, AND SUBSTANCE ABUSE

- *Drug abuse: opposing viewpoints*. San Diego, Calif.: Greenhaven Press, 1999. Print Abraham, Henry. *What's a parent to do? Straight talk on drugs and alcohol*. Liberty Corner, NJ: New Horizon Press, 2004. Print
- Dodes, Lance M. *The heart of addiction*. New York: HarperCollins, 2002. Print Fisher, Gary L. *Substance abuse: information for school counselors, social workers, therapists, and counselors*. Boston: Pearson, 2009. Print
- Freimuth, Marilyn. *Addicted? recognizing destructive behavior before it's too late*. Lanham: Rowman & Littlefield, 2008. Print
- Holmes, Ernest. *Alcoholism: its cause and cure from viewpoint of science of mind*. Los Angeles, CA: Science of Mind, 1999. Print
- Moyers, William Cope. *Broken: my story of addiction and redemption*. New York, N.Y.: Viking, 2006. Print
- Peltz, Lawrence A. *The mindful path to addiction recovery: a practical guide to regaining control over your life*. Boston: Shambala Publication, 2013. Print
- Sheff, David. *Beautiful boy: a father's journey through his son's addiction*. Boston: Mariner Books, 2009. Print

- Sheff, David. *Clean: overcoming addiction and ending America's greatest tragedy*. New York: Houghton Mifflin Harcourt Publishing Company, 2013. Print
- Sheff, Nic. *Tweak: (growing up on methamphetamines)*. New York: Athenaeum. Books for Young Readers, 2009. Print
- Spickard, Anderson. *Dying for a drink*. Nashville, Tenn.: W Pub. Group, 2005. Print
- Swartzwelder, Scott. *Buzzed: the straight facts about the most used and abused drugs. from alcohol to ecstasy*. New York, NY: W.W. Norton, 2008. Print

Other resources are available in the library at all three locations (Flushing Campus, NYC Extension Center, and Commack Campus). To review the list, please check: <https://ebookcentral.proquest.com/lib/libi-ebooks/search.action?query=Drugs>

FREE RESOURCES TO TAKE WITH YOU

Drug Free World Pamphlets: available at the library and student lounge.

- The Truth About Drugs Booklet What Is Marijuana?
- The Truth About Alcohol Booklet What Is Cocaine?
- What Is Crystal Meth?
- RESCRIPTION DRUG ABUSE: A SERIOUS PROBLEM
- The Truth About Painkiller Abuse Booklet
- The Truth About Ritalin Abuse Booklet
- What Is LSD?

LOCAL SELF-HELP MEETINGS

- **Alcoholic Anonymous**
<http://www.aa.org>
- **New York Intergroup**
<http://www.nyintergroup.org>
Main: (212) 647-1680
TDD: (212) 647-1649
FAX: (212) 647-1648
- **Oficina Central Hispana De A.A. New York**
<http://www.oficinacentralhispanany.org>
Main: (212) 348-2644
FAX: (212) 348-2689
- **Adult Children of Alcoholics**
<http://www.adultchildren.org/>
Adult Children of Alcoholics is an anonymous Twelve Step program of women and men who grew up in an alcoholic or otherwise dysfunctional homes.
- **Al-Anon Family Intergroup of Greater New York**
<http://www.nycalanon.org/>
The Al-Anon organization helps families and friends of alcoholics. Telephone: (212) 941-0094 Fax: (212) 941-6119
- **New York Nar-Anon**
<https://www.nynaranon.org/>
1-866-378-3510
The Nar-Anon organization helps families and friends of drug addicted persons.
- **Suicide Prevention**
<http://www.suicidepreventionlifeline.org>
1-800-273-TALK
- **Traveler's Aid International**
1-202-546-1127
- **Information for Veterans**
<http://www.benefits.va.gov/benefits>
 - **Benefits:**
1-800-827-1000
 - **Call Center for Homeless Vets:**
1-877-424-3838
 - **Medical Centers:**
1-800-827-1000
 - **Persian Gulf War Helpline:**
1-800-749-8387
 - **Locate the closest VAMC or VA Regional Office:**
1-877-222-8387
- **National Coalition for Homeless Veterans**
<http://www.nchv.org/>
1-800-838-4357 (1-800-VET-HELP)
- **Focus on Recovery Helpline (alcohol/drugs)**
1-800-374-2800
1-800-234-1253
- **National AIDS Hotline**
1-800-CDC-INFO (232-4636)
- **National Suicide Prevention Lifeline**
1-800-SUICIDE (784-2433)
- **Department of Health and Human Services Drug and Alcohol Treatment Referral Routing Service**
1-800-662-4357
- **National Alliance for the Mentally Ill**
1-800-950-6264
- **Mental Health America**
1-800-969-NMH

APPENDIX A

- **Alcohol Use and Your Health - English Version**
<https://www.cdc.gov/alcohol/pdfs/alcoholyourhealth.pdf>
- **Alcohol Use and Your Health - Spanish Version**
<https://www.cdc.gov/alcohol/spanish/pdf/El-consumo-alcohol-y-su-salud.pdf>
- **Drug-Impaired Driving**
<https://www.cdc.gov/transportationsafety/pdf/Drug-Impaired-Driving-Summary-Sheet-LD-508.pdf>
- **New York State Sobering Facts**
<https://www.cdc.gov/transportationsafety/pdf/impaired-driving-new/CDC-impaired-driving-fact-sheet-NewYork.pdf>
- **Alcohol Portal**
<https://www.cdc.gov/alcoholportal/>

APPENDIX B

MARIJUANA: HOW CAN IT AFFECT YOUR HEALTH?

- **Health Effects of Marijuana**
<https://www.cdc.gov/marijuana/health-effects/index.html>
- **Addiction (Marijuana or Cannabis Use Disorder)**
<https://www.cdc.gov/marijuana/health-effects/addiction.html>
- **Secondhand Marijuana Smoke**
 - <https://www.cdc.gov/marijuana/health-effects/second-hand-smoke.html>
 - <https://www.lung.org/local-content/co/raise-smoke-free-kids/marijuana-smoke>
- **Marijuana Smoke FAQ's**
<https://www.cdc.gov/marijuana/faqs.htm>
- **Brain Health**
<https://www.cdc.gov/marijuana/health-effects/brain-health.html>
- **Cancer**
<https://www.cdc.gov/marijuana/health-effects/cancer.html>
- **Heart Health**
<https://www.cdc.gov/marijuana/health-effects/heart-health.html>
- **Mental Health**
<https://www.cdc.gov/marijuana/health-effects/mental-health.html>

APPENDIX C

FEDERAL TRAFFICKING PENALTIES FOR SCHEDULES I, II, III, IV, AND V (except Marijuana, app.2)				
SCHEDULE	SUBSTANCE / QUANTITY	PENALTY	SUBSTANCE / QUANTITY	PENALTY
II	Cocaine 500 - 4,999 grams mixture	First Offense: Not less than 5 yrs. and not more than 40 yrs. If death or serious bodily injury, not less than 20 yrs. or more than life. Fine of not more than \$5 million if an individual, \$25 million if not an individual Second Offense: Not less than 10 yrs. and not more than life. If death or serious bodily injury, life imprisonment. Fine of not more than \$8 million if an individual, \$50 million if not an individual.	Cocaine 5 kilograms or more mixture	First Offense: Not less than 10 yrs. and not more than life. If death or serious bodily injury, not less than 20 yrs. or more than life. Fine of not more than \$10 million if an individual, \$50 million if not an individual Second Offense: Not less than 20 yrs. and not more than life. If death or serious bodily injury, life imprisonment. Fine of not more than \$20 million if an individual, \$75 million if not an individual. 2 or More Prior Offenses: Life imprisonment. Fine of not more than \$20 million if an individual, \$75 million if not an individual.
II	Cocaine Base 28 - 279 grams mixture		Cocaine Base 280 grams or more mixture	
IV	Fentanyl 40 - 399 grams mixture		Fentanyl 400 grams or more mixture	
I	Fentanyl Analogue 10 - 99 grams mixture		Fentanyl Analogue 100 grams or more mixture	
I	Heroin 100 - 999 grams mixture		Heroin 1 kilogram or more mixture	
I	LSD 1 - 9 grams mixture		LSD 10 grams or more mixture	
II	Methamphetamine 5 - 49 grams pure or 50 - 499 grams mixture		Methamphetamine 50 grams or more pure or 500 grams or more mixture	
II	PCP 10 - 99 grams pure or 100 - 999 grams mixture		PCP 100 grams or more pure or 1 kilogram or more mixture	

SUBSTANCE / QUANTITY	PENALTY
Any Amount Of Other Schedule I & II Substances	First Offense: 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 not an individual. Second Offense: 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.
Any Amount Of Any Drug Product Containing Gamma Hydroxybutyric Acid	
Flunitrazepam (Schedule IV) 1 Gram	
Any Amount of Other Schedule III Drugs	First Offense: Not more than 10 yrs. If death or serious bodily injury, not less than 15 yrs. Fine not more than \$500,000 if an individual, \$2.5 million if not an individual. Second Offense: Not more than 20 yrs. If death or serious bodily injury, not more than 30 yrs. Fine not more than \$1 million if an individual, \$5 million if not an individual.
Any Amount of Other Schedule IV Drugs (other than Flunitrazepam)	First Offense: Not more than 5 yrs. Fine not more than \$250,000 if an individual, \$1 million if not an individual. Second Offense: Not more than 10 yrs. Fine not more than \$500,000 if an individual, \$2 million if other than an individual.
Flunitrazepam (Schedule IV) (Other than 1 gram or more)	First Offense: Not more than 5 yrs. Fine not more than \$250,000 if an individual, \$1 million if not an individual. Second Offense: Not more than 10 yrs. Fine not more than \$500,000 if an individual, \$2 million if other than an individual.
Any Amount Of All Schedule V Drugs	First Offense: Not more than 1 yr. Fine not more than \$100,000 if an individual, \$250,000 if not an individual. Second Offense: Not more than 4 yrs. Fine not more than \$200,000 if an individual, \$500,000 if not an individual.

Title 21 Code of Federal Regulations, Part 1308 – Schedules of Controlled Substances:
<https://www.deadiversion.usdoj.gov/21cfr/cfr/2108cfrt.htm>

Subchapter 1 – Control and Enforcement, Part D. Offenses and Penalties:
<https://www.deadiversion.usdoj.gov/21cfr/21usc/index.html>
<https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfcfr/CFRSearch.cfm>

SUBSTANCE / SCHEDULE	QUANTITY	1ST OFFENSE	2ND OFFENSE
Marijuana (Schedule I)	1,000 kg or more marijuana mixture; or 1000 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 of not more than \$10 million if an individual, \$50 million if other than an individual.	Not less than 20 yrs. or more than life. If death or serious bodily injury, life imprisonment. Fine of not more than \$20 million if an individual, \$75 million if other than an individual.
Marijuana (Schedule I)	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 of not more than \$5 million if an individual, \$25 million if other than an individual.	Not less than 20 yrs. or more than life. If death or serious bodily injury, life imprisonment. Fine of not more than \$20 million if an individual, \$75 million if other than an individual.
Marijuana (Schedule I)	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.
Marijuana (Schedule I)	Less than 50 kgs marijuana (but does not include 50 or more marijuana plants regardless 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 an individual.
Hasish (Schedule I)	10 kg or less		
Hasish Oil (Schedule I)	1 kg or less		

Title 21 Code of Federal Regulations, Part 1308.11 – Schedules of Controlled Substances:
Schedule 1 https://www.deadiversion.usdoj.gov/21cfr/cfr/1308/1308_11.htm
Subchapter 1 – Control and Enforcement, Part D. Offenses and Penalties – Section 841.
Prohibited acts A <https://www.deadiversion.usdoj.gov/21cfr/21usc/841.htm>
<https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfcfr/CFRSearch.cfm?fr=1308.11>

APPENDIX D

DRUG FACTS

- **MDMA (Ecstasy/Molly)**
<https://www.drugabuse.gov/publications/drugfacts/mdma-ecstasymolly>
- **Prescription Opioids**
<https://www.drugabuse.gov/publications/drugfacts/prescription-opioids>
- **Prescription Opioids and Heroin**
<https://www.drugabuse.gov/publications/research-reports/prescription-opioids-heroin/introduction>
- **Naloxone**
 - <https://www.drugabuse.gov/publications/drugfacts/naloxone>
 - <https://www.drugabuse.gov/sites/default/files/OPIOIDS-naloxone-one-page-handout-Aug-30-2020.pdf>



First Responders Can Safely Administer Naloxone during the COVID-19 Pandemic



Naloxone is a highly effective opioid overdose-reversing drug that saves thousands of lives in the United States. By taking universal safety precautions, all law enforcement, firefighters, and EMS providers can safely administer **naloxone for overdose reversal**, even during the COVID-19 pandemic.

Steps to respond to a suspected opioid overdose while reducing risk of COVID-19 exposure:

- 1** Use Personal Protective Equipment (PPE) such as gloves and face protection, as most first responders are doing for all emergency calls during the COVID-19 pandemic.
If the person is suspected or confirmed to have COVID-19 or if you see illicit drugs in powder or liquid form, put on additional PPE as recommended by CDC.
- 2** If possible, position the person's head facing away from you.
- 3** Administer naloxone following the instructions for use (the Evzio auto-injector provides voice instructions).
- 4** Start other life support measures if needed and if trained to do so, using appropriate precautions if the person is suspected or confirmed to have COVID-19.
- 5** Stand up and step back to a distance of at least 6 feet as the person regains consciousness.
- 6** Assess the person, introduce yourself, and explain to them what led to naloxone administration, effects of naloxone, and importance of seeking follow-up care.
- 7** When safe, remove PPE following appropriate safety procedures. Avoid touching your eyes, nose, and mouth.
- 8** Wash your hands with soap and water for at least 20 seconds. If soap and water are not available and you had no skin contact with illicit drugs, use an alcohol-based hand sanitizer with at least 60% alcohol.

Assess your safety when you arrive on the scene.
Before you leave, make sure the person receives professional medical follow-up.
HHS encourages the use of PPE while administering all forms of naloxone.



Scan the QR code or visit [hhs.gov/opioids](https://www.hhs.gov/opioids) for resources on how to respond to an opioid overdose.

www.libi.edu

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