K37 Prescription Drugs, Poor Driving, DRE Evaluation…and a Surprising Verdict – A DUID Case Study

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After attending this presentation, attendees will have a greater understanding of drug interpretation, prosecutor preparation, and effective expert witness testimony for prescription drug impaired driving cases.

This presentation will impact the forensic community by influencing toxicologists who are involved with suspected DUID cases by enhancing their understanding of the challenges to interpretive issues.

For drugs other than alcohol, interpretation of drug concentrations and effects on safe driving ability is extremely complex. The toxicologist must consider drug pharmacology, pharmacokinetics, drug interactions, medical information, and research findings and apply them to the individual case scenario. This information must then be presented to the attorneys during preparation for the trial.

The case study that will be presented involves several drugs that can severely affect driving abilities. The drugs include oxycodone (at a potentially toxic concentration of 530 ng/mL), diazepam, nordiazepam, cyclobenzaprine and citalopram. Poor driving was observed by a citizen driver, reported to law enforcement, and documented by the arresting State Patrol Officer. A Drug Recognition Expert (DRE) was called to the scene and conducted an evaluation of the driver. The DRE concluded that he was impaired and under the influence of a CNS Depressant and Narcotic Analgesics.

At trial the driver alleged that he was able to ingest several oxycodone pills while in custody and prior to the blood sample collection. Even though this case had all the required elements for a DUID conviction, the first hearing resulted in a mistrial and was subsequently retried. The full case will be presented with emphasis given to drug interpretation, pharmacokinetics, prosecutor preparation, and effective expert witness testimony.

Drugs, Driving, Impairment