#### WALK AND TURN

# **INSTRUCTIONS:**

- Put your left foot on the line. Put your right foot in front of the left, heel to toe. Arms down to your sides. (OFFICER DEMONSTRATES STARTING POSITION)
- Remain in this position until told otherwise.
- Don't begin the test until I tell you to start.
- Do you understand?
- When I tell you to start, take 9 heel-to-toe steps on the line.
- When you get to your 9<sup>th</sup> step, keep the front (lead) foot on the line, and turn by taking a series of small steps with the other foot.
- Take 9 heel-to-toe steps down the line .
- [OFFICER DEMONSTRATES TEST]
- Once you start walking:
  - Keep Arms to your sides
  - <u>L</u>ook at your feet
  - Count each step out loud
  - Don't <u>S</u>top until you have completed the test.

**INSTRUCTION STAGE** 

Do you understand the test?

Fail to maintain balance

**SCORING:** 

Starts too soon

SCORING: WALKING STAGE
Stops while walking Misses heel-to-toe Steps off line Raises arms for balance Improper turn Wrong number of steps (note #)  Total Clues:
Describe the turn:
Notes:

# WALK AND TURN

# **INSTRUCTIONS:**

- Put your left foot on the line. Put your right foot in front of the left, heel to toe. Arms down to your sides. (OFFICER DEMONSTRATES STARTING POSITION)
- Remain in this position until told otherwise.
- Don't begin the test until I tell you to start.
- Do you understand?
- When I tell you to start, take 9 heel-to-toe steps on the line.
- When you get to your 9<sup>th</sup> step, keep the front (lead) foot on the line, and turn by taking a series of small steps with the other foot.
- Take 9 heel-to-toe steps down the line .
- [OFFICER DEMONSTRATES TEST]
- Once you start walking:
  - Keep Arms to your sides
  - <u>L</u>ook at your feet
  - Count each step out loud
  - Don't Stop until you have completed the test.

**INSTRUCTION STAGE** 

Do you understand the test?

SCORING:

Fail to maintain balance Starts too soon		
SCORING: WALKING STAG	SE .	
	First 9	Second 9
Stops while walking		
Misses heel-to-toe		
Steps off line		
Raises arms for balance		
Improper turn		
Wrong number of steps (note #)		
Total Clues:		
Describe the turn:		
		<del></del> ,
Notes:		

# **ONE LEG STAND**

## <u>INSTRUCTIONS:</u>

you to start. Do you understand? at your sides. Do not begin the test until I tell Stand with your feet together and your arms

When I tell you to start, raise one leg, either

- Count out loud in the following manner:1001, off the ground and parallel to the ground. leg, so your foot is approximately 6 inches
- down to your sides, both legs straight, and While performing the test, keep both arms 1002, 1003, and so on, until I tell you to stop.

01-0

- [OFFICER DEMONSTRATES TEST] look at your raised foot.
- Do you understand the test?

11-20 21-30

sdoH Puts foot down Raises arms Sways

**SCORING:** 

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-	INOTES:	

Date:	Time:
Suspect	
# əsɐɔ	

# \*Read Medical Questions\* HORIZONTAL GAZE NYSTAGMUS

# **INSTRUCTIONS:**

- Focus your eyes on my stimulus.
- Follow my stimulus with your eyes.
- Don't move your head.
- Do you understand?

ack of Smooth Pursuit		
,;		
<u> гсовіие:</u>	ר	В
Check for Equal Tracking		
Check Equal Pupil Size and Restin	ıg Mystag	รทเมธิ

Notes:			
Total Clues:			
Onset of Nystagmus Prior to 45°			
Distinct & Sustained Mystagmus at Maximum Deviation			
Lack of Smooth Pursuit			
<b>гсовіис</b> :	٦	В	

# **ONE LEG STAND**

#### **INSTRUCTIONS:**

- you to start. Do you understand? at your sides. Do not begin the test until I tell Stand with your feet together and your arms
- 1002, 1003, and so on, until I tell you to stop. Count out loud in the following manner:1001, off the ground and parallel to the ground. leg, so your foot is approximately 6 inches When I tell you to start, raise one leg, either
- down to your sides, both legs straight, and While performing the test, keep both arms
- [OFFICER DEMONSTRATES TEST] look at your raised foot.
- Do you understand the test?

Notes:				
Total Clues:				
sdoH				
Puts foot down				
Raises arms				
Sways				
<u> </u>				
SCORING:	01-0	11-20	21-30	

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HORIZONTAL GAZE NYSTAGMUS

# \*Read Medical Questions\*

# **INSTRUCTIONS:**

- Focus your eyes on my stimulus.
- Follow my stimulus with your eyes.
- Do you understand? Don't move your head.

Notes:

Check for Equal Tracking Check Equal Pupil Size and Resting Mystagmus

Total Clues:		
Ostagmus Prior to 45°		
noiativa Deviation		
sumgstayM benistau& & tonitaio		
Lack of Smooth Pursuit		
есовіие:	٦	Я

		PROBABILITY
TEST	CRITERIA	.08 OR MORE
HGN	4 Clues	88%
_		
Walk & Turn	2 Clues	79%
	2 0.003	7370
One Leg Stand	2 Clues	83%

FROM THE 1998 SAN DIEGO FIELD VALIDATION STUDY

**CRITERIA** 

**NHTSA SCORING** 

# STANDARDIZED FIELD



**LIEFD GNIDE** 

Revised 4-2025

### **PROBABILITY** TEST .08 OR MORE CRITERIA HGN 4 Clues 88% Walk & Turn 2 Clues 79% One Leg Stand 2 Clues 83%

FROM THE 1998 SAN DIEGO FIELD VALIDATION STUDY

# **NHTSA SCORING CRITERIA**

# **SOBRIETY TESTING** STANDARDIZED FIELD



**LIEFD GNIDE** 

Revised 4-2025

# **Pre-Test Medical Questions**

1.	Are you sick or injured?	Yes	_ No
2.	Are you taking any meds		_ No
	What? Last Dose:	Amount: _	
3.	Past head injuries?  Describe:	Yes	_ No
4.	Do you have diabetes?		_ No
	Do you take insulin: Last Dose:		_ No
5.	Are you hypoglycemic?		_ No
6.	Seen a doctor/dentist reco When: Reason: Doctor:		
7.	Any speech problems?  Describe:		_ No
8.	Any hearing problems?  Describe:	Yes	_No
9.	Any balance problems?  Describe:	Yes	_ No

# **Cannabis Interview**

Have you used marijuana in any form?

Which strain(s)? (Sativa, Indica, or Hybrid)

Why do you like that strain?

How do you use it?

Smoke/Vape?
Dabs? Budder? Shatter? Oil?
Edibles?

How much did you use? When did you last use?

How does it make you feel?

# **Pre-Test Medical Questions**

1.	Are you sick or injured?	Yes	No
2.	Are you taking any meds? What?		No
	Last Dose:	_ Amount:	:
3.	Past head injuries?  Describe:	Yes	No
4.	Do you have diabetes?  Do you take insulin:	Yes	No No
_	Last Dose:		:
	Are you hypoglycemic?		No
C	Seen a doctor/dentist recen	tlv?Yes	No
о.	When: Reason: Doctor:		
	When:	Yes	
7.	When: Reason: Doctor:  Any speech problems?	Yes	
7. 8.	When: Reason: Doctor:  Any speech problems? Describe:  Any hearing problems?	Yes	No

# **Cannabis Interview**

Have you used marijuana in any form?

Which strain(s)? (Sativa, Indica, or Hybrid)

Why do you like that strain?

How do you use it?

Smoke/Vape?
Dabs? Budder? Shatter? Oil?
Edibles?

How much did you use? When did you last use?

How does it make you feel?