

Field Sobriety Test (FST)

Overview



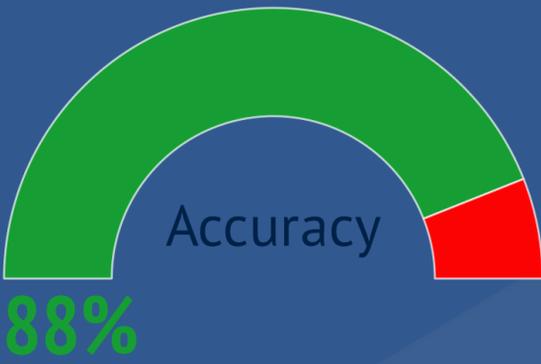
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v2020.1

Horizontal Gaze Nystagmus Test

4 or more clues



Administrative Procedures

1: Check for Eyeglasses

Instruct the subject to remove eyeglasses, if worn.

Document if subject wears contacts; especially colored contacts because some colored contacts may affect the ability to compare pupil size.

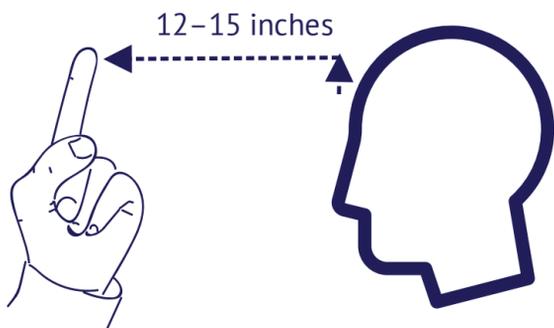
2: Verbal Instructions

Give the subject the appropriate verbal instructions:

- Put feet together, hands at the side.
- Keep head still.
- Look at the stimulus.
- Follow movement of the stimulus with the eyes only.
- Keep looking at the stimulus until told the test is over.

3: Position the Stimulus

Position the stimulus approximately 12–15 inches in front of subject's nose and slightly above eye level.



4: Equal Pupil Size and Resting Nystagmus

Check for Equal Pupil Size and Resting Nystagmus. Resting Nystagmus may be observed at this time. Note whether the subject displays Resting Nystagmus.

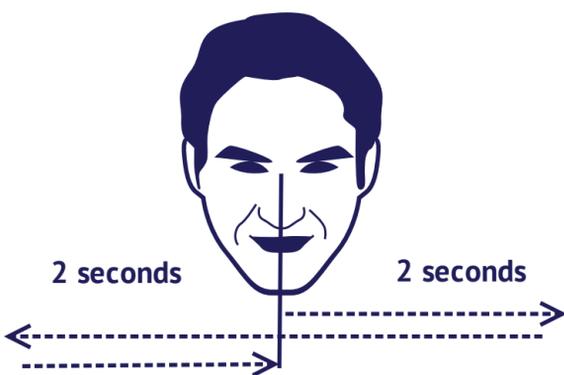
If Resting Nystagmus is observed, you can continue with the remainder of the test to check for other possible indicators of impairment and any possible indicators of a medical condition.

5: Equal Tracking

- Move the stimulus from center to the subject's left then back to center.
- Move the stimulus to the subject's far right, then back to center.
- The speed of the stimulus should be 2 seconds out and 2 seconds to center.

This check may be done more than once.

There should be a clear, distinguishable break between the check for Equal Tracking and Lack of Smooth Pursuit.

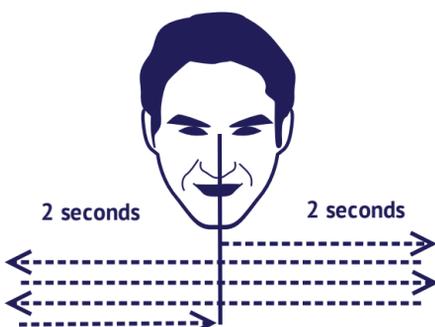


6: Lack of Smooth Pursuit (Clue 1)

Moving your stimulus at a rate of 2 seconds out and 2 seconds back to center:

- Check the **left eye** for the lack of smooth pursuit clue.
If the eye is observed to jerk while moving, that is one clue.
- Check the **right eye** for the lack of smooth pursuit clue.
If the eye is observed to jerk, that is another clue.

Make at least **two complete passes** in front of each eye.

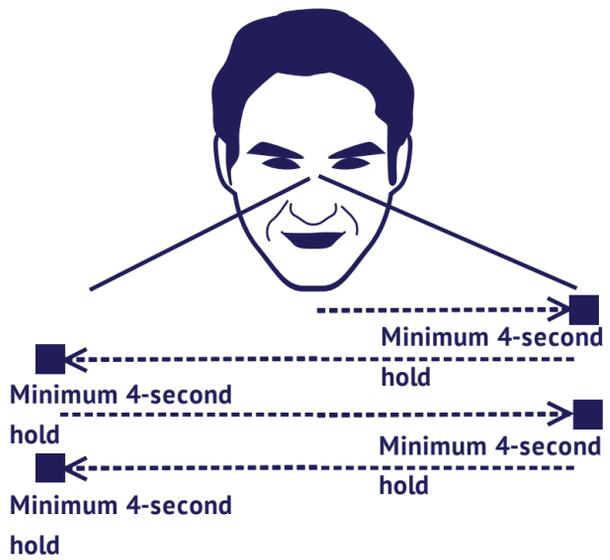


What is HGN?

Involuntary jerking of the eyes occurring as the eyes gaze to the side. The first test administered in the Standardized Field Sobriety Tests (SFSTs).

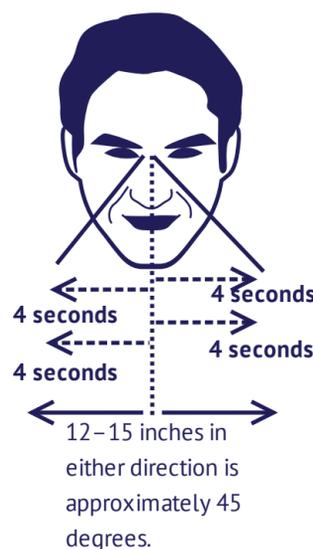
7: Distinct and Sustained Nystagmus at Maximum Deviation (Clue 2)

- Move your stimulus to the subject's left until the left eye is at maximum deviation. **Hold your stimulus for a minimum of 4 seconds.**
If the jerkiness is distinct and sustained, that is one clue for the left eye.
 - Move your stimulus to the subject's right until the right eye is at maximum deviation. **Hold your stimulus for a minimum of 4 seconds.**
If the jerkiness is distinct and sustained, that is one clue for the right eye.
- Check each eye at least twice for this clue.**



8: Onset of Nystagmus Prior to 45 Degrees (Clue 3)

- Check the subject's left eye for Onset of Nystagmus Prior to 45 Degrees.
 - Move your stimulus at a pace that takes approximately 4 seconds to reach 45 degrees.
If the jerking begins prior to 45 degrees, that is one clue for the left eye.
 - Check the subject's right eye for Onset of Nystagmus Prior to 45 Degrees.
 - Move your stimulus at a pace that takes approximately 4 seconds to reach 45 degrees.
If the jerking begins prior to 45 degrees, that is one clue for the right eye.
- Check each eye at least twice for this clue.**



9: Total Clues

- Maximum clues possible for each eye: 3.
- Maximum number of clues for both eyes: 6.

10: Vertical Gaze Nystagmus (VGN)

- Instruct the subject to hold the head still and follow the object with the eyes only.
- Raise the stimulus until the subject's eyes are elevated as far as possible.
- Hold for a minimum of 4 seconds.
- Watch closely for evidence of the eyes jerking upward.

Make two checks for VGN.

HGN Facts

- Reliable Test
- Involuntary
- Noticeable
- As BAC increases, eyes begin to jerk sooner as they move to the side.
- CNS Depressants, Inhalants, and Dissociative Anesthetics cause HGN.

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Walk and Turn (WAT) Test

Divided Attention Test

This requires the subject to concentrate on more than one thing at a time.

- Balancing
- Small muscle control
- Short-term memory

2 or More Clues

Indicates a BAC Above 0.08

79% Accurate

8 Clues

1. Cannot keep balance (feet break away from the heel-to-toe stance)
2. Starts too soon (subject starts walking before told to do so)
3. Stops while walking
4. Does not touch heel-to-toe (1/2 inch or more)
5. Steps off line
6. Uses arms for balance
7. Improper turn
8. Incorrect number of steps

Verbal Instructions

1. Place your left foot on the line (real or imaginary).

Demonstrate placement of left foot.

2. Place your right foot on the line ahead of the left foot, with the heel of your right foot against the toe of the left foot.

Demonstrate placement of both feet.

3. Place your arms down at your sides.

Demonstrate placement of arms at sides.

4. Maintain this position until I have completed the instructions. Do not start to walk until told to do so.

Ask, "Do you understand the instructions so far?" (Make sure subject indicates an understanding.)

The subject is now in the heel-to-toe stance. The first two clues, failing to maintain the heel-to-toe stance and beginning before instructed to do so, can now be observed.



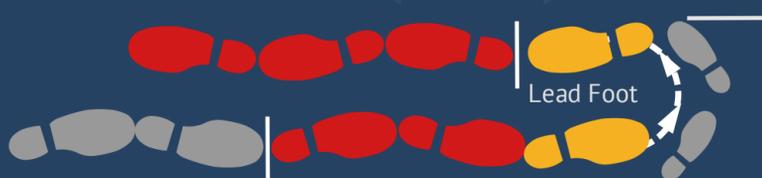
5. When I tell you to start, take nine heel-to-toe steps on the line, turn, and take nine heel-to-toe steps down the line.

Demonstrate a minimum of three heel-to-toe steps.



6. When you turn, keep the front (lead) foot on the line and turn by taking a series of small steps with the other foot, like this.

Demonstrate the turn and a minimum of three heel-to-toe return steps (always be aware of your surroundings).



A series of small steps with rear foot.

7. While you are walking

- Keep your arms at your sides
- Watch your feet at all times
- Count your steps out loud
- Once you start walking, don't stop until you have completed the test

8. Do you understand the instructions? Make sure subject indicates an understanding.

9. Instruct the subject to begin the test.



Considerations

- Test should be conducted on a reasonably dry, hard, level, non-slippery surface.
- Ensure there is sufficient room for subject to complete the test.
- Per the 2018 DWI Detection and SFST manual, recent studies have indicated varying environmental conditions have not affected a subject's ability to perform this test.

- Individuals 65 years of age or older or people with back, leg, or inner ear problems may have difficulty performing this test.
- Individuals wearing heels more than two inches high should be given the opportunity to remove his or her shoes.

ALWAYS CONSIDER OFFICER SAFETY!



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One Leg Stand (OLS) Test

Divided Attention Test

This requires the subject to concentrate on more than one thing at a time.

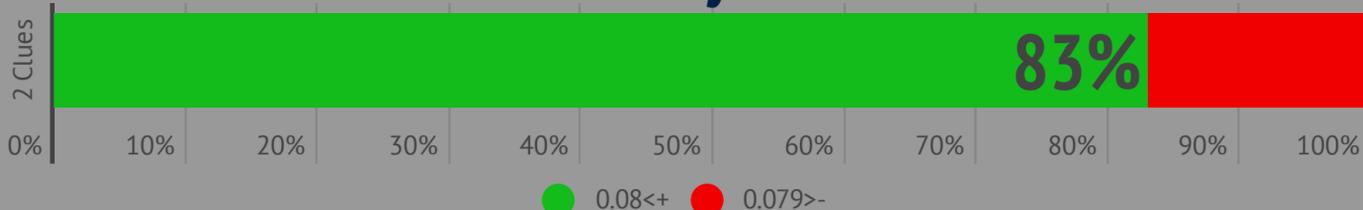
- Balancing
- Small muscle control
- Short-term memory

4 Clues

1. Sways while balancing
2. Uses arms for balance
3. Hops
4. Puts foot down



Accuracy Meter



2 or more clues, indicates a BAC at or above 0.08

Verbal Instructions

1. Please stand with your feet together and your arms down at the sides, like this.

Demonstrate placement of both feet and placement of arms at sides.

2. Do not start to perform the test until I tell you to do so.

3. Do you understand the instructions so far?

Wait for response before continuing.

4. When I tell you to start, raise either leg with the foot approximately six inches off the ground, keeping your foot parallel to the ground.

Demonstrate this position.

5. Keep both legs straight and your arms at your side.

6. While holding that position, count out loud in the following manner: "One thousand one, one thousand two, one thousand three," and so on until told to stop.

Demonstrate and count.

7. Keep your arms at your sides at all times and keep watching the raised foot.

8. Do you understand?

Wait for a response.

9. Begin the Test.

Always time the test and discontinue after 30 seconds.

10. Observe the subject from a safe distance.



If the subject puts the elevated foot down, give instructions to pick it up again and continue counting.

Considerations

• It should be conducted on a reasonably dry, hard, level, non-slippery surface and in relatively safe conditions.

• If these conditions are not met consider

- Asking the subject to perform the test elsewhere
- Only administering the HGN Test

• Per the 2018 DWI Detection and SFST manual, recent studies have indicated varying environmental conditions have not affected a subject's ability to perform this test.

- Individuals 65 years of age or older or people with back, leg, or inner ear problems may have difficulty performing this test.
- Individuals wearing heels more than two inches high should be given the opportunity to remove his or her shoes.
- People who are overweight by 50 or more pounds may have difficulty performing this test.

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Modified Romberg Balance (MRB) Test

Divided Attention Test

The MRB Test is one of four psychophysical tests used during a Drug Recognition Expert (DRE) 12-step evaluation. This test focuses on divided attention and internal time estimation.

If under the influence of drugs or alcohol, performance on the MRB Test may cause the subject's time estimation to be significantly slower or faster than 30 seconds.



Administrative Procedures

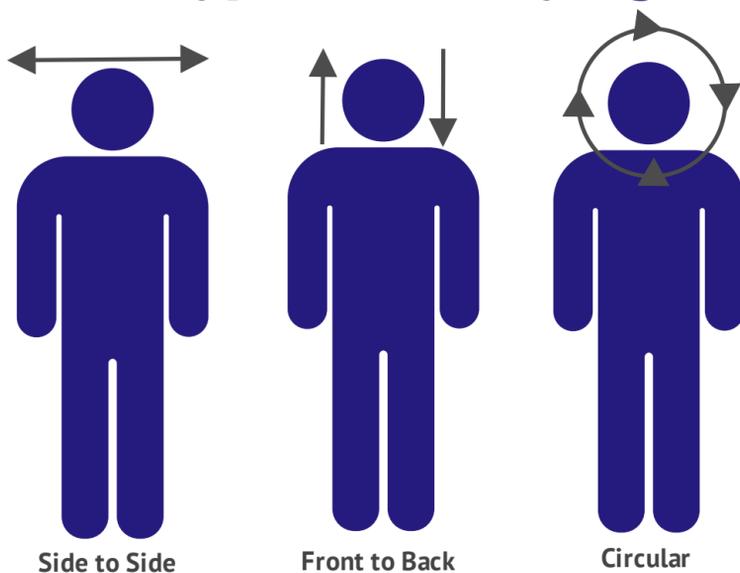
1. "Stand straight with your feet together and your arms down at your sides."
2. "Remain in this position while I finish giving the instructions."
3. "Do not start the test until I say start."
4. Ask if the subject understands the instructions. *Make sure to obtain a verbal response from the subject.*
5. "When I tell you to start, I want you to tilt your head back slightly and close your eyes." **DEMONSTRATE** how the head should be tilted, but **DO NOT CLOSE YOUR EYES** while demonstrating.
6. "Once you have closed your eyes, I want you to remain in that position until you think 30 seconds have passed."
7. "As soon as you think 30 seconds have passed, open your eyes, tilt your head forward, and say stop."
8. "Do you understand?" *Make sure to obtain a verbal response from the subject.*

Instruction Stage

1. Look at your timing device and pick a time to start the test.
2. Tell the subject to tilt his or her head back and close his or her eyes.
3. Tell the subject to begin.
4. Keep track of time while the subject performs the test.
5. Check subject for presence of tremors (eyelid and/or body) and sway. *You may need to move around the subject to check for tremors and swaying.*
6. When the subject opens his or her eyes ask, "How much time was that?" *DREs are encouraged to ask the subject, "How did you determine 30 seconds had passed?"*
7. Record how much time actually elapsed from the start of the test until the subject opened his or her eyes and was told to stop. *If the subject continues to keep eyes closed for 90 seconds, stop the test and record the fact it was terminated at 90 seconds. Make sure to document the exact verbal response.*



Types of Swaying



Side to Side

Front to Back

Circular

The sway from side to side is estimated in inches from center.

The sway from front to back should be estimated in inches from center.

The circular sway should be recorded in inches from center in all directions.

The subject must estimate the passing of



seconds.

Performance outside the range of **plus or minus 5 seconds** should be considered with other evidence during the arrest decision process.

Time Estimation

30 Seconds



Time estimations are based on single drug use. Time estimation could vary with polycategory use.



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Finger-to-Nose (FTN) Test

Divided Attention Test

The FTN Test is another divided attention test. This test is also used in a Drug Influence Evaluation.

The FTN Test differs from the other three tests in that the examiner must continue to give instructions to the subject throughout the test.

The Order of Commands

1. Left
2. Right
3. Left
4. Right
5. Right
6. Left

Verbal Instructions

1. You will be given a series of commands, (e.g., “left, right, and so on”) to indicate which fingertip is to be brought to the tip of the nose.

2. Stand with feet together, arms down at the sides, facing me.

Demonstrate the stance.

3. Close your hands, rotate the palms forward, and then extend the index fingers from your closed hands.

Demonstrate.

4. You will be asked to touch the tip of the index finger to the tip of the nose.

5. When I say left, touch the tip of your left index finger to the tip of your nose.

Demonstrate to the subject how he or she is expected to touch the fingertip to the nose.

(without actually touching the nose).

6. Return your arm to your side immediately after touching your fingertip to your nose.

Demonstrate returning your hand to your side.

7. You will tilt your head back slightly, close your eyes, and keep them closed until I say to open them.

Demonstrate the stance with head tilted back, arms at the sides with index fingers extended.

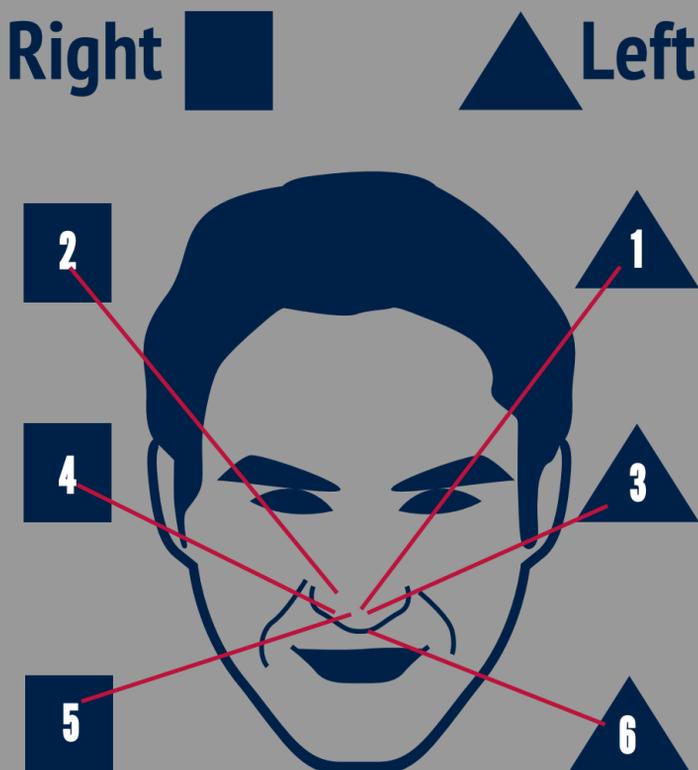
Do not close your eyes during the demonstration for safety reasons.

8. Do you understand?

Wait for a response.

9. Tilt your head back and close your eyes.

Begin giving commands.



Documenting

The results should be recorded by drawing a map, showing where the fingertips landed on each attempt.

A line should be drawn to the appropriate circle or triangle to indicate where the subject touched his or her nose.

There are several observations that may be made for each command. Keep in mind the subject may be impaired, with his or her eyes closed, while you are documenting.

Consider using abbreviations while documenting and always keep safety of the officer and subject in mind.

Some Possible Observations

False start: The subject began to move an arm before instructed to do so.

Failed to close eyes: The subject did not close eyes as instructed.

Failed to tilt head back: Subject did not tilt head back at an angle as instructed.

Wrong hand: Uses wrong hand.

Wrong finger: Uses wrong finger.

Searched: Makes distinct vertical or horizontal movements on approach to nose, prior to contact.

Rapid jerky movement or slow lethargic movement: A movement that seems unnecessarily fast or slow.



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Lack of Convergence (LOC) and Pupil Size

Lack of Convergence

The inability of a person's eyes to converge (or cross) as the person attempts to focus on a stimulus as it is pushed slowly toward the bridge of his or her nose.

Convergence

The crossing of the eyes that occurs when a person is able to focus on a stimulus as it is pushed slowly toward the bridge of the nose.

What if the eyes can't converge?

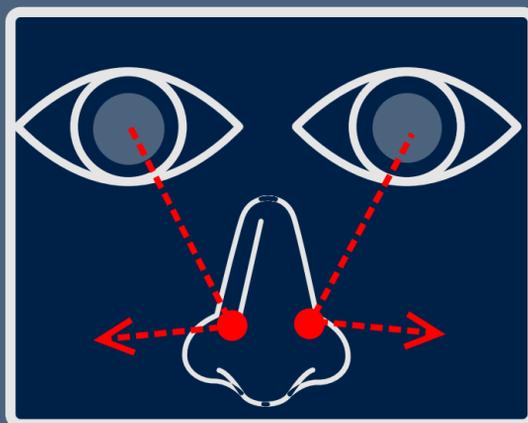
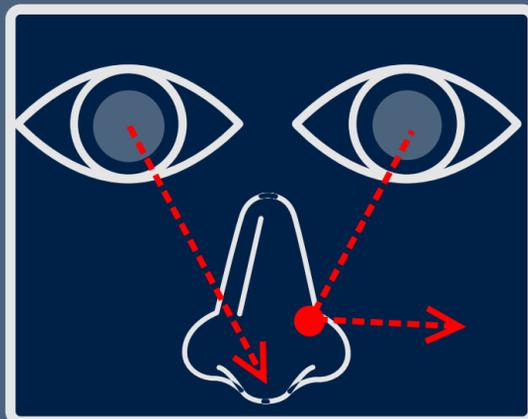
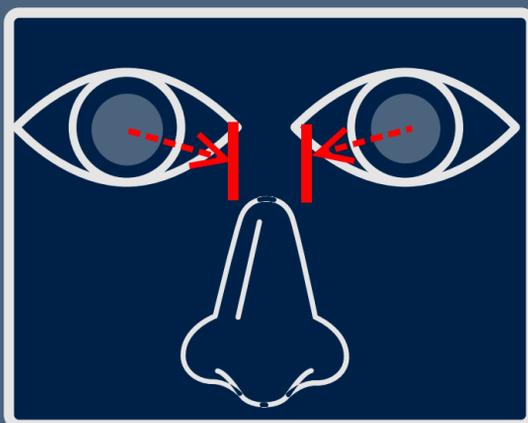
If the eyes are unable to converge, this may provide another clue regarding the presence of

- Depressants
- Inhalants
- Dissociative Anesthetics
- Cannabis

Instructions

1. Position the stimulus approximately 12–15 inches in front of the subject's nose.
2. Inform the subject you are going to move the stimulus around in a circle in front of his or her face and to follow the stimulus with eyes only.
3. Inform the subject you will move the tip of the stimulus in toward the bridge of the nose.
Reassure the subject you will not actually touch the nose.
4. Start to move the object slowly in a circle.
The stimulus can be moved either clockwise or counterclockwise.
5. Verify the subject is tracking the stimulus.
Change your positioning around the subject to view different angles of tremors. This will also ensure your safety.
6. Stop moving in a circular manner with the stimulus above eye level.
7. Slowly move the stimulus down to within approximately two inches of the bridge of the nose.
8. Carefully observe the subject's eyes to determine whether both eyes follow the stimulus and converge.
9. Hold for approximately 1 second then move your stimulus back out, away from the face.
10. This test should be conducted two times.

LOC Examples



Two inches away from nose and hold for 1 second.



Pupil Size

When ingested, drugs from each of the seven drug categories can have a predictable effect on pupil size.

Dilated Pupils

The pupils appear larger than expected for the given lighting condition resulting in a noticeably larger opening (circle) in the center of the eye.

Pupil dilation can be caused by

- Central Nervous System Stimulants
- Hallucinogens
- Cannabis

Constricted Pupils

When pupils appear smaller than expected for the given lighting conditions, resulting in a noticeably smaller opening (circle) in the center of the eye.

Pupil constriction can be caused by

- Narcotic Analgesics

If the two pupils are distinctly different in size, it is possible the subject has a glass eye or is suffering from a head injury or a neurological disorder. Inquire with the subject about the unequal pupil size and call medical personnel if necessary.



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