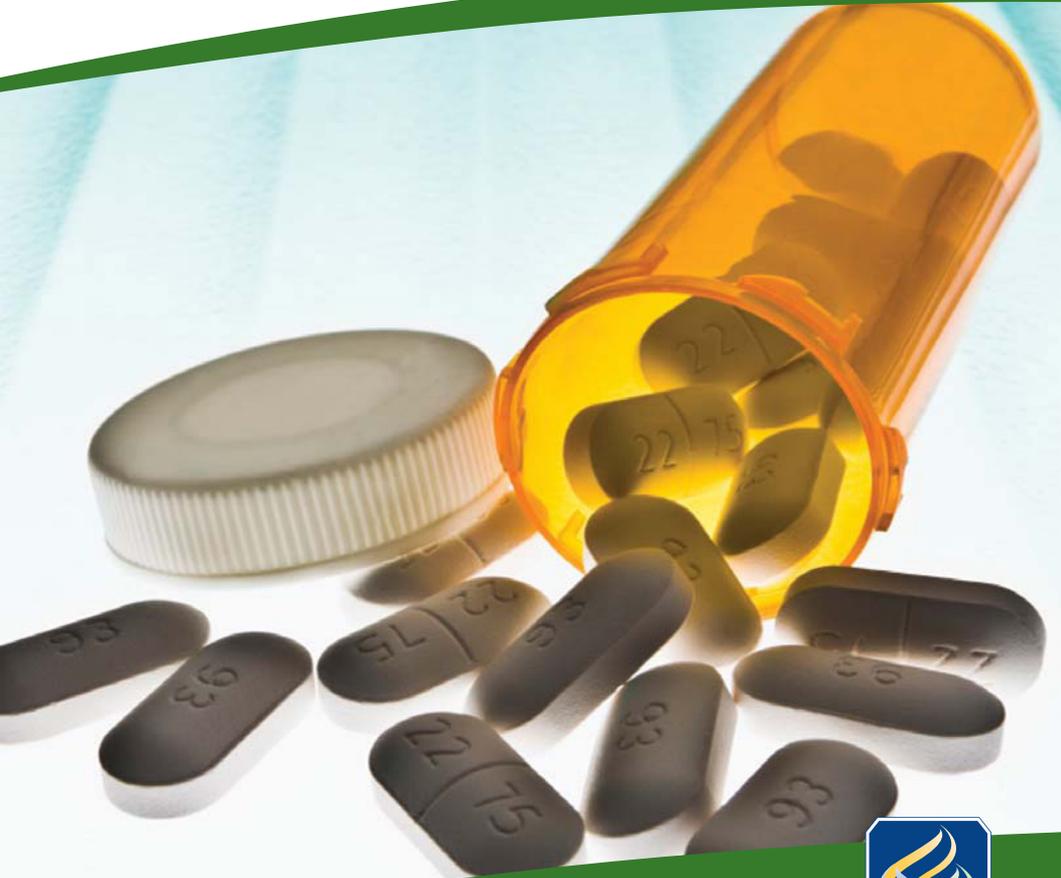


Joseph B Trainer Health & Wellness Center

# A Guide for Alcohol and Other Drug Problems



OREGON  
HEALTH  
& SCIENCE  
UNIVERSITY



Oregon Health & Science University is committed to maintaining a drug-free workplace and educational environment. The Drug-Free Schools and Communities Act requires by law the annual distribution of the information contained on these pages to each student and employee. Additionally, Part 86 of the *Education Department General Administrative Regulations* requires that OHSU distribute the following, as it relates to illicit drugs and alcohol:

- Standards of conduct for students and employees
- Disciplinary sanctions for students and employees in violation of policy
- Description of federal and state based legal sanctions
- Description of health risks associated with alcohol abuse and illicit drug use
- Description of drug and alcohol resources available to employees or students

## Standards of Conduct

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OHSU is committed to maintaining a drug-free institution. The code of conduct guide for all OHSU members including, but not limited to employees, students, and volunteers states, “We perform our duties and protect others in the OHSU community by using sound safety practices, including coming to OHSU free from the influence of alcohol or any illegal drugs.” The unlawful manufacture, distribution, dispersal, possession or use of illicit drugs by university students or employees in the workplace is prohibited.

The OHSU Policy manual contains alcohol and drug related policies for employees and students.

No alcohol shall be served or consumed (1) on OHSU owned or controlled property, whether at an OHSU sponsored event or not, or (2) at an OHSU sponsored event, held on premises not owned or controlled by OHSU, unless approved by the division or department head (or equivalent) and responsible Unit Leader of the sponsoring group. An event held on premises not owned or controlled by OHSU shall not be considered an OHSU sponsored event if no institutional funds or resources are used and attendance is not required by OHSU management.

*This policy applies to all university students and employees, including employed students.*

# Standards of Conduct for Employees

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## Prohibitions

No person shall be under the influence of any unlawful drug, any alcohol, or misused prescription drug while in the workplace, while on duty, or while operating a vehicle or equipment owned or leased by OHSU. Employees suspected of being under the influence in violation of this prohibition may be required to submit to a drug or alcohol test in accordance with Policy No. 03-10-015.

No person shall unlawfully use, possess, sell, manufacture, distribute or dispense alcoholic beverages or drugs on property owned or controlled by OHSU.

## Sanctions

Employees who violate this prohibition will be disciplined in accordance with applicable bargaining agreements and applicable University procedures. Actions include, but are not limited to, required participation in a substance abuse assistance or rehabilitation program, oral or written reprimand, suspension or termination and/or referral of the matter for prosecution.

## Reporting of Convictions

Employees must notify their supervisor, and by phone or in writing to the Chief Administrative Officer, of any criminal drug statute conviction for a violation occurring in the workplace or in the course of their job duties within five days of the conviction. Further, the University is required by law to notify the appropriate government agency of such a conviction within ten days of receiving the conviction notice.

# Standards of Conduct for Students

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## Proscribed Conduct Generally

No student shall engage in conduct proscribed by an applicable school or program or by the University or its Board of Directors, including but not limited to the OHSU Code of Conduct. Engaging in proscribed conduct shall subject a student to sanctions ranging from oral or written reprimand to dismissal, according to written procedures administered by the student's school or program.

## Suspension Or Dismissal

- A. A sanction of suspension or dismissal shall be imposed only after a hearing on the matter conducted in accordance with school policies and procedures and advice from the OHSU Legal Department.
- B. If a school or program has reasonable grounds to believe that a student presents a serious and imminent threat to other persons or themselves, the school or program may immediately suspend the student and provide a hearing as soon as reasonably possible.

## Specific Proscribed Conduct

Without limiting the generality of the above, the following conduct is proscribed by the University:

- A. Conviction of a felony, a class A misdemeanor or of a crime involving moral turpitude (which shall include, but not be limited to, sex or drug related crimes) while attending the University or prior thereto if the conviction was not disclosed (if the application process required disclosure) in applying to the University for admittance;

## Reporting Proscribed Conduct

School or program officials must report to Public Safety whenever:

A student is either arrested or referred for disciplinary action for:

- (1) Liquor Law Violations;
- (2) Drug Law Violations; or
- (3) Illegal Weapons Possession.

## Sanctions for Violations

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In addition to any penalties under federal and state law, employees or students found to be in violation of this policy may be subject to disciplinary sanctions consistent with applicable provisions of state and federal laws, regulations and policies (including Oregon State Board of Higher Education administrative rules, the Oregon Health & Science University Code of Conduct, applicable collective bargaining agreements and applicable university policies).

If imposed, sanctions will include appropriate action up to and including expulsion and/or termination of employment and referral for prosecution and may require participation in an approved drug and/or alcohol abuse assistance or rehabilitation program.

## Federal Sanctions

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The federal system establishes sanctions for possession and distribution of controlled substances based on the schedule of the drug and the amount involved. The statutory sanctions for possession and distribution are also subject to the “Sentencing Guidelines for U.S. Courts,” though imposition of the guidelines may lead to higher offense levels and, thus, stricter penalties than otherwise indicated. Courts must make adjustments in the offense level for victim-related considerations, the defendant’s role in the offense, multiple counts, obstruction and acceptance of responsibility. Finally, the guidelines establish sentences for each offense based on the defendant’s criminal history. The range of federal penal sanctions is: thirty years to life in prison (regardless of the defendant’s criminal history) for the manufacture, distribution or trafficking of large amounts of heroin, cocaine, PCP, methamphetamine, Schedule I and II hallucinogens, marijuana, hashish, or any of their derivatives; zero to four months in prison for possession of any Schedule III or IV drug if defendant has lowest level of criminal history. Further, if serious injury or death results from the crime, minimums of up to 10 years in prison (serious injury) and 20 years in prison (death), plus fines of up to \$4 million may be added. These penalties may be doubled for defendants with past felony drug convictions. Finally, penal sanctions in the federal system are “real time,” with reductions in sentences only for good behavior.

# Sanctions for Possession and/or Distribution

## State of Oregon Sanctions

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### Alcohol

**Minor in possession:** Any attempt to purchase by a person under 21 years is violation (up to \$250 fine).

**Providing liquor to a minor:** Class A misdemeanor (up to one year in prison and a fine, plus restitution and community service) Mandatory minimums:

First conviction: \$350; second conviction: \$1,000; third or subsequent conviction: \$1,000 and 30 days.

For the purposes of the Oregon DUII statutes, for a person under 21 years of age, any amount of alcohol in the blood constitutes being under the influence of intoxicating liquor, which is a Class A misdemeanor with a penalty of up to one year in prison and a \$2,500 fine and suspension or revocation of driving privileges.

### Illicit drugs

In Oregon, penalties for possession and distribution are determined by the controlled substance schedule upon which the drug appears. Examples from the drug schedules appear below. (Note: Most drugs appear on the same federal and state schedule.)

**Schedule I:** Heroin, LSD, marijuana, peyote, mescaline, psilocybin

**Schedule II:** Opium, cocaine, methamphetamine

**Schedule III:** Amphetamine, depressants, PCP

**Schedule IV:** Various prescription drugs

**Schedule V:** Other less dangerous prescription drugs and small amounts of certain drugs

### Marijuana

**Delivery for consideration (selling, dealing or bartering):** Class B felony (up to 10 years in prison and up to \$100,000 fine plus twice the value of any resulting gain of property or money).

**Delivery not for consideration (less than one ounce):** Class A misdemeanor (up to one year in prison and up to \$2,500 fine).

**Delivery not for consideration (less than five grams):** Violation (fine of at least \$500 but not more than \$1,000).

**Unlawful possession (less than one ounce):** Violation (fine of \$500 to \$1,000 plus twice the value of any resulting gain of property or money).

**Unlawful possession (more than one ounce):** Class B Felony (up to 10 years in prison and up to \$100,000 fine plus twice the value of any resulting gain of property or money).

## Schedule I drugs

**Manufacture or distribution (except marijuana):** Class A felony (up to 20 years in prison and up to \$100,000 fine plus twice the value of any resulting gain of property or money).

**Unlawful possession:** Class B felony (up to 10 years in prison and up to \$100,000 fine, plus twice the value of any resulting gain of property or money).

## Schedule II drugs

**Manufacture or distribution:** Class B felony (up to 10 years in prison and up to \$100,000 fine plus twice the value of any resulting gain of property or money).

**Unlawful possession:** Class C felony (up to 5 years in prison and up to \$100,000 fine plus twice the value of any resulting gain of property or money).

## Schedule III drugs

**Manufacture or distribution:** Class C felony (up to five years in prison and up to \$100,000 fine plus twice the value of any resulting gain of property or money).

**Unlawful possession:** Class A misdemeanor (up to one year in prison and up to \$2,500 fine plus twice the value of any resulting gain of property or money).

## Schedule IV drugs

**Manufacture or distribution:** Class B misdemeanor (up to six months in prison and up to \$1,000 fine plus twice the value of any resulting gain of property or money).

**Unlawful possession:** Class C misdemeanor (up to 30 days in prison and up to \$500 fine plus twice the value of any resulting gain of property or money).

## Schedule V drugs

**Manufacture or distribution:** Class C misdemeanor (30 days and up to \$500 fine plus twice the value of any resulting gain of property or money).

**Unlawful possession:** Violation (\$250 fine plus twice the value of any resulting gain of property or money).

It is unlawful for a person to manufacture or deliver a schedule 1, 2, or 3 controlled substance within 1,000 feet of the real property comprising a public or private elementary, vocational or secondary school attended by minors (Class A felony, penalty of up to 20 years in prison and \$100,000 fine).

In addition, the court may order the defendant to pay the cost of prosecution, and the defendant's vehicle used in the crime may be forfeited to the state. Finally, the defendant may forfeit any property used in the crime to the county in which the crime occurred.

# Health Risks Associated With Alcohol Abuse and Illicit Drug Use

## **Tobacco and Nicotine**

Smokers are more likely than nonsmokers to contract heart disease. Lung, larynx, esophageal, bladder, pancreatic, and kidney cancers also strike smokers at increased rates. Thirty percent of cancer deaths are linked to smoking. Chronic obstructive lung diseases, such as emphysema and chronic bronchitis, are 10 times more likely to occur among smokers than among nonsmokers. Smoking during pregnancy also poses risks, such as spontaneous abortion, pre-term birth, and low birth weights. Fetal and infant deaths are more likely to occur when the pregnant woman is a smoker. Nicotine is both psychologically and physically addictive.

## **Alcohol**

Low doses significantly impair the judgment and coordination needed to operate vehicles. Small amounts can also lower inhibitions. Moderate to high doses cause marked impairments in higher mental functions, and loss of memory and the ability to learn and remember information. High doses cause respiratory depression and death. Long-term consumption, particularly when combined with poor nutrition, can also lead to dependence and permanent damage to vital organs such as the brain and the liver. If combined with other depressants of the central nervous system, much lower doses of alcohol will produce the effects just described. Mothers who drink alcohol during pregnancy may give birth to infants with fetal alcohol syndrome. These infants have irreversible physical abnormalities and mental retardation.

## **Cannabis (Marijuana, Hashish, Hashish Oil, Tetrahydrocannabinol)**

Physical effects of cannabis include increased heart rate, bloodshot eyes, dry mouth and throat, and increased appetite. Use of cannabis may impair or reduce short-term memory and comprehension, alter sense of time, reduce ability to perform tasks requiring concentration and coordination, and impair driving ability. Motivation and cognition may be altered, making the acquisition of new information difficult. Marijuana, hashish, THC, etc., can also produce paranoia and psychosis. Long term use may result in possible lung damage, reduced sperm count and sperm motility, and may affect ovulation cycles. Cannabis can also be psychologically addictive.

Chronic use of marijuana by males can reduce the levels of testosterone. Marijuana freely crosses the placental, leaving the developing brain susceptible to marijuana substances. Even great risk is associated the concomitant use of other fetotoxic drugs. During pregnancy the use of marijuana should be avoided.

## **Inhalants (Nitrous Oxide, Amyl Nitrite, Butyl Nitrite, Chlorohydrocarbons, Hydrocarbons)**

Immediate effects of inhalants include nausea, sneezing, coughing, nosebleeds, fatigue, lack of coordination, and loss of appetite. Solvents and aerosol sprays also decrease the heart and respiratory rates and impair judgment. Amyl and butyl nitrite cause rapid pulse, headaches, and involuntary passing of urine and feces. Long-term use may result in hepatitis or brain damage. Deeply inhaling vapors, or using large amounts over a short time, may result in disorientation, violent behavior, unconsciousness, or death. High concentrations of inhalants can cause suffocation by displacing oxygen in lungs. Long term use can cause weight loss, fatigue, electrolyte imbalance, muscle fatigue, and permanent damage to the nervous system.

## **Cocaine (Crack)**

Cocaine stimulates the central nervous system. Its immediate effects include dilated pupils and elevated blood pressure, heart rate, respiratory rate, and body temperature. Occasional use can cause nasal irritation; chronic use can ulcerate the mucous membrane of the nose. Crack or freebase rock is extremely addictive. Physical effects include dilated pupils, increased pulse rate, elevated blood pressure, and insomnia, loss of appetite, tactile hallucinations, paranoia, and seizures. The use of cocaine can cause death by cardiac arrest or respiratory failure.

During pregnancy cocaine is fetotoxic. It causes indirect effects by its actions on the mother's blood vessels and direct effects by crossing the placental barrier. Because of the wide spectrum of both kinds of effects on the unborn, the syndrome is not as well defined as the fetal alcohol syndrome.

## **Stimulants (Amphetamines, Methamphetamines, Crank, Ice)**

Stimulants cause increased heart and respiratory rates, elevated blood pressure, dilated pupils, and decreased appetite. Users may experience sweating, headache, blurred vision, dizziness, sleeplessness, and anxiety. Extremely high doses can cause rapid or irregular heartbeat, tremors, loss of coordination, and physical collapse. Amphetamine injection creates a sudden increase in blood pressure that can result in stroke, very high fever, or heart failure. In addition to physical effects, feelings of restlessness, anxiety, and moodiness can result. Use of large amounts over a long period of time can cause amphetamine psychosis that includes hallucinations, delusions, and paranoia. The use of amphetamines can cause physical and psychological dependence.

Infants born to women abusing methamphetamine show lower birth weights, slower growth, cognitive deficits, behavioral maladjustment, and increased risk of intracerebral hemorrhage. Its use during pregnancy is not recommended.

## **Depressants (Barbiturates, Methaqualone, Tranquilizers)**

Small amounts can produce calmness and relaxed muscles, but somewhat larger doses can cause slurred speech, staggering gait, and altered perception. Large doses can cause respiratory depression, coma, and death. Combination of depressants and alcohol can multiply effects of the drugs, thereby multiplying risks. Babies born to mothers who abuse depressants during pregnancy may be physically dependent on the drugs and show withdrawal symptoms shortly after birth. Birth defects and behavioral problems may also result. The use of depressants can cause both physical and psychological dependence.

## **Hallucinogens (PCP, LSD, Mescaline, Peyote, Psilocybin)**

Phencyclidine (PCP) interrupts the functions of the neocortex, the section of the brain that controls intellect and instinct. PCP blocks pain receptors, and users can have violent PCP episodes resulting in self-inflicted injuries. Lysergic acid diethylamide (LSD), mescaline, and psilocybin cause illusions and hallucinations. The physical effects may include dilated pupils, elevated body temperature, increased heart rate and blood pressure, loss of appetite, sleeplessness, and tremors.

These drugs and the designer drugs below are sometimes classified as psychedelic drugs for useful classification of effects on perception, cognition and mood.

Because of indirect effects on the fetus and potential impairment of judgment of the mother, these drugs should not be taken during pregnancy.

## **Narcotics (Heroin, Methadone, Codeine, Morphine, Meperidine, Opium)**

Narcotics initially produce a feeling of euphoria that often is followed by drowsiness, nausea, and vomiting. Users may experience constricted pupils, watery eyes and itching. Overdoses may produce respiratory depression, clammy skin, convulsions, coma and death. Addiction in pregnant women can lead to premature, stillborn, or addicted infants who experience severe withdrawal symptoms. Use of narcotics can cause physical and psychological dependence.

## **Designer Drugs (Analog of Fenatyl, Analog of Meperidine, MDMA, Ecstasy Analog of PCP)**

Many “designer drugs” are related to amphetamines and depressants and have mild stimulant and depressant properties. Use can produce severe neurochemical damage to the brain. Narcotic analogs can cause symptoms such as those seen in Parkinson’s disease: uncontrollable tremors, drooling, impaired speech, paralysis, and irreversible brain damage. Analog of amphetamines and methamphetamines cause nausea, blurred vision, chills or sweating, and faintness. Psychological effects include anxiety, depression, and paranoia. Analog of PCP cause illusions, hallucinations, and impaired perception.

## Anabolic Steroids

Steroid users subject themselves to more than 70 side effects, ranging in severity from acne to liver cancer, including psychological as well as physical reactions. The liver and cardiovascular and reproductive systems are most seriously affected by use. In males, use can cause withered testicles, sterility, and impotence. In females, irreversible masculine traits can develop along with breast reduction and sterility. Psychological effects in both sexes include very aggressive behavior, known as “road rage”, and depression. While some side effects appear quickly, others, such as heart attacks and strokes, may not show up for years.

## Drug and Alcohol Resources

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### Student Treatment Resources

*Any student, as well as postdoctoral fellows, and their adult dependents who have personal concerns about the use or abuse of alcohol is urged to contact the Joseph B. Trainer Health & Wellness Center at 503 494-8665. Various forms of help, including informational pamphlets, educational presentations, assessment, consultation and referral for treatment are available on a strictly confidential basis.*

Hazeldon offers assessment and treatment for alcohol and drug rehabilitation at two locations in the Portland area. The Springbrook program is a residential campus in Newberg, Oregon. Contact information is:

1901 Esther St.  
Newberg, OR 97132-9529  
Phone: 866-866-4662 or 503-554-4300  
Fax: 503-537-7007  
E-mail: [info@hazeldon.org](mailto:info@hazeldon.org)

The Beaverton location is an outpatient clinic that offers Chemical Dependency, Mental Health, and Pain Management Services. Contact information is:

1500 NW Bethany Blvd.  
Suite 240 Beaverton, OR 97006  
Phone: 503-644-7300  
Fax: 503-747-7851  
E-mail: [info@healthworksnw.com](mailto:info@healthworksnw.com)

OHSU's Avel Gordly Center for Healing (503 494-4745) also offers a team of counselors, therapists, psychologists and psychiatrists to provide effective, evidence based, compassionate mental health services including substance abuse treatment.

Unaffiliated with the Joseph B. Trainer Health & Wellness Center, but conveniently located near campus and in the local area, Alcoholics Anonymous (503 223-8569) offers excellent help free of charge. The caller will be given the times and locations of daily meetings throughout the city and surrounding area. Some meetings may be held on the OHSU campus and nearby at the Portland VA Medical Center.

Other community resources are listed under “Alcohol/Drug Abuse” on the Internet in the Portland Informational Guide section in the front of the local Yellow Pages. Additional listings are under “Alcoholism Treatment” and “Drug Abuse Information and Treatment.”

Helpline, 503 244-1312 in Portland, is a 24-hour hotline with drug and alcohol abuse treatment information.

## **Employee Resources (excluding student employees)**

Employee assistance services are available at no cost to full time employees with Kaiser Permanente or Moda insurance coverage through Cascade Centers. The employee assistance program provides counseling and other services for eligible employees and their family members. Services address a wide range of personal issues and life challenges, including marriage, family and relationship difficulties; financial problems; emotional stress or depression; alcohol and drug-related problems; issues that affect performance at work; and other concerns. If a specialist is needed, Cascade Centers EAP counselors will help with that referral. Employee assistance services are strictly confidential. No one at OHSU will receive any information about your use of Cascade Centers. If an employee wants a Cascade Centers counselor to communicate with other professionals, such as a personal physician or a former counselor, the counselor will do so only after given written permission by the client. By law, however, appropriate notification must be made to authorities in cases involving a risk of suicide, homicide, or child or elder abuse. Confidential counseling telephone lines are open 24 hours a day, 7 days a week.

Employees not eligible or not wishing to use Cascade Centers can take advantage of a number of excellent community resources. Alcoholics Anonymous (503 223-8569; [www.pdxaa.com](http://www.pdxaa.com)) and Narcotics Anonymous (503 345-9839 or 877 551-4662; [www.portlandna.com](http://www.portlandna.com)) can give you the times and locations of daily meetings. The Drug and Alcohol Helpline (503 244-1312 in Portland; 800 923-HELP [4357] elsewhere in Oregon) provides 24-hour support, referrals and information on drug and alcohol abuse treatment resources. Other community resources are listed in the Yellow Pages under “Alcoholism Treatment” and “Drug Abuse Information and Treatment.” In addition, any employee or student who has substance abuse issues may be entitled to request reasonable accommodations under the Americans with Disabilities Act (ADA). Employees should contact the Affirmative Action & Equal Opportunity office at 503-494-5148.

## Faculty Resources

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The Joseph B. Trainer Health & Wellness Center offers consultation to faculty concerned about students who may be affected by alcohol or drug use. Faculty members may call 503 494- 8665 and ask to speak with one of the directors.

### References

- Julien, RM, Advokat, CD & Comaty, JE. *A Primer of Drug Action* (Twelfth Edition), 2010. Worth Publishers, New York.
- National Institute on Drug Abuse, NIDA Capsules, (Rockville, MD: Press Office of the National Institute on Drug Abuse, 1986).
- U.S. Dept of Education (1989). *What Works: Schools Without Drugs*. (Rockville, MD: National Clearinghouse for Alcohol and Drug Information, 1989), pp. 61 – 72.

## Web sites

**[www.oregon.gov/OHA/amh/Pages/health-professionals.aspx](http://www.oregon.gov/OHA/amh/Pages/health-professionals.aspx)**

Consolidated, statewide confidential monitoring program for health professional licensees who are unable to practice with professional skill and safety due to a substance use disorder and/or a mental health disorder

**[www.drugnet.net/](http://www.drugnet.net/)**

Drug and alcohol rehabilitation center and addiction treatment program resource guide

**[www.alcoholism.about.com/library/faq/blfaq.htm](http://www.alcoholism.about.com/library/faq/blfaq.htm)**

Common alcohol questions and their answers

**[www2.potsdam.edu/alcohol-info](http://www2.potsdam.edu/alcohol-info)**

Alcohol problems and solutions

**[www.al-anon.alateen.org](http://www.al-anon.alateen.org)**

For friends and families of problem drinkers

**[www.alcoholmd.com](http://www.alcoholmd.com)**

Information about alcohol and medicine

**[www.na.org](http://www.na.org)**

Narcotics Anonymous

**[www.naatp.org](http://www.naatp.org)**

National Association of Addiction Treatment Providers

**[www.niaaa.nih.gov](http://www.niaaa.nih.gov)**

National Institute on Alcohol Abuse and Alcoholism

**[www.nida.nih.gov](http://www.nida.nih.gov)**

National Institute on Drug Abuse

**[www.fetalalcoholsyndrome.net](http://www.fetalalcoholsyndrome.net)**

Fetal Alcohol Spectrum Disorder

## OHSU School Handbooks:

**School of Pharmacy:** [www.pharmacy.oregonstate.edu/sites/default/files/12-13aps.pdf](http://www.pharmacy.oregonstate.edu/sites/default/files/12-13aps.pdf)

**School of Dentistry:** [www.ohsu.edu/xd/education/schools/school-of-dentistry/current-students/upload/Student-Handbook-1213.pdf](http://www.ohsu.edu/xd/education/schools/school-of-dentistry/current-students/upload/Student-Handbook-1213.pdf)

**School of Nursing:** [www.ohsu.edu/xd/education/schools/school-of-nursing/students/academic-affairs/upload/SoN-Catalog-2012-2013.pdf](http://www.ohsu.edu/xd/education/schools/school-of-nursing/students/academic-affairs/upload/SoN-Catalog-2012-2013.pdf)

**School of Medicine:** [www.ohsu.edu/som/communications/pdf/2012/md-handbook-2013.pdf](http://www.ohsu.edu/som/communications/pdf/2012/md-handbook-2013.pdf)





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*OHSU includes four schools; OHSU Hospital and Doernbecher Children's Hospital; numerous primary care and specialty clinics; multiple research institutes and centers; and several community service and outreach units.*

*OHSU protects the privacy of its patients' personal health information. If you would like a copy of the OHSU Notice of Privacy Practices, please call 503 494-8311.*

*OHSU is an equal opportunity, affirmative action institution. 1113 (3.0)*