



# **Safe Handling Training**

October 9, 2018

Office of the Indiana Attorney General  
Indiana Drug Enforcement Association  
Indiana State Police  
Evansville Police Department



# **Fentanyl, Opiates and Opioids: The Silent Killers and a National Epidemic**

Det. Brock Hensley





# Course Objectives

- OBSERVE HOW COMMON CULTURE IS USED FOR OPOID/OPIATE DISTRIBUTION
- LEARN THE DIFFERENCE BETWEEN OPIATES AND OPIOIDS
- IDENTIFY THE TYPES OF OPIOIDS COMMON ON THE STREET

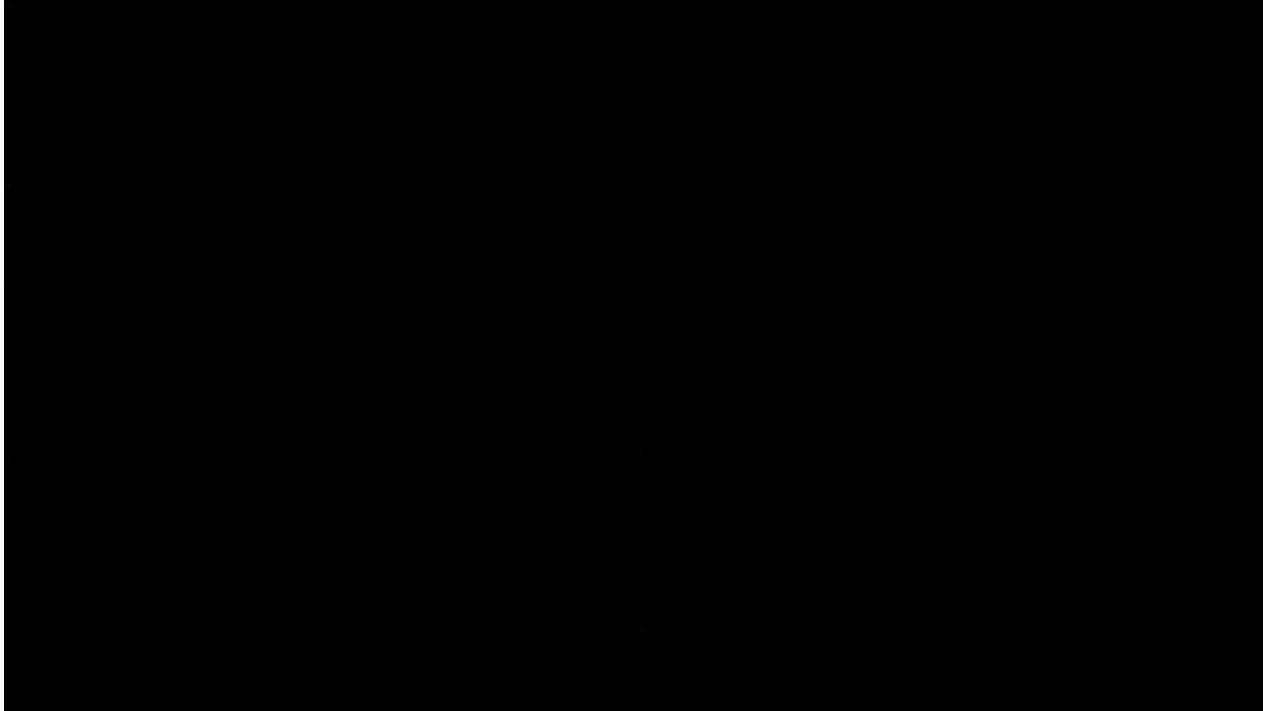


# Course Objectives

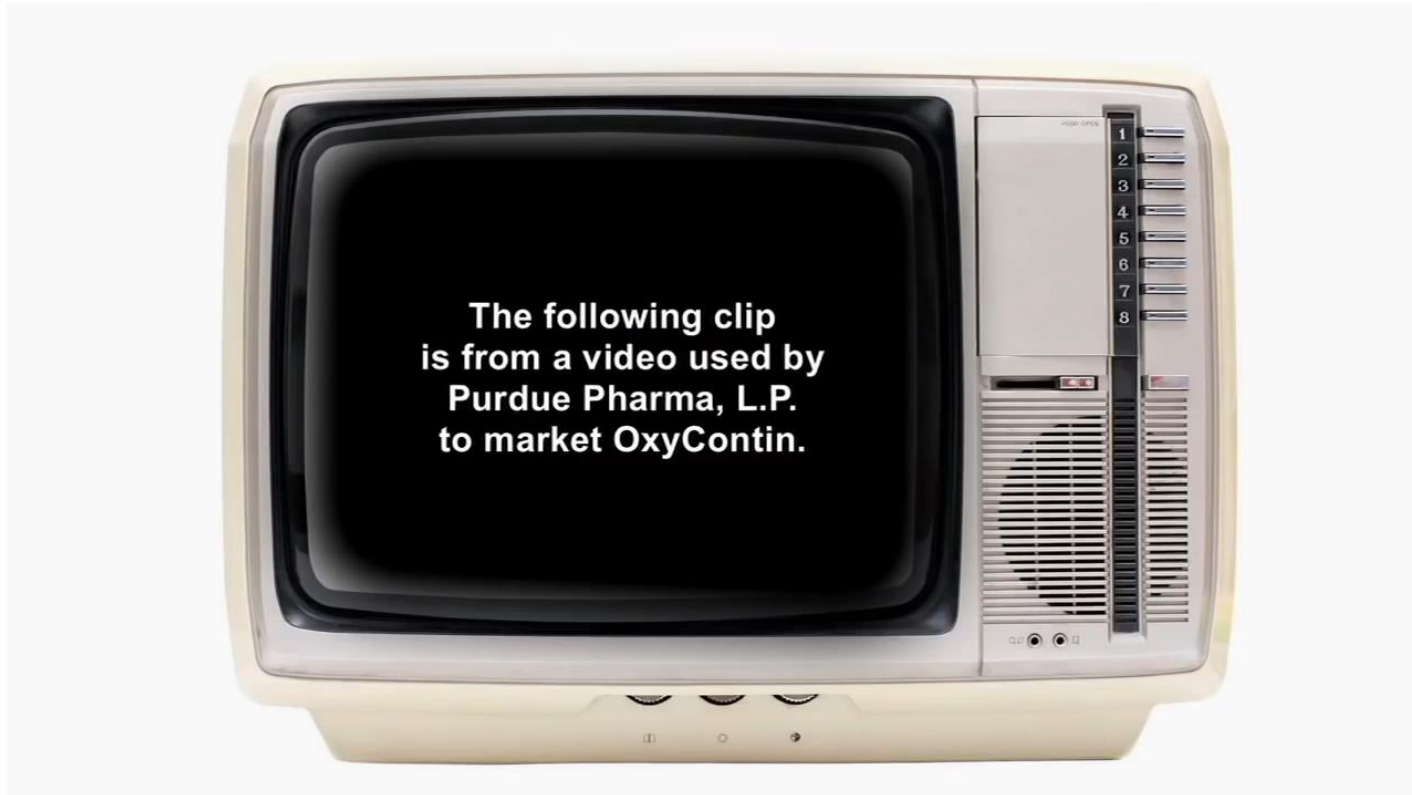
- LEARN COMMON TYPES OF FENTANYL AND ITS DERIVATIVES
- LEARN AND DISCUSS THE DANGERS OF FENTANYL
- RECITE RECOMMENDED PPE FOR SAFELY HANDLING FENATNYL
- HAVE A GOOD TIME!



# Modern Culture



# How it all Began





## **How would you like to be conducting a traffic stop and locate an unknown powder?**



# Opiate v/s Opioid

- Opiate: A drug with morphine like effects, derived from opium.
- Opioid: An opium like COMPOUND that binds to one or more of the opioid receptors of the body.



# Opiate

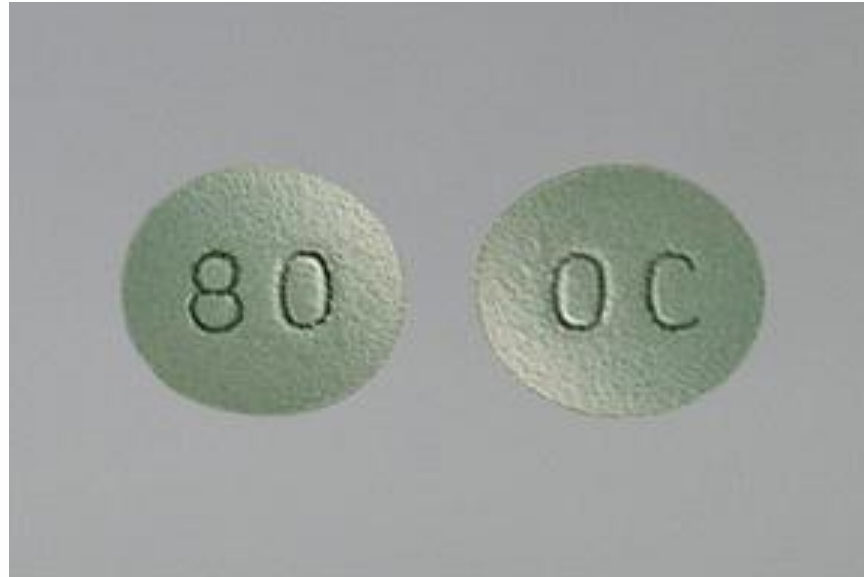
- Natural occurring
- Derivative of the poppy plant
- Heroin is an opiate
- Morphine is an opiate



# Opium



# Opioid



# Common Opioids

Lortab



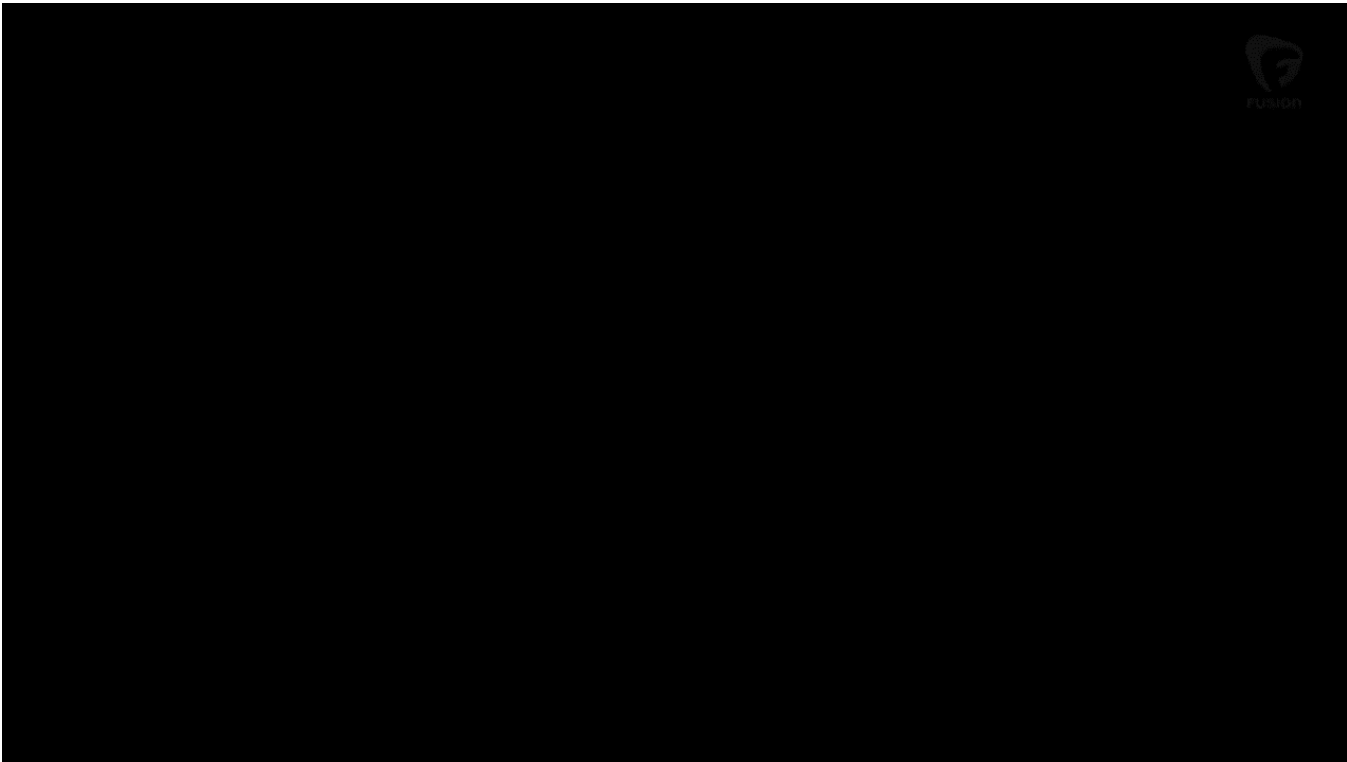
Roxicodone







# **“ Death By Fentanyl” Video**



# Fentanyl

- Opioid narcotic drug- man made v/s opiate
- High risk of addiction
- Respiratory distress
- High death rate when taken in higher dose
- Normal dose in micrograms
- Lipid loving narcotic
- Very small molecular size



# **Your Brain on Fentanyl.....**



# Common fentanyl types

- Patches
- Pills
- Injectable
- Powder
- Heroin laced
- Car-fentanyl

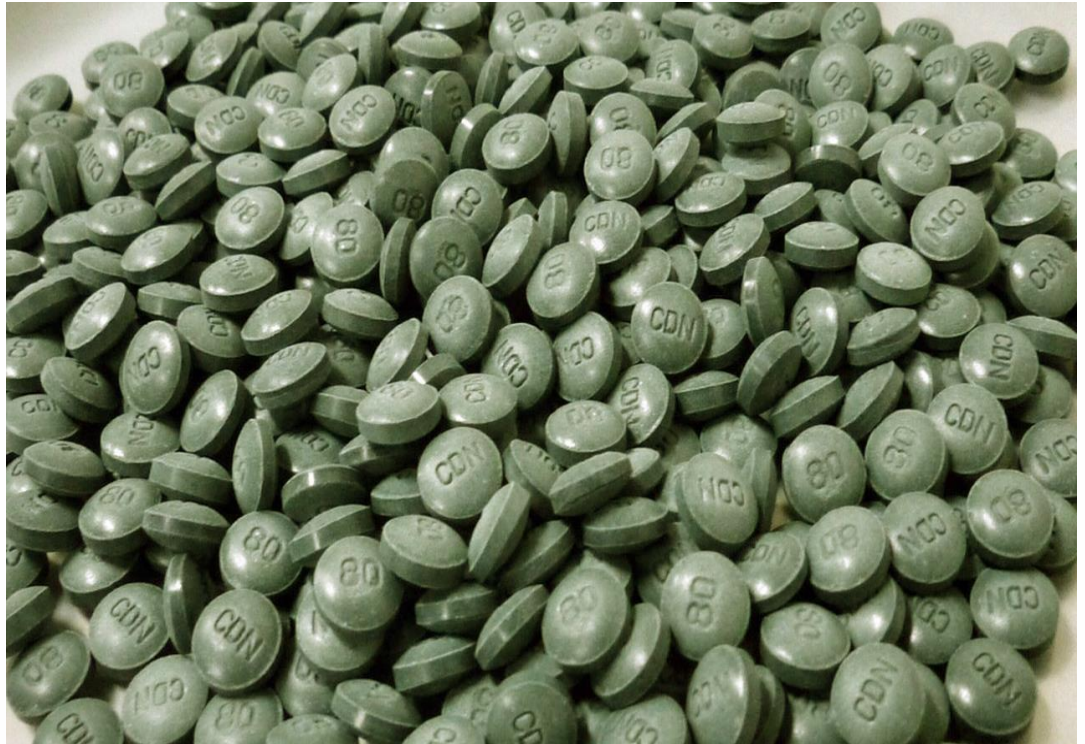
# Fentanyl patches

- Transdermal- absorbed through the skin
- Inconsistent dosage due to numerous body types
- Easily tampered with
- Numerous reactions with different medications
- Respiratory suppressant
- Depression
- Breathing difficulty



# Fentanyl pills

- Respiratory depression
- Convulsions
- Dizziness
- Irregular heartbeat
- Chest pain
- Blurred vision
- Confusion





# Intravenous fentanyl

- Potent Opioid
- Alters respiratory rate
- Immediate onset
- When injected resuscitative, intubation and oxygen must be available
- May cause rigidity of muscles



# Powder fentanyl

- Pure white powder
- Not FDA approved
- Illegally made and sold
- Man made



[www.silkroad-pharmacy.com](http://www.silkroad-pharmacy.com)





# Fentanyl test kit

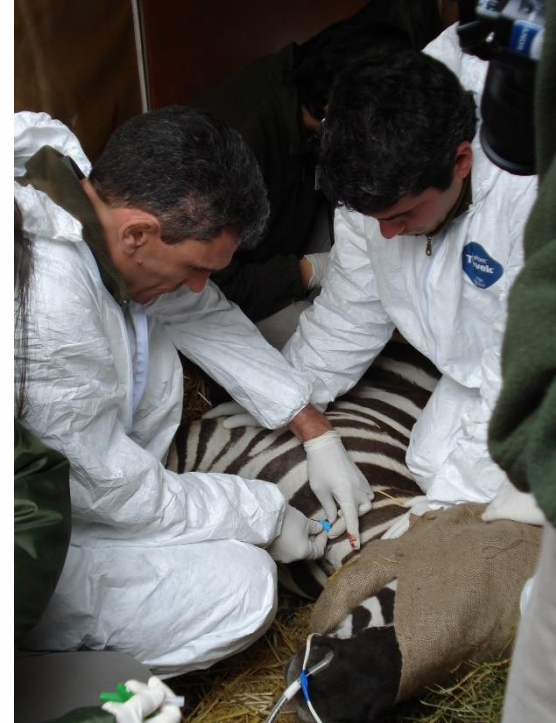
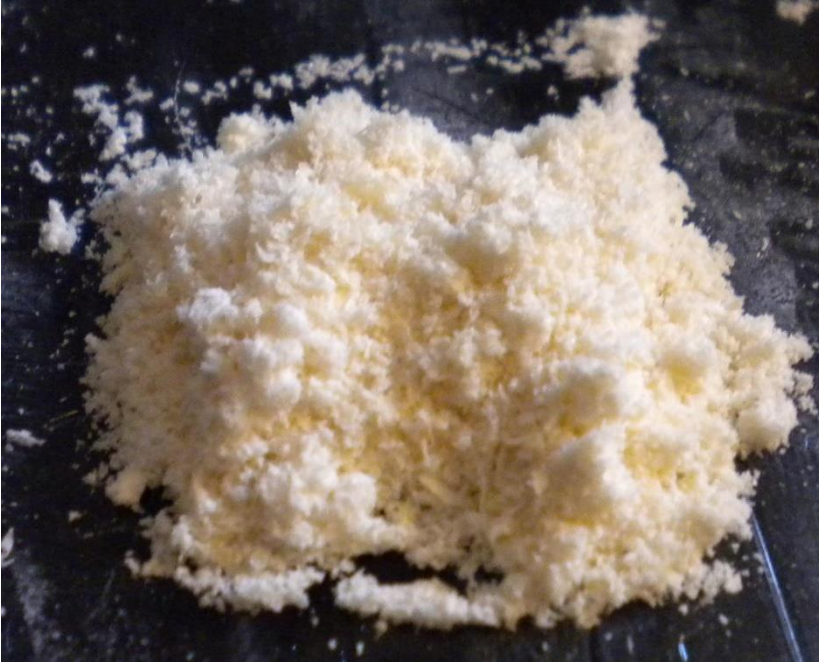




# **Powder fentanyl continued**

- Transdermal
- Inhalation hazard
- Numerous applications of (Naloxone) NARCAN

# Fentanyl



# Heroin laced with fentanyl powder

- The mix ratio is inconsistent
- Manufactured in clandestine lab
- Used as an inexpensive cutting agent
- Relatively easy to acquire
- Mixes easily
- Increases the potency of heroin
- Makes a “normal dose of heroin” DEADLY
- Predominately manufactured in MEXICO as an additive for Heroin

[www.bestclassifiedsusa.com](http://www.bestclassifiedsusa.com)





# Car-fentanyl

- 100 more times more potent than fentanyl
- Lethal dose the size of two grains of salt
- Used as an elephant tranquilizer
- Inexpensive to manufacture form analogs purchased on the internet
- Showing up on the east coast especially Baltimore
- Easily mixed with heroin
- Banned as a chemical weapon
- Used in the Moscow theatre massacre
- Easily airborne based on small molecular size
- Deadly
- Requires multiple doses of Naloxone

# Gray death



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# Gray Death



# Gray Death





# Gray Death

- Fentanyl derivative
- Deadly single dose
- Looks like a piece of gravel
- Transdermal
- Hard chunky material

# Gray Death

- Combination of several opioids
- Mixture of common analogs of opioids



# Gray Death





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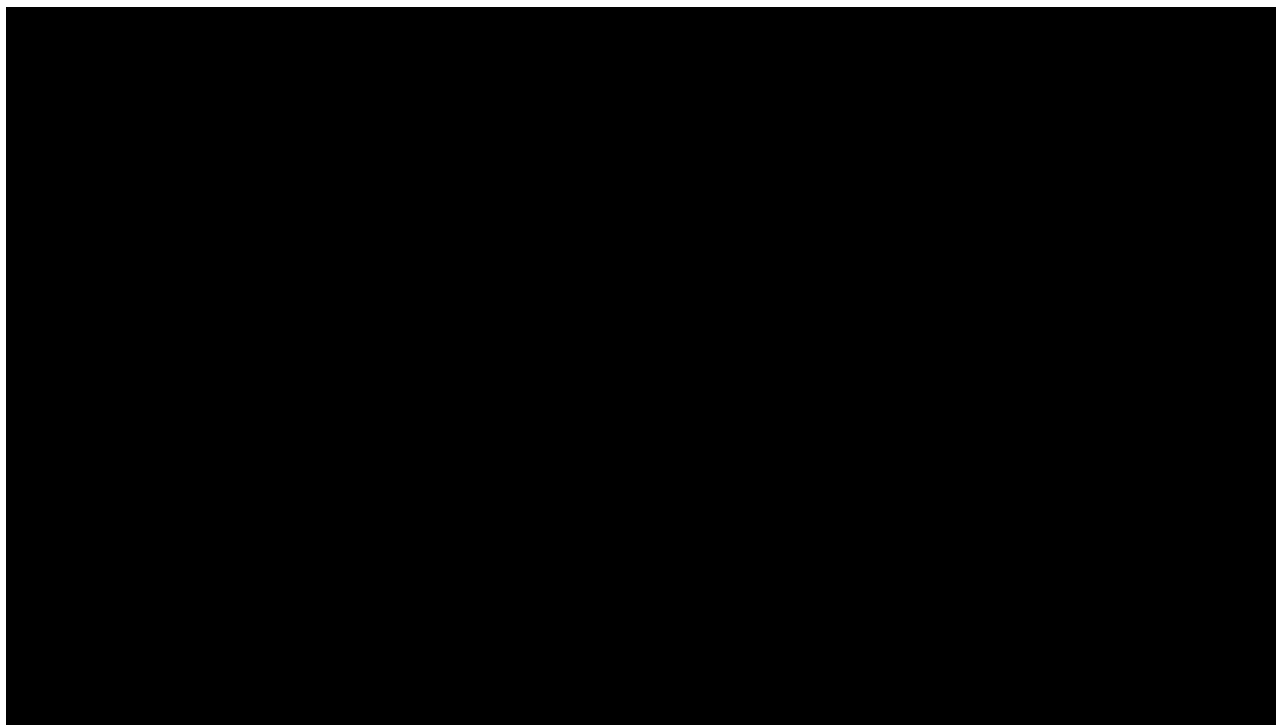
# Evidence Collection







# **Police exposure video D.E.A.**



# Police exposure to fentanyl safety tips

- Understand fentanyl can kill you
- Know that fentanyl is transdermal
- Wear proper protective gear ( treat as a drug lab)
- Do not field test suspected fentanyl
- Implement a naloxone program throughout the department



**Everyone has a  
story to tell**



# Opioid/Opiate Addiction



# **Opioid/ opiate addiction**

Symptoms of OPOID/OPIATE addiction are an uncontrollable craving and inability to control opioid/opiate use even though its having a profound impact on daily life



# **Common Signs of Addiction**

- Loss of employment
- Withdraw from family
- Theft, shoplifting, pawning items, theft from family members and lying
- Mood swings
- Nervousness



# Signs of addiction

- Loss of appetite
- Body sores
- Abnormal amount of sleep

# Opioid/Opiate Withdraw

- Sweating
- Craving
- Small pupils
- Nausea
- Chronic constipation





# **Withdraw Continued**

- Reduced sex drive
- Lethargy
- Shallow breathing
- Sensitivity to pain
- Slurred speech



# The Dark Web

- Not indexed by search engines
- You have to have specialized software to access
- Referred to as an onion because you have to peel the layers back
- Illegal trade
- Illegal forums
- Gambling .4 percent
- Guns 1.4 percent
- Chat 2.2 percent
- Abuse 2.2 percent
- Porn 2.75 percent
- Fraud 9 percent
- Bitcoin 9 percent



15 percent

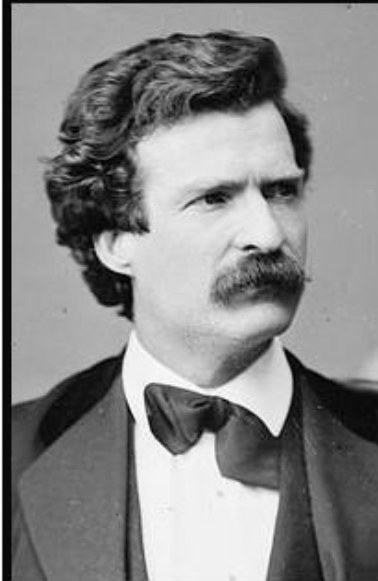


# Indiana Dangerous Drug Trends 2018

A True Thriller

**KILLER**





There are three kinds of lies — lies, damned lies and statistics.

(Mark Twain)

[izquotes.com](http://izquotes.com)



# Butane Honey Oil (BHO)





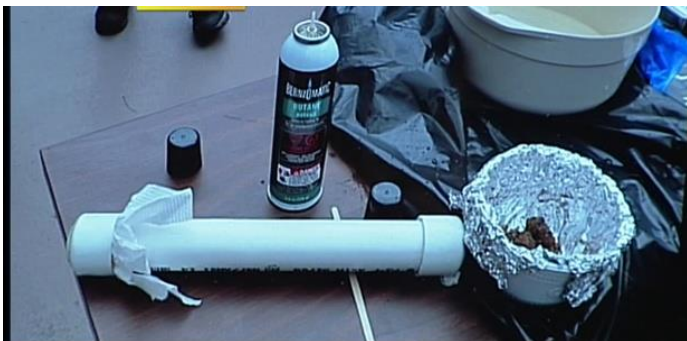


# Butane Honey Oil (BHO)

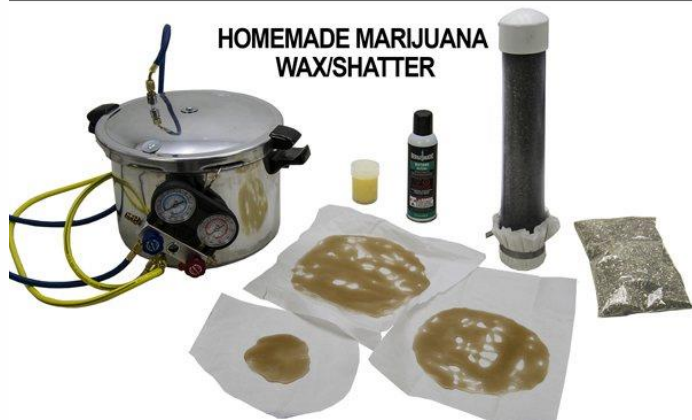




# Kits sold on Internet



## BHO LAB SIMULATED BUTANE HONEY OIL



© INERT PRODUCTS, LLC









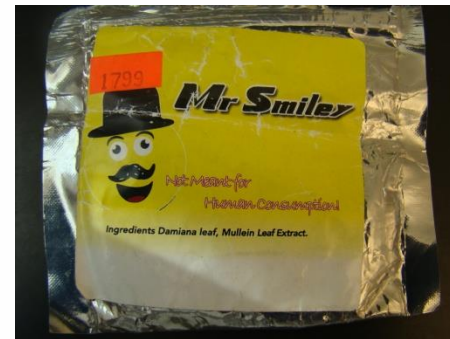
# MJ coming to the ISP lab

Marijuana

Year	Number Identified
2013	5585
2014	4896
2015	3883
2016	4506
2017	3886
20180 (8/07)	2295



# Synthetic Cannabinoids







## Synthetic Cannabinoids

Year	Number Identified
2013	1763
2014	3945
2015	1403
2016	1260
2017	1174
2018 (08/07)	633





## Common Terms for Cocaine



Angie	Coconut	Line
Barbs	Cola	Love affair
Base	Corrinne	Mama coca
Bazulco	Crack	Merk
Bernice	Dama blanca	Mosquitos
Bernie	Double bubble	Mujer
Bernie's flakes	Dream	Nose candy
Bernie's gold dust	Duct	Paradise
Big bloke	Florida snow	Paradise white
Big C	Foo-foo dust	Pearl
Big flake	Friskie powder	Perico
Big rush	Get your own	Peruvian
Billie hoke	Gift-of-the-sun	Peruvian flake
Bolivian marching powder	Gin	Peruvian lady
Bouncing powder	Girlfriend	Pimp
Bunk - fa	Glad stuff	Polvo blanco
Burese	Gold dust	Pop - to inha
Burnese	Green gold	Powder diamonds
C	Happy dust	Scorpion
Cabello	Happy powder	Scottie
California cornflakes	Happy trails	Serpico 21
Candy C	Have a dust	She
Carnie	Haven dust	Snort
Carrie	Henry VIII	Snow bird
Carrie Nation	Her	Snow white
Cat's pee	Hunter	Snowcones
C-dust	Icing	Society high
Cecil	Inca message	Soda
C-game	Incentive	Star-spangled powder
Charlie	Jam	Tardust
Chippy	Jelly	Wacky dust
Cholly	Joy powder	Weasel dust
Coca	King's habit	White mosquito
	Lady caine	Yeyo
	Lady snow	

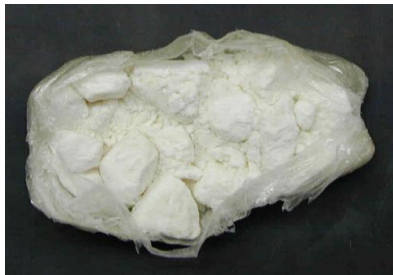




# Cocaine



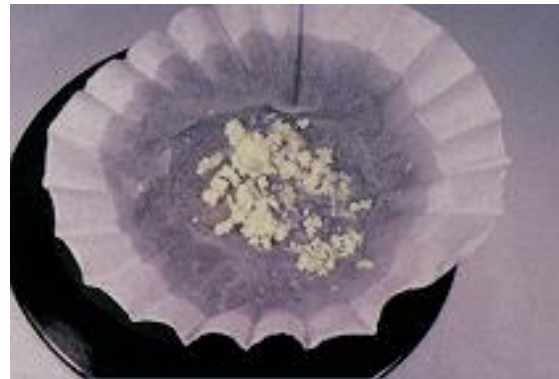
- Two forms : Cocaine HCl or Cocaine base
- Schedule II CNS Stimulant
- Snorted or Smoked





# Cocaine base (Crack)

- Combine Cocaine HCl, baking soda and water
- Apply heat





## Cocaine

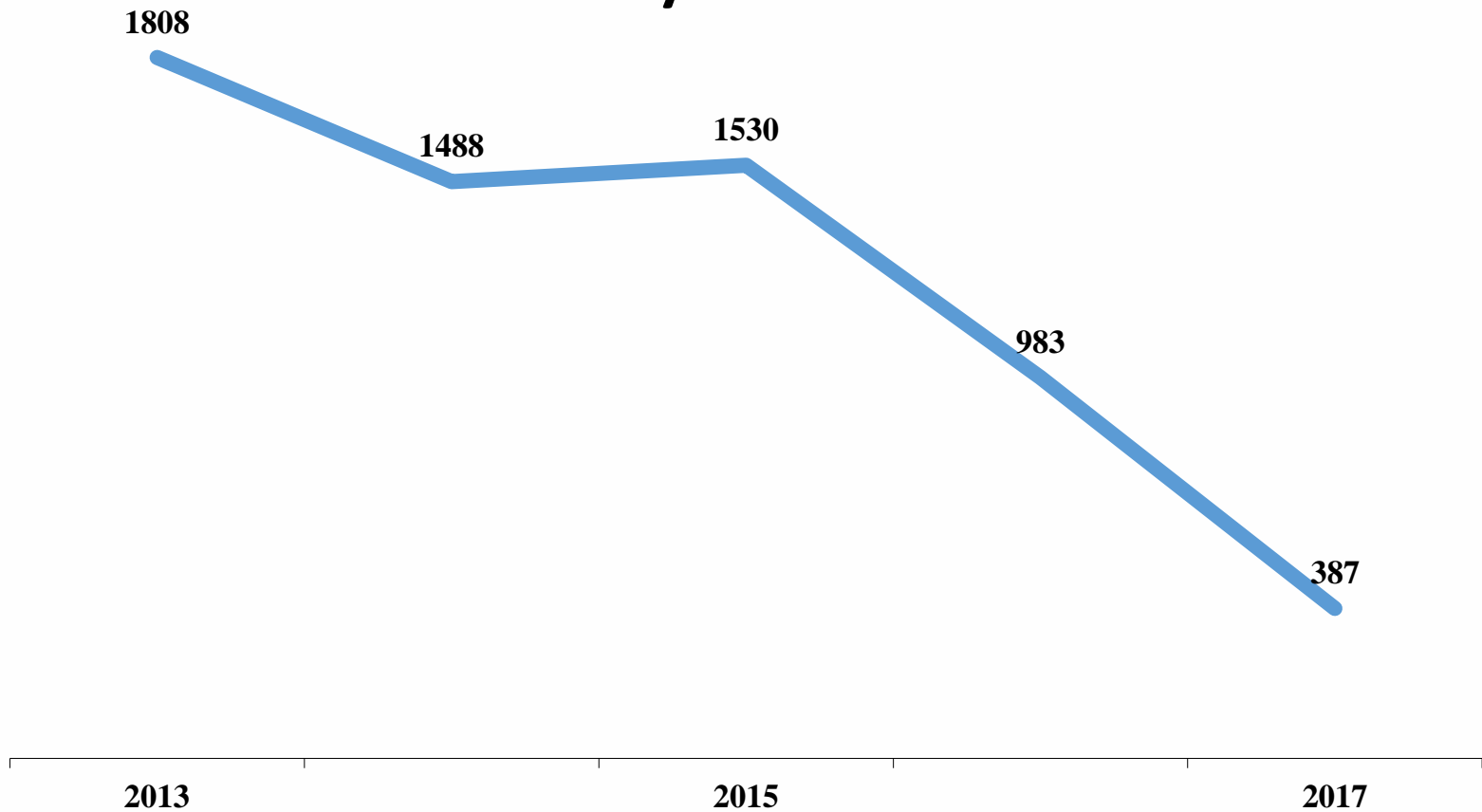
Year	Number Identified
2013	1812
2014	1869
2015	1692
2016	1713
2017	1980
2018 (8/07)	866







# Indiana Clandestine Laboratory Seizure Totals





# Crystal Methamphetamine





# ICE Conversion Lab







# ICE Conversion Lab





# ICE Conversion Lab







# ICE Conversion Lab





# ICE Conversion Lab





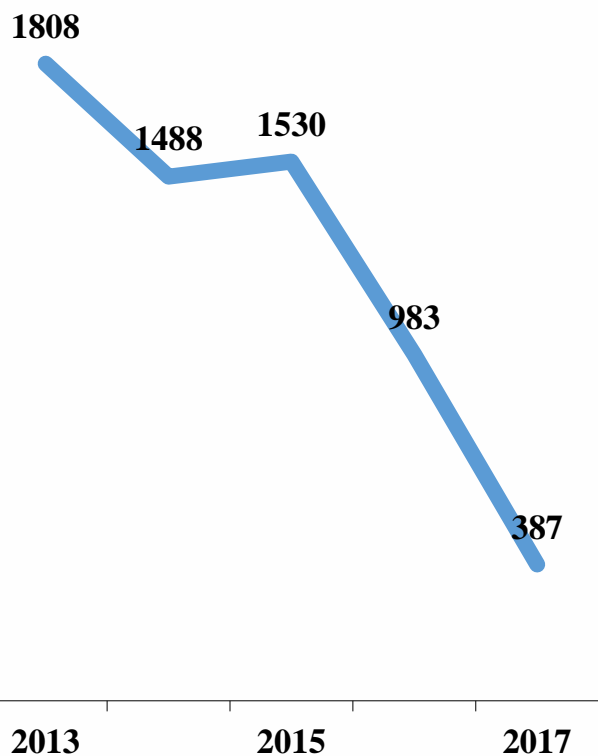


# ICE Conversion Lab





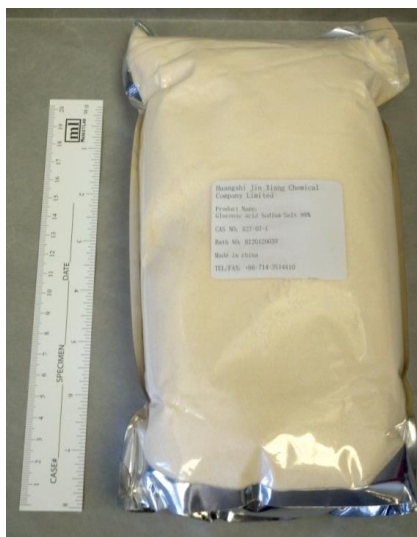
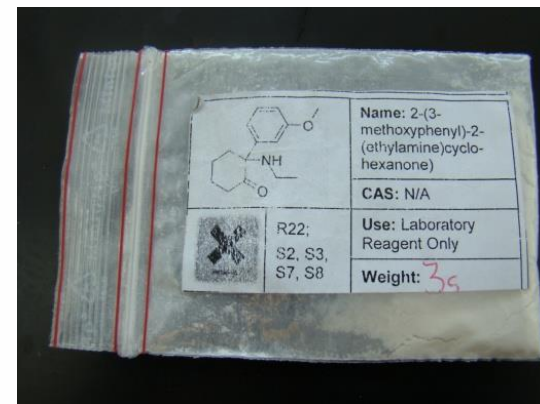
# METHAMPHETAMINE



Year	Number Identified
2013	3011
2014	3240
2015	3678
2016	4222
2017	6026
2018 (8/07)	4888



# Cathinones (Bath Salts)





## Bath Salts

Year	Number Identified
2013	88
2014	100
2015	174
2016	66
2017	225
2018 (8/07)	





# Other Drugs of Interest

DMT



Khat



PCP



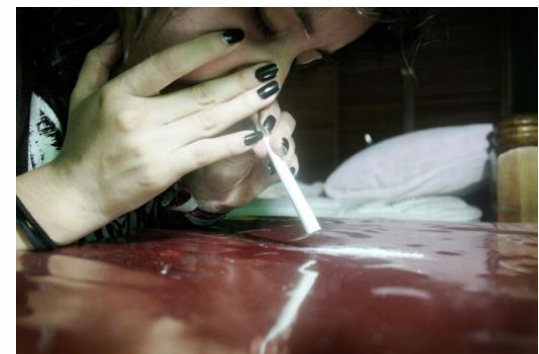


# Prescription Tablets

- Pharmaceutically prepared tablets
- Counterfeit tablets



- Ground up into powder for injection or snorting







# Designer Drugs

- MDMA (Ecstasy), BZP, TFMPP
- 25I-NBOMe, 25B-NBOMe (n-Bombs), LSD
- MDA, MDE, DOC, DOB, 2-CB, MDEA, 2C-E, etc.





# Designer Drugs







# Counterfeit Xanax (Alprazolam)



**Alprazolam  
Clonazepam  
Diphenhydramine**



**Alprazolam  
Diphenhydramine**



**Acetaminophen  
Diphenhydramine**



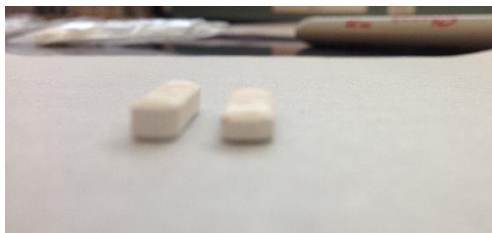
# Counterfeit Xanax (Alprazolam)



Etizolam



Phenazepam

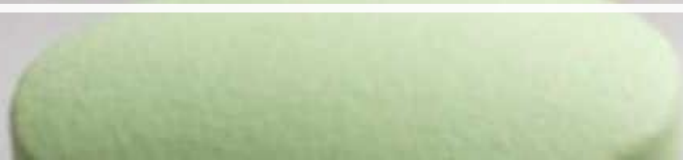


Alprazolam





**Opioids**





# Opioids

- Opioids and opiates both bind to opioid receptors in the brain
  - Opiate is the term for naturally occurring chemicals
  - Opioid is the term for synthetics or the 'generic' term of anything similarly psychoactive



# Opioids

- Buprenorphine (Suboxone)
- Oxycodone (OxyContin)
- Oxymorphone (Opana)







# Heroin





# Heroin

- Tan or gray powder, black tar
- Usually packaged in balloons, foil or capsules





# Heroin







## Heroin

Year	Number Identified
2013	1776
2014	2238
2015	2938
2016	2771
2017	3007
2018 (8/07)	1264





A cheap, synthetically produced opioid known as fentanyl has spawned a deadly drug crisis in the United States. Fentanyl, a powerful synthetic painkiller about 50 times more potent than heroin and 100 times stronger than morphine, is a Schedule II drug.





# A Synthesized Sensation

## Fentanyl Nicknames

Apache  
China Girl  
China Town  
China White  
Dance Fever  
Friend  
Goodfellas



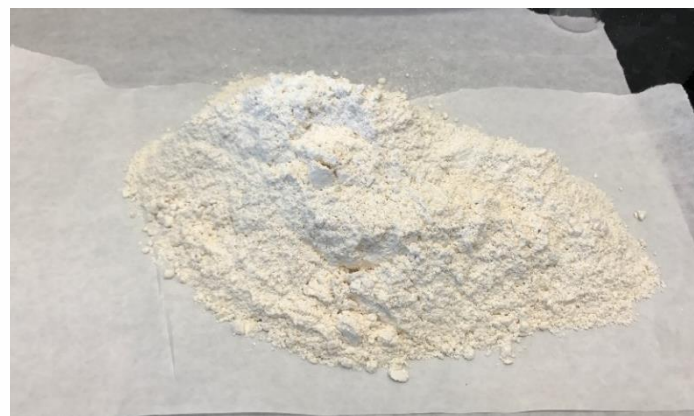
Great Bear  
He-Man  
Jackpot  
King Ivory  
Murder 8  
TNT  
Tango & Cash

(Source: Imperial College London Chemistry Wiki)



# Fentanyl

- White to off-white powder and sometimes found in tablets
- Often sold as Heroin
- Abused for its intense euphoric effects
- Commonly cut with Lactose or other drugs are mixed in









# Fentanyl Kilos





## Fentanyl

Year	Number Identified
2013	15
2014	75
2015	183
2016	304
2017	744
2018 (08/07)	623





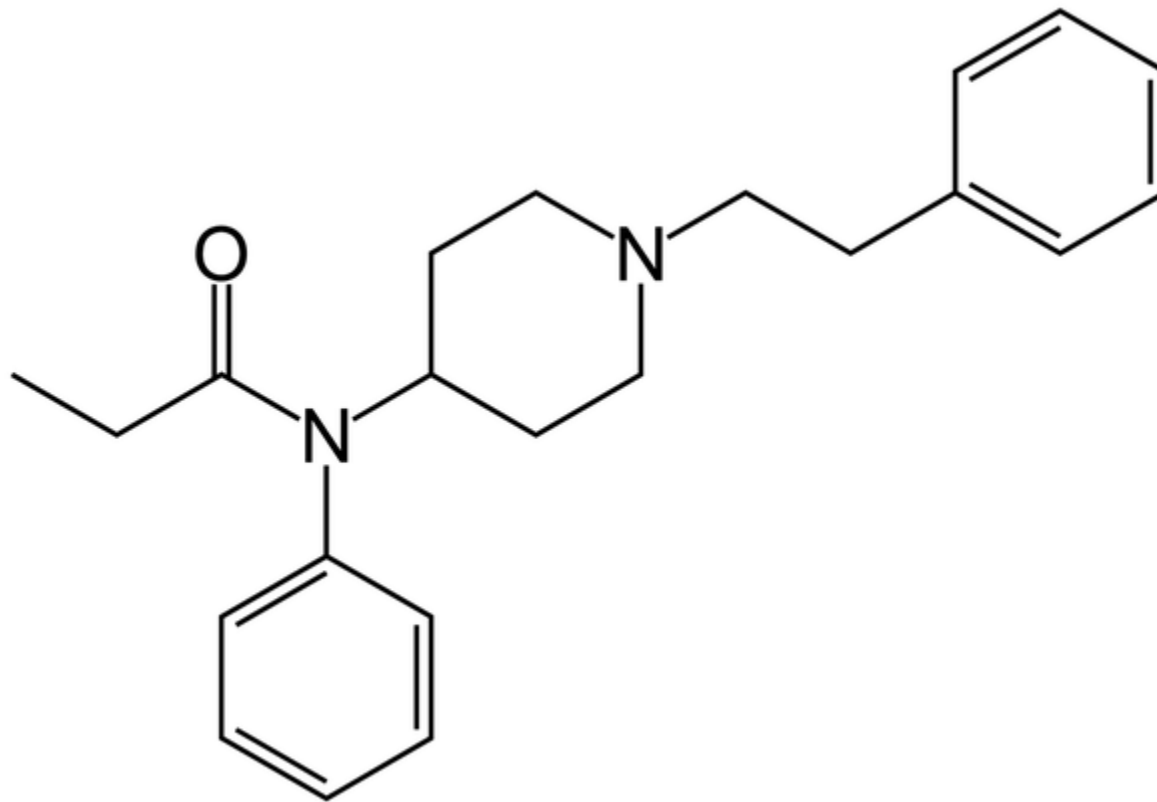


# Fentanyl

- Fentanyl analogues are counted separately from fentanyl
  - It appears theoretically possible to synthesize over 1200 fentanyl analogues with approximately 400 having been made
  - Less than 50 of these have been seen as street drugs nationwide



# Fentanyl





# Unknown Powder

Analogue	Number Identified
Acetyl fentanyl	3
Acrylfentanyl	157
Carfentanil	28
Cyclopropyl fentanyl	3
FIBF (Fluoroisobutyryl Fentanyl)	3
Furanyl fentanyl	63



# Drug Poisoning





## **Fatal Overdoses**

The most extreme outcome from an overdose is death, primarily as a result of the severe respiratory depression that can be triggered by ingesting high levels of opioids [16]. The number of drug overdose deaths across the country has gone up over the past decade to the point that overdoses are now responsible for more deaths annually than automobile

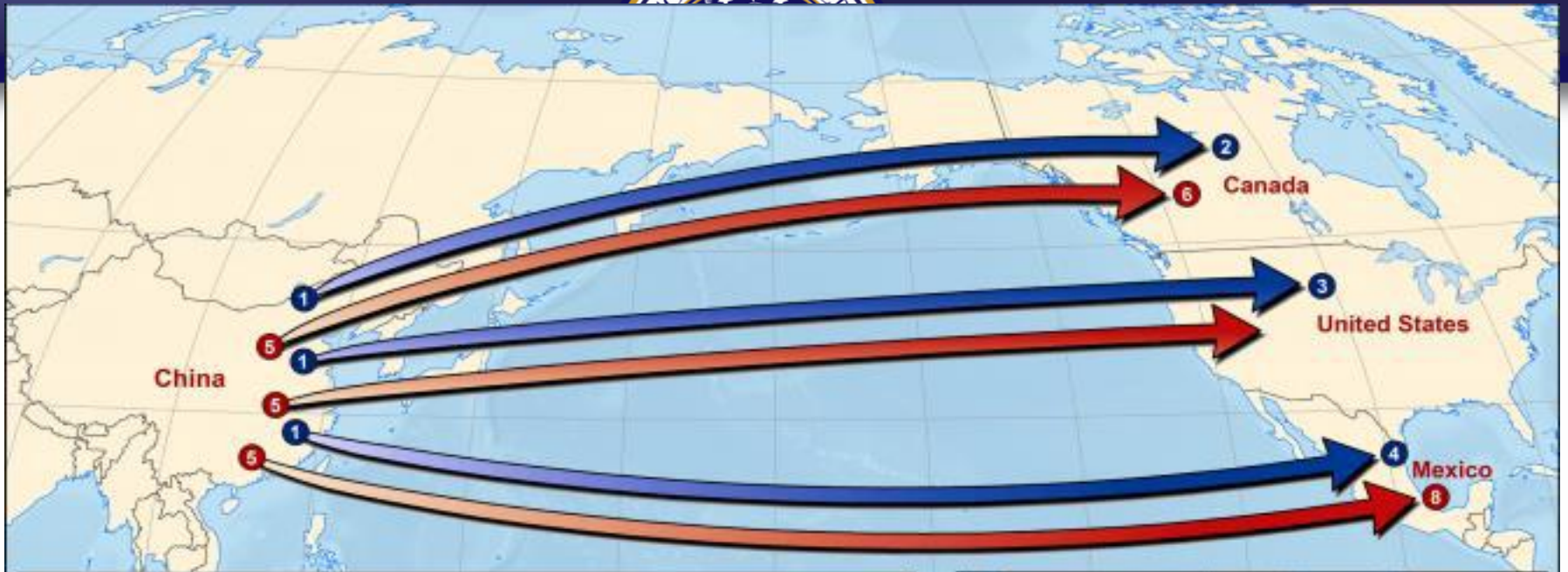




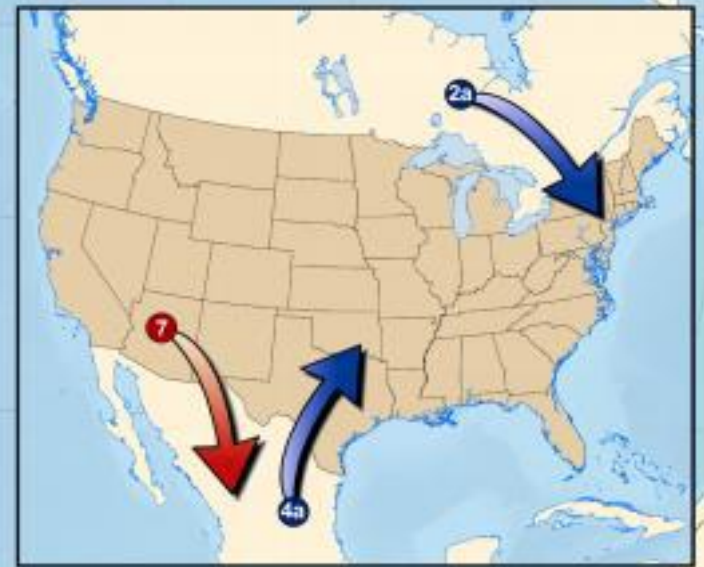
# **Fentanyl: China's Deadly Export to the United States**

- **China is a global source of fentanyl and other illicit substances because the country's vast chemical and pharmaceutical industries are weakly regulated and poorly monitored. Chinese law enforcement officials have struggled to adequately regulate the thousands of chemical and pharmaceutical facilities operating legally and illegally in the country, leading to increased production and export of illicit chemicals and drugs. Chinese chemical exporters utilize various methods to covertly ship drugs to the Western hemisphere, including sending illicit materials through a chain of forwarding systems, mislabeling narcotic shipments, and modifying chemicals so they are not controlled in the United States.**





- 1 Fentanyl in powder form and pill presses are shipped via mail services.
- 2 The powder fentanyl is processed and mixed with heroin, or sold as heroin, or pressed into pills and sold in the Canadian drug market.
  - 2a Some fentanyl products are smuggled from Canada into the United States for sale, on a smaller scale.
- 3 The powder fentanyl is processed and mixed with heroin, or sold as heroin, or pressed into pills and sold in the United States drug market.
- 4 The powder fentanyl is cut and diluted for further smuggling, or pressed into counterfeit prescription pills.
  - 4a Diluted powder fentanyl and counterfeit prescription pills containing fentanyl are smuggled from Mexico into the United States.
- 5 Precursors for manufacturing fentanyl are shipped via mail services.
- 6 Precursors are used to manufacture fentanyl in clandestine laboratories.
- 7 Precursors are likely smuggled across the Southwest border into Mexico to manufacture fentanyl.
- 8 Precursors are likely used to manufacture fentanyl in clandestine laboratories.





# Importation Factors

- New York - LaGuardia



170,00 Packages a day from China.



According to U.S. law enforcement and drug investigators, **China is the main supplier of fentanyl to the United States, Mexico, and Canada.**<sup>39</sup> Because illicit fentanyl is not widely used in China, authorities place little emphasis on controlling its production and export.<sup>40</sup> Chinese chemical manufacturers export a range of fentanyl products to the United States, including **raw fentanyl, fentanyl precursors, fentanyl analogues,\* fentanyl-laced counterfeit prescription drugs like oxycodone, and pill presses and other machinery necessary for fentanyl production.**<sup>41</sup>

Fentanyl analogues have chemical structures differing only slightly from the pharmaceutical-grade version of the drug. Karen Howlett et al., "How Canada Got Addicted to Fentanyl," *Globe and Mail*, August 24, 2016. <http://www.theglobeandmail.com/news/investigations/a-killer-high-how-canada-got-addicted-tofentanyl/article29570025/>.

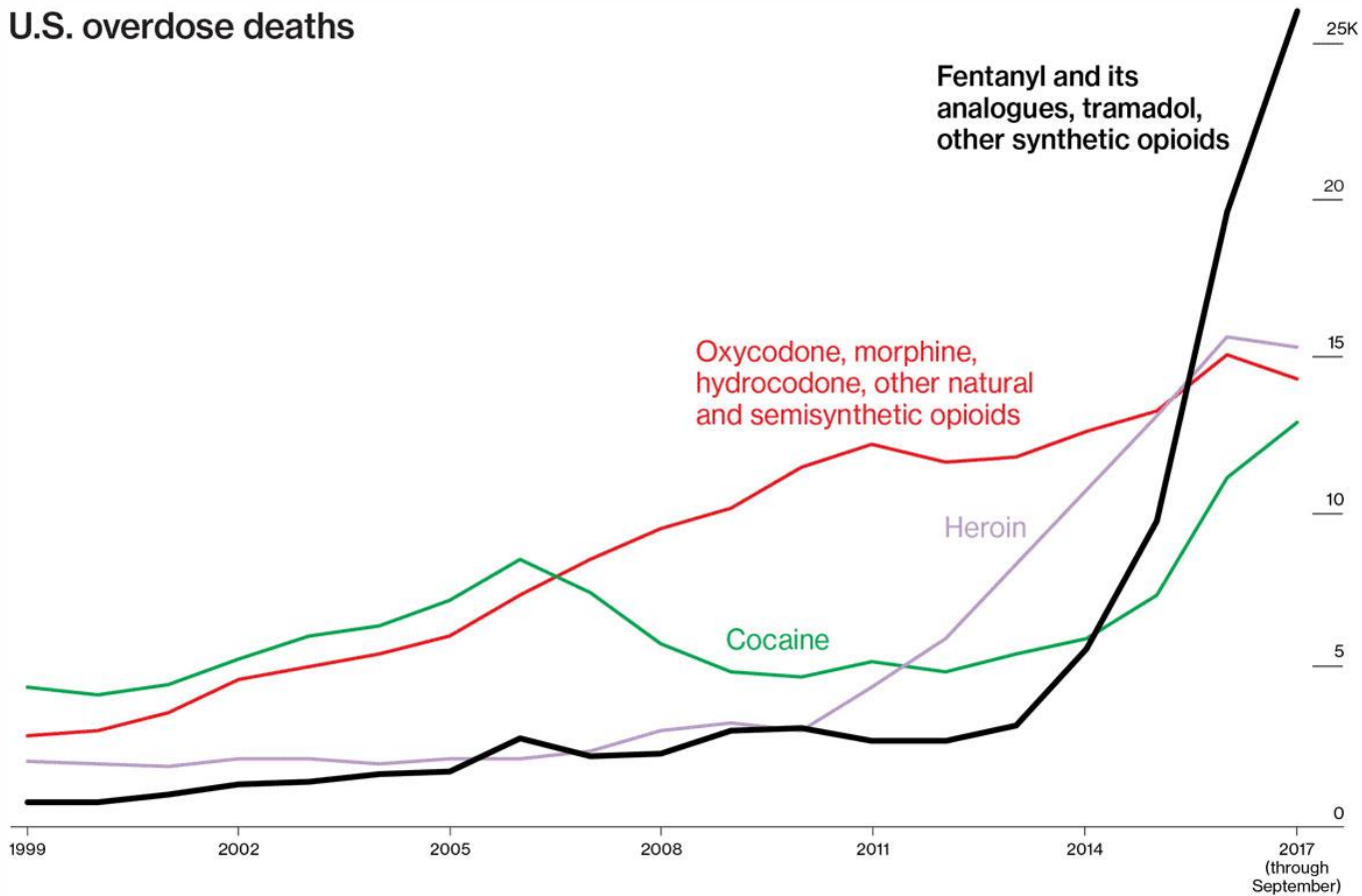






# From Thrill to Kill

U.S. overdose deaths



Source: Centers for Disease Control and Prevention

**Bloomberg**





























# ISP Dangerous Drug Environment Response Protocol

## **Request for services from outside agency**

- Post command completes “Request for Dangerous Drug Environment Response”
- Post command contacts District Meth Suppression Coordinator and provides them with the information known
- If no District Coordinator exists, Post Command contacts Sgt. Katrina Smith, Sgt. Mike Toles, or F/Sgt. Don McCay and provides them with the information known
- Certified Lab Team member contacts requester and a response determination is made using the following matrix:





Factor	Score
Pill Press Present	5
Open bulk known opioids present	5
On scene first responder overdose	5
Chemicals associated with drug manufacture	5
Suspect(s) indicates the scene contains bulk opioids or pressing equipment	5
Overdose victim located inside scene	4
Open bulk unknown powders present	4
Evidence of repackaging present	4
Evidence of airborne suspension of opioid or other powders	4
Known opioid powder residue scattered about the scene	3
Evidence of receipt of international packages	3
Evidence of drug paraphernalia present	3
Evidence of the presence of children or endangered adults	3
Small quantity of open unknown powder	2
Small quantity known open opioid	2
No protective equipment available to officers on scene	2
Intelligence indicates scene is point of production or packaging	2
Narcan-type products belonging to persons at the scene located	1
Small quantity of packaged unknown powder	0







- If a total score of five points on the matrix is achieved, a scene response shall be initiated. The lab responder making the callout decision may conclude, based on the totality of the information or other factors known but not accounted for in the matrix, that a scene response is warranted. In any incident that is determined to be a "close call," it is preferable to send a team to the scene for onsite assessment. Officer safety shall be the primary point of consideration in all decisions.
- **Request for services from ISP or other state agency**
- In instances where ISP is the lead agency, the matrix shall be followed with the presumption of a scene response as the starting point.
- **Scene Response**
- Four hazmat operators shall be present, two of which may be fire to serve as rescue
- ISP responders shall use totality of information known in determining whether to have EMS and fire on scene prior to entry
- Operators shall insure ISP Operations has been contacted prior to entry
- **Full Level B or C SHALL BE UTILIZED** for assessment at the discretion of the site safety officer and based on the totality of information known
- Scene entry is to be avoided while suspects are known to be present except in the case of rescue
- A HARP form shall be completed as assessment commences
- A minimum of three doses of Narcan per entry person shall be on scene
- Each person making entry shall carry on their person one dose of Narcan
- If assessment indicates manufacture, synthesis, pressing, or bulk gross contamination, assessment shall cease immediately and High Hazard protocols take effect
- If evidence is to be collected, all items must be doubled packaged, with the exterior layer being plastic
- Where possible, small quantities of known and unknown powders shall be placed in glass vials, then into plastic bottles, then into a plastic bag
- If assessment indicates scene is a likely point of drug production or packaging, an Occurrence Report shall be completed
- If assessment indicates the scene is a likely point of drug production or packaging, a warning placard shall be placed conspicuously on the property and photo of it taken
- Operators shall complete decontamination of PPE in accordance with OSHA and DEA recommended guidelines. Operators SHALL NOT use alcohol-based sanitizers if scene is determined to have opioids present or any unknown powder
- All evidence shall be released to the originating agency if not ISP investigation



## Post-scene requirements

- ISP responders shall attempt contact with the local health department while on scene in cases where substantial suspected hazards are believed to still exist
- ISP responders shall insure the local health department is contacted and briefed on the situation within 24 hours of clearing the scene in instances where a health department representative did not come to the scene
- The HARP and Incident Report shall be forwarded by email to [clanlabcases@isp.in.gov](mailto:clanlabcases@isp.in.gov) within 24 hours of clearing the scene
- Overtime for such assessments shall be charged to the Opioid Grant (HE) when such funding is available unless the scene is determined to methamphetamine-related





- Categories**
- E1 (Eric-1) >
  - E1 (Eric-1) 100g
  - E1 (Eric-1) 200g
  - E1 (Eric-1) 500g
  - E1 (Eric-1) 1kg
  - E1 (Eric-1) 2kg
  - E1 (Eric-1) 5kg
  - E1 (Eric-1) 10kg
  - E2 (Eric-2) >
  - E2 (Eric-2) 100g
  - E2 (Eric-2) 200g
  - E2 (Eric-2) 500g
  - E2 (Eric-2) 1kg
  - E2 (Eric-2) 2kg
  - E2 (Eric-2) 5kg
  - E2 (Eric-2) 10kg
  - E3 (Eric-3) >
  - E3 (Eric-3) 100g
  - E3 (Eric-3) 200g
  - E3 (Eric-3) 500g
  - E3 (Eric-3) 1kg
  - E3 (Eric-3) 2kg
  - E3 (Eric-3) 5kg
  - E3 (Eric-3) 10kg
  - E4 (Eric-4) >
  - E4 (Eric-4) 100g
  - E4 (Eric-4) 200g
  - E4 (Eric-4) 500g
  - E4 (Eric-4) 1kg
  - E4 (Eric-4) 2kg
  - E4 (Eric-4) 5kg
  - E4 (Eric-4) 10kg
  - E5 (Eric-5) >
  - E5 (Eric-5) 100g
  - E5 (Eric-5) 200g
  - E5 (Eric-5) 500g
  - E5 (Eric-5) 1kg
  - E5 (Eric-5) 2kg
  - E5 (Eric-5) 5kg

PRODUCT SEARCH     ORDER SEARCH



- NEWS**
- legal replacement for JWH-018
  - Afghan incense is launched !!!
  - 16 times stronger than 2-CB
  - Alpha-Methyltryptamine, AMT
  - K1 - legal replacement for...
  - A3 - legal replacement for...
  - Stock in Moscow now.
  - New product : RTI-55...
  - legal replacement for JWH-018

**RECOMMENDED**

E2 (Eric-2) 100g <a href="#">ADD TO CART</a>	E1 (or Eric-1) 200g <a href="#">ADD TO CART</a>	E1 (or Eric-1) 100g <a href="#">ADD TO CART</a>	E3 (or Eric-3) 100g <a href="#">ADD TO CART</a>	E7 (Eric-7) 100g <a href="#">ADD TO CART</a>

**NEW PRODUCTS**

E7 (Eric-7) 100g <a href="#">ADD TO CART</a>	E6 (Eric-6) 100g <a href="#">ADD TO CART</a>	E5 (Eric-5) 100g <a href="#">ADD TO CART</a>	E4 (Eric-4) 100g <a href="#">ADD TO CART</a>	E2 (Eric-2) 100g <a href="#">ADD TO CART</a>
E1 (or Eric-1) 200g <a href="#">ADD TO CART</a>	E1 (or Eric-1) 100g <a href="#">ADD TO CART</a>	E3 (or Eric-3) 100g <a href="#">ADD TO CART</a>		



## PPE DEFINED:

<b>PPE:</b>	Personal Protective Equipment
<b>Personal PPE:</b>	Nitrile gloves, safety glasses, N-95 dust mask, disposable paper suit or coveralls, shoe covers
<b>Level C PPE:</b>	Chemical resistant suit, air purifying respirator, gloves, booties
<b>Level B PPE:</b>	Chemical resistant suit, self-contained breathing apparatus, gloves, and boots.
<b>Level A PPE:</b>	Level "A" suit and a self-contained breathing apparatus





# Level A



D13 - 1

D16 - 0

D14 - 0

D53 - 1

D33 - 0

D34 - 0

D35 - 0(\*2)

D24 - 3

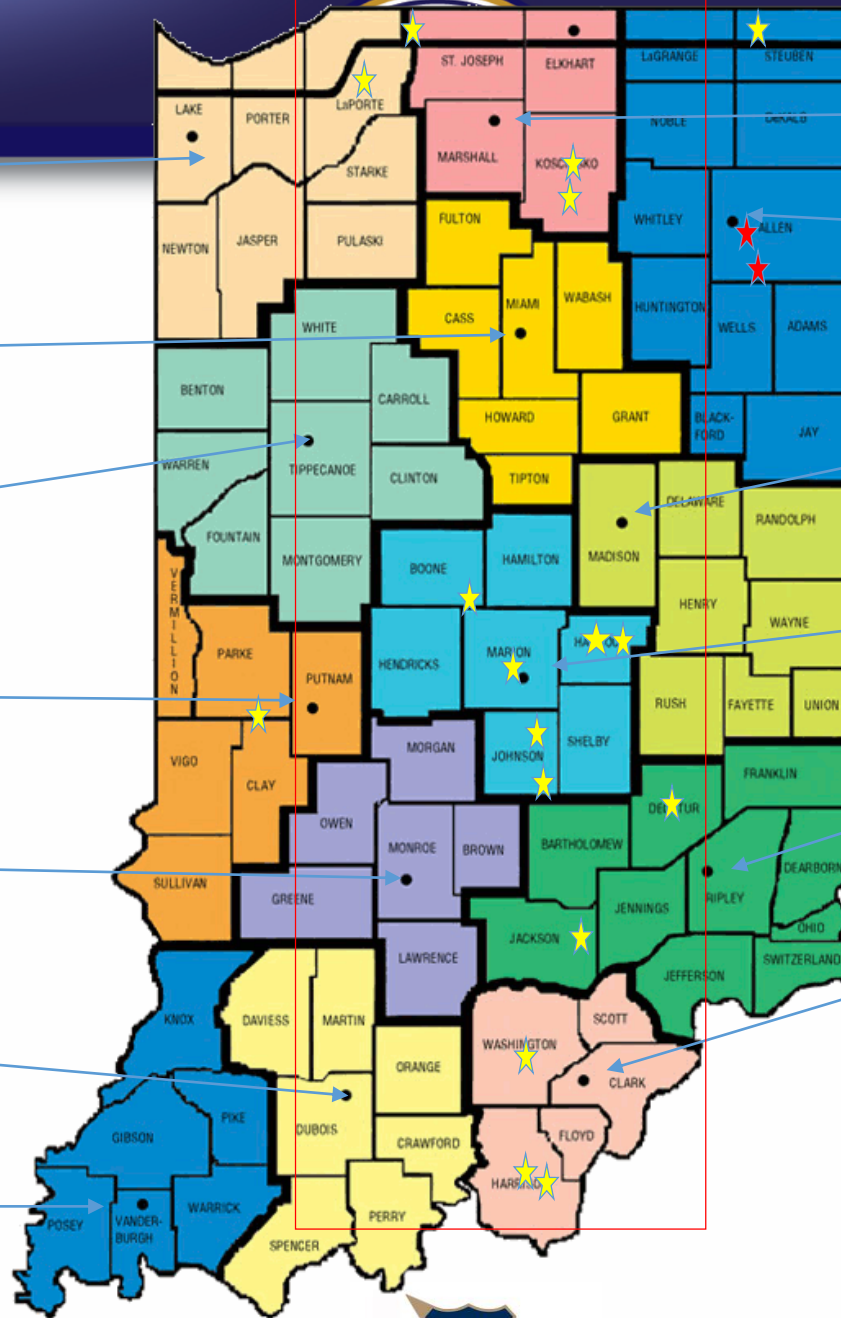
D22 - 3

D51 - 0

D-52 - 6

D42 - 2

D45 - 3





CONTROLLED SUBSTANCES	2013 25563 items analyzed	2014 23413 items analyzed	2015 23980 items analyzed	2016 25776 items analyzed	2017 22534 items analyzed	2018 13801 items analyzed as of 8/7/18
Marijuana	5585	4896	3883	4506	3886	2295
Cocaine	1812	1869	1692	1713	1980	866
Methamphetamine	3011	3240	3678	4222	6026	4888
Heroin	1776	2238	2938	2771	3007	1264
Narcotic Tablets: Oxycodone, Vicodin, etc.	2347	1851	1418	1382	782	497
Tranquilizer Tablets: Xanax, Valium, etc.	1277	989	907	1175	967	630
Fentanyl	15	75	183	304	744	623
Synthetic Cannabinoids	1763	3945	1403	1260	1174	633







## Individual PPE Kits

First responders who may encounter fentanyl or fentanyl-related substances should maintain an individual (personal) PPE kit, which includes:

Nitrile gloves

N-95 dust masks (N-100 Issued for ISP)

Sturdy eye protection

Paper coveralls - shoe covers

Naloxone Injector(s)





# So, what does it mean?

- Prescription diversion deserves attention
- Meth is still here
- Heroin and its cousins are too
- We have job security for the future





# Acknowledgements

The following have contributed to this presentation:

- Sergeant Mike Toles, ISP Meth Suppression Coordinator
- F/S Hailey Newton- Indianapolis Regional Laboratory



# Thank you



**Indiana State Police**  
**First Sergeant Don McCay**

**Drug Enforcement Section**  
**North Operations Commander**

**8500 East 21<sup>st</sup> Street**  
**Indianapolis, IN 46219**

**Main Office: (317) 247-1859**  
**Meth Suppression: (317) 234-4592**  
**Cell: (574) 274-2214**  
**Email: [dmccay@isp.in.gov](mailto:dmccay@isp.in.gov)**





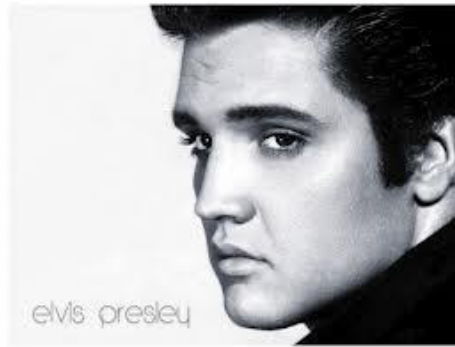


# **Investigating Overdose Death**

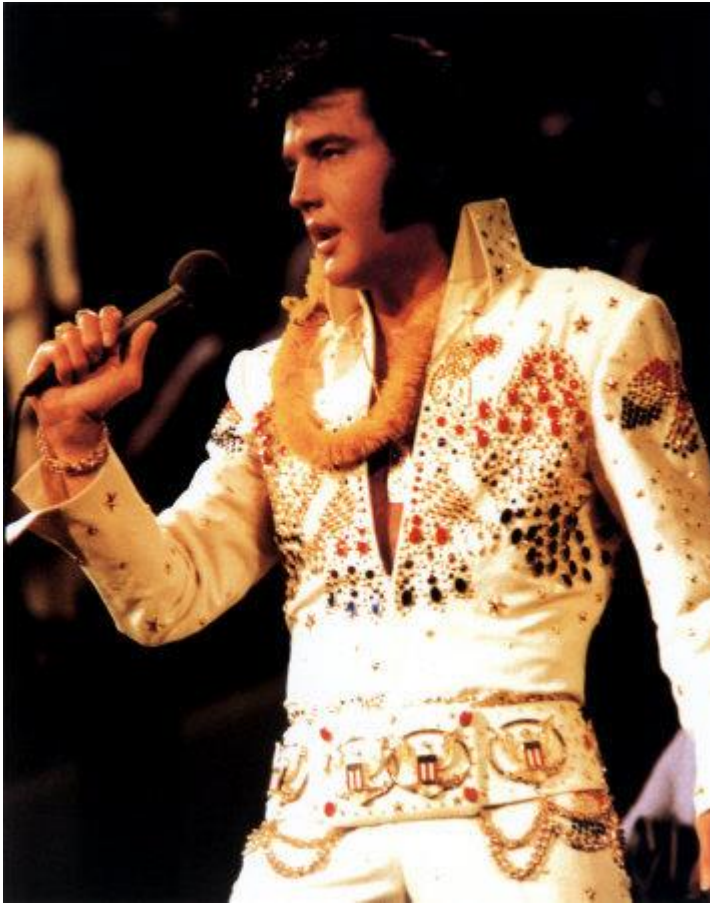
Office of the Indiana Attorney  
General



# Celebrity Overdose Death



# Celebrity Casualties



August 1977

The official coroner's report lists "cardiac arrhythmia" as the cause of Presley's death, but this was later admitted to be a ruse ... to cover up the real cause of death, a cocktail of ten prescribed drugs, taken in doses no doctor would prescribe



# Celebrity Casualties



February 2007

...due to an accidental overdose of a sleeping medication and at least eight other prescription drugs, according to authorities



# Celebrity Casualties



February 2008

"Mr. Heath Ledger died as the result of acute intoxication by the combined effects of Oxycodone, Hydrocodone, Diazepam, Temazepam, Alprazolam, and Doxylamine," (medical examiner)





Annual overdose deaths in America exceed the death of Americans soldiers over the entire Vietnam War.





# **New law: Drug Dealing Resulting in Death**

- New law passed effective July 1, 2018
- It is now a crime to deal drugs resulting in the death of another person.
- Not a defense if it a mixture of other drugs or alcohol.
- Makes it a Level 1 felony
- Difference between this and felony murder.

# Case Outlines from the Archives





# The Death of Christopher Zimmer Age 20



28697 Short Lane, Brookville

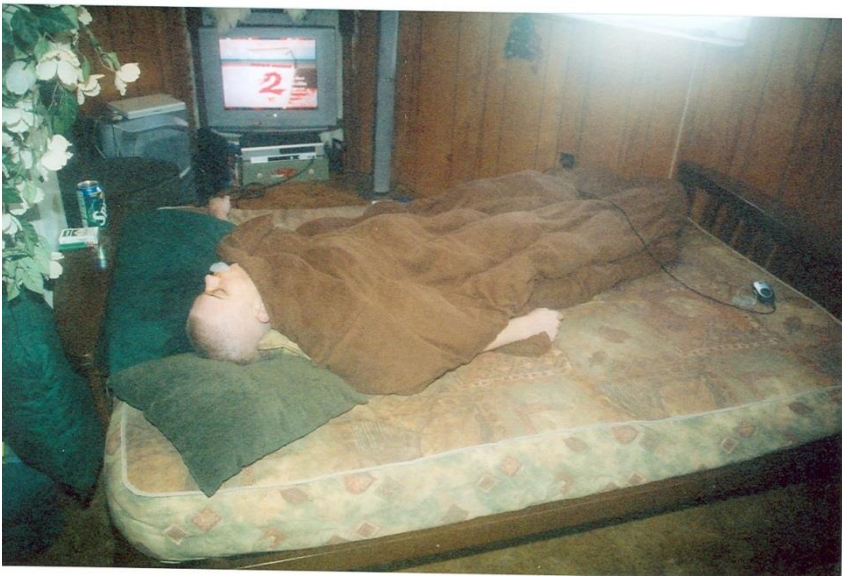
January 15<sup>th</sup>, 2006

Overdose

Methadone provided by a “friend” of Zimmer.



# The Death of Christopher Zimmer Age 20



- On January 15th, 2006 Christopher Zimmer is found unresponsive by a family member in his bedroom.
- Family members also stated to officers that Zimmer had been observed in a state of intoxication, very sleepy and scratching himself prior to the discovery.
- Several prescription medication bottles were found which contained meds, including Zoloft, Seroquel and Gabapentin. (depression and neuragia)
- Victim had a white foamy substance coming from his mouth and mucus from his nose.





# The Death of Christopher Zimmer Age 20



- Detective John Vance was assigned as the lead Investigator and took charge of the investigation assisted by additional Detectives with the Dearborn County Special Crimes Unit , and Dearborn County Deputies.
- Vance interviewed the brother of the deceased who provided the names of Christopher 's friends including, Danny Meeks, and others.
- The brother stated to Vance that he believed that Meeks had given some type of drug to Chris while he was there, and stated that Danny was a patient at the methadone clinic in Lawrenceburg.



# **The Death of Christopher Zimmer Age 20**

- Detectives made contact with Hamilton County, Ohio authorities in an effort to obtain a search warrant for the residence of Danny Meeks
- With the assistance of Hamilton County detectives the warrant was secured and executed at Meeks residence.

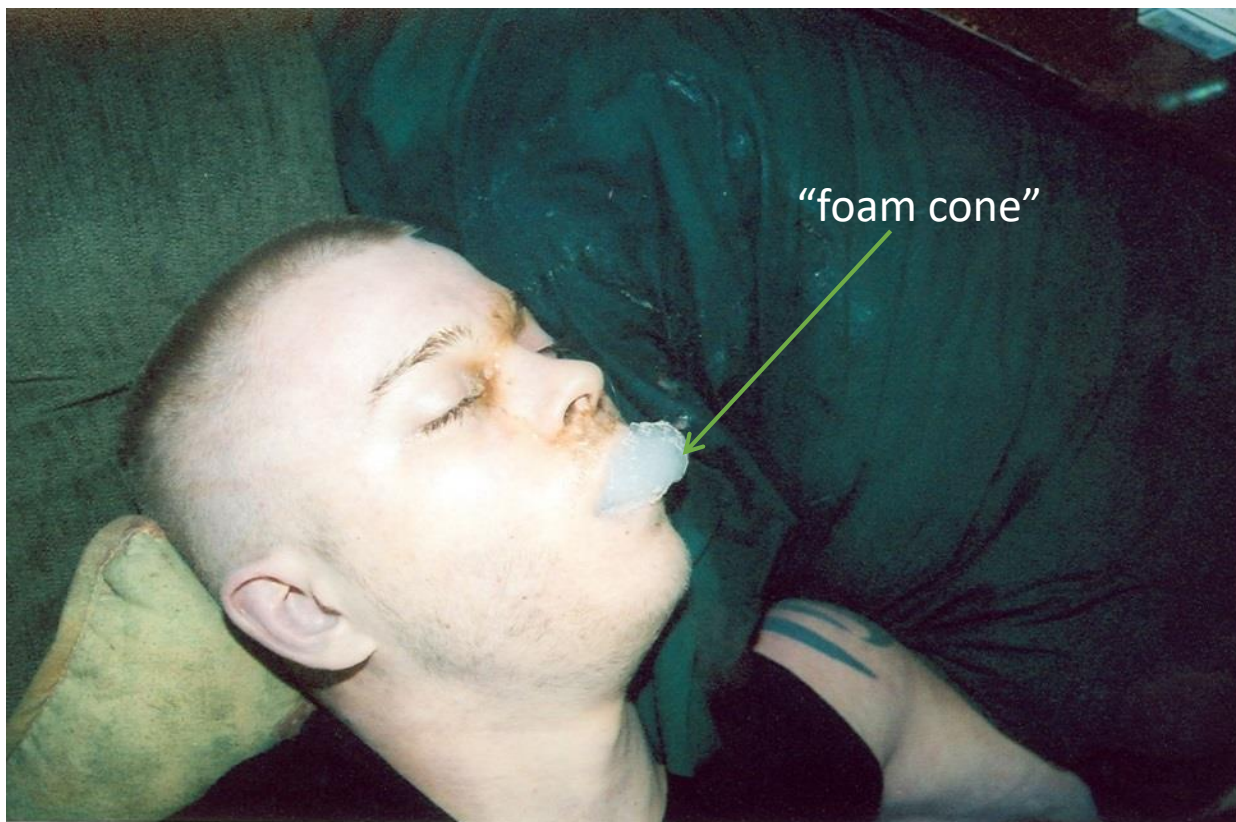
# The Death of Christopher Zimmer Age 20



2 dose bottles full and 4 empty  
found in Meeks residence by  
Detectives upon search  
warrant service in Hamilton  
County, Ohio



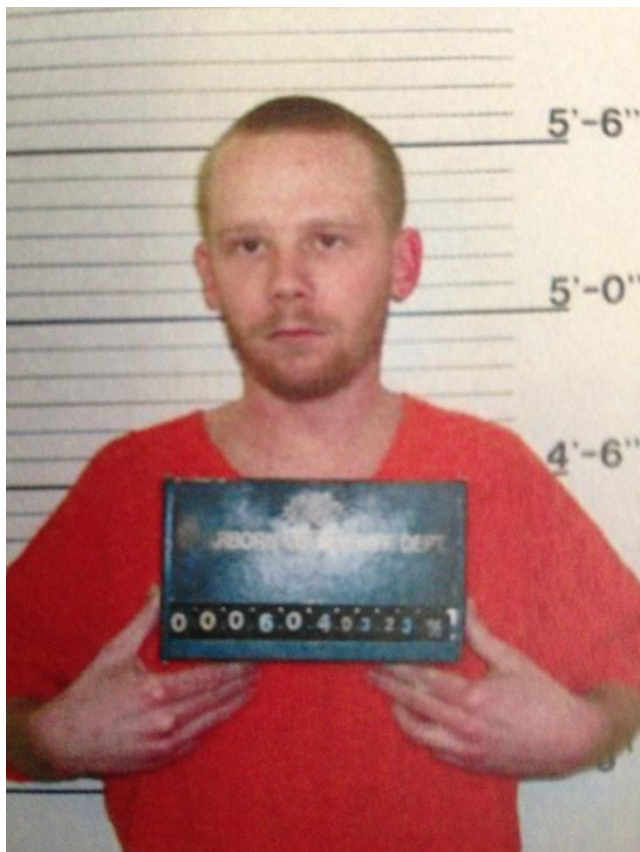
# The Death of Christopher Zimmer Age 20







# The Death of Christopher Zimmer Age 20



- Danny Meeks was charged with:
- Reckless Homicide a Class C Felony





# Death of Tyler Butler



Tyler Butler, Age 23



# Death of Tyler Butler

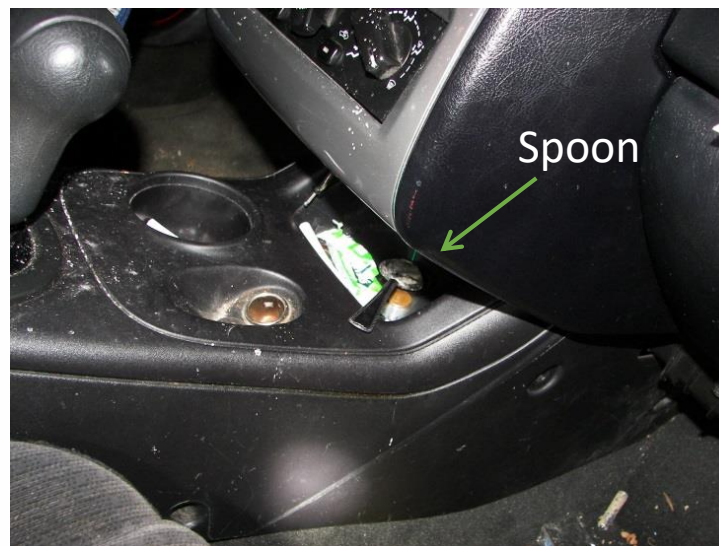
- April 27<sup>th</sup>, 2011
- Police called to “Road Dog” gas station on US 50 in Aurora.
- Victim was Tyler Butler a 23 year old white male from North Vernon, Indiana.
- The victim was unresponsive in the front seat of the vehicle.
- Detectives discovered prescription bottle of Alprazolam (Xanax) prescribed to victim.
- Bottle was short by approximately 42 tablets
- Initial on-scene interview of the driver indicated that victim routinely abused his prescribed Xanax along with alcohol.



# Death of Tyler Butler



- Other items collected from the vehicle indicated that drugs may have been injected.



# Death of Tyler Butler

- On April 28<sup>th</sup>, information was received which indicated that Butler may have been injected with heroin in addition to the other drugs in his system.
- The backseat passenger in the vehicle was re-interviewed concerning the events of the day.
- The passenger stated that the three did go to Cincinnati, Ohio and purchased heroin on the street there.
- The passenger further stated that he observed the driver of the vehicle mix the heroin with water and prepare a syringe, with which he injected himself and the deceased, Tyler Butler who was then passed out in less than five minutes on the way back to Indiana.
- After stopping at the “Road Dog” the driver waited 11 minutes before going inside to call for help for Butler.



# Death of Tyler Butler

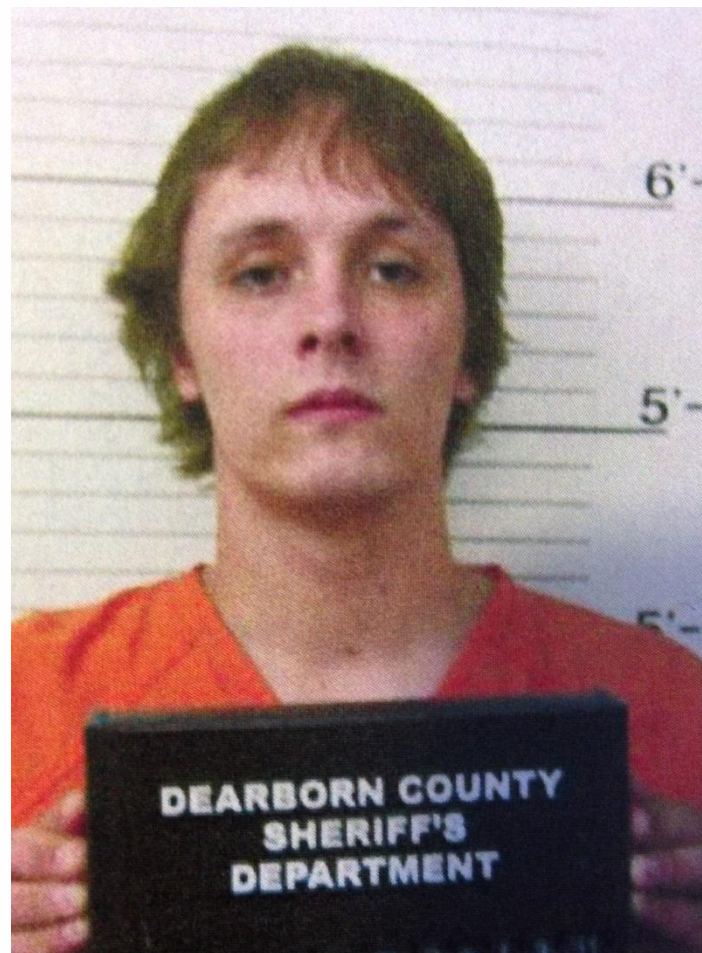
- Items collected from the vehicle included a spoon with white residue. A syringe, cotton balls with residue and a baggie containing a white residue.
- Lab tests confirmed the presence of heroin on three of the items.
- Cause of Death was listed as a “Mixed Drug Overdose” Alprazolam, morphine, Codeine, and ethanol. Also present was 6-monoacetylmorphine, a heroin metabolite.





# Death of Tyler Butler

- Adam Christopher Kemmerer was charged with:
- Reckless Homicide a Class C Felony
- Possession of a Narcotic Drug (heroin) a Class D Felony
- Maintaining a Common Nuisance , a Class D Felony
- Possession of Paraphernalia , a Class A Misdemeanor



# Forensic Cell Phone Evidence



- Cell Phone Evidence is critical in any criminal investigation. Especially overdose death investigations.
- Death of Brandon Spicer and subsequent investigation and prosecution of Jason Franks prove this point.



# Opiate Overdose Indications

- Opiates act as a central nervous system depressant one of various substances that diminish functional activity, usually by depressing the nervous system. Barbiturates, sedatives, and alcohol are all depressants.
- Depressants have various modes of action and effects, causing a decrease in heart rate and breathing. This slowing causes fluids to gather in the lungs, inhibiting the exchange of oxygen and carbon dioxide.
- Essentially, victims drown in their own pulmonary fluids.
- As the fluids gather, victims may expel some mixed with gas bubbles, which then forms the foam cone. Autopsies of opiate overdose victims often reveal that death resulted from pulmonary edema
- Pulmonary edema is a condition in which fluid accumulates in the lungs, a swelling of the lungs with a pooling of fluids inside them.





# Opiate Overdose Indications



Victims of an opiate overdose often exhibit specific characteristics. For example, victims may have a "foam cone," tinged orange or red with blood, around their nostrils and mouth, the most common characteristic of such an overdose.



# Opiate Overdose Indications



Because of this lack of oxygen, extremities, as well as the lips and tongue, frequently turn blue.





# Opiate Overdose Indications

Pupils may be constricted to a pinpoint appearance.





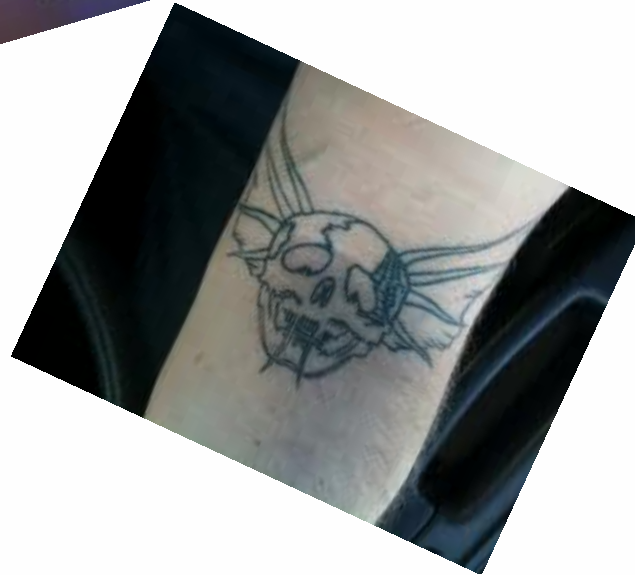
# Opiate Overdose Indications



Many opiate users inject the drug into their body with a needle. Consequently, they also may have needle or "track" marks, generally found on their arms, legs, eyelids, or between their toes.



# “Track Marks”



- Others also attempt to mask the needle marks by injecting into a tattoo.
- Although only an autopsy can determine the exact cause of death, investigators and first responders can use these characteristics to initially determine that death resulted from an opiate overdose.



# Shooting Pills



- It is common practice for intravenous opioid users to inject pills that have been crushed and dissolved into a solution.
- The reasons that an user would prepare and inject a pill are varying: some may do this primarily for the rush associated with intravenous injection.
- Others may do it because they think that they are getting higher than they would if they were to take the pill orally or intranasally.





# The Investigation

- All law enforcement agencies should join in this effort to investigate these crimes.
- This may be a local or state police, federal agencies such as the Federal Bureau of Investigation (FBI) or the Drug Enforcement Administration (DEA).
- Suspects and potential defendants may be more apt to cooperate with law enforcement than in other investigations.
- Investigators may be able to quickly garner the assistance of suspects, thereby rapidly identifying and targeting other persons working up the chain of supply.
- Rather than targeting a single dealer, investigations should aim to identify all individuals involved in the chain of distribution of the drugs to the victim, thus dismantling an entire organization.
- The recent change in the criminal code have created a number of problems with these investigations.





# The “Crime Scene”

- At this point, officers should secure the crime scene as if it were the site of a homicide.
- They should direct non-essential personnel, such as emergency medical workers, and family members away from the area and document everyone who enters it.
- Homicide and drug investigators, as well as crime scene technicians, should be called to the site.
- Before anything is disturbed, the entire scene should be photographed, including the victim.
- Only then should the victim be turned over to the coroner, or medical examiner for an autopsy.
- Finally, investigators should perform an organized search to gather physical evidence before releasing the scene.



# Collecting Evidence

- A complete search of the area where the death occurred and or the complete residence if applicable should be done before the area is vacated to assure that nothing of evidentiary value is lost.
- All prescription medication located within the crime scene should be examined and counted for dosing accuracy and all meds prescribed to the deceased should be confiscated in order to prevent them from falling into the wrong hands.



# Do a complete search for evidence

- Items of drug paraphernalia may contain samples of the drug.
- Officers should carefully package objects suspected of containing drugs or drug residue in separate containers and transfer them to a laboratory for analysis to determine the specific drug, its purity level, and any adulterants or other substances combined with it.
- Testing can prove crucial in linking the drugs found on an overdose victim back to the original dealer.
- In addition to chemical testing, investigators should request that the submitted evidence be examined for latent fingerprints.



# Paraphernalia

- Drug crimes usually yield *two valuable pieces* of evidence not always present in other crimes. *First*, investigators should pay particular attention to any items of paraphernalia that could be used to package and store drugs, as well as to mechanisms that someone could use to ingest a drug.





# Look for...

- Storage paraphernalia
  - Prescription bottles
  - Aspirin, Advil, Tylenol, bottles
  - Keychain containers
  - Lockboxes
  - Snow seals





# Collect all Cell Phones



- Users often contact a dealer and order drugs using landline or cellular telephones, or the Internet.
- During the crime scene search, investigators should seize all communication devices, which create a paper trail that can aid in an investigation.
- Using a subpoena or search warrant, investigators generally can obtain usage records of these devices from the service provider (e.g., the phone company or Internet-service provider) and analyze them.
- The analysis often provides investigators with a clear time line on the activities of the victim, including dates, times, and duration of contacts between the victim and drug dealer. These business records frequently furnish additional corroboration to physical evidence discovered at the crime scene.



# Interviews

- It is very important to assign sufficient manpower to conduct interviews of all witnesses as soon as possible after the event, and to document these interviews by means of audio and video recording.
- All witnesses should be separated and interviewed individually.
- Persons associated with the victim may be more inclined to tell what they know at this time because of grief, or a feeling of responsibility.
- Family members may have information related to the friends and associates of the deceased who may have additional information of value to the investigation.



Statements from involved witnesses are more likely to be truthful and accurate at this time than after they have had time to think and ponder the outcome of revealing what they actually witnessed.



## **To be successful, investigators must fulfill two prongs of the law.**

- **First, they must prove that:**
  - *The victim died as a result of an overdose.*
  - *That the drugs were provided by the suspect.*
- **Evidence gathered from the crime scene and autopsy can help achieve this.**



# Proving your case...

- Examine the business records of service providers to show communication between the victim and drug dealer.
- Question witnesses regarding their knowledge of drug dealing between the victim and dealer.
- Send a cooperating witness to meet with the dealer to obtain statements or other evidence linking the dealer to the victim.



- Set up controlled or undercover buys from drugs.
- These measures, used in conjunction with the physical evidence, can assist investigators in identifying and prosecuting all persons responsible for the overdose.



# Take Aways:

- Unfortunately, opiate overdoses have a tremendous impact on society.
- However, such incidents can assist law enforcement agencies in effectively targeting and dismantling an entire drug trafficking organization.
- Often, overdoses are not considered crimes. To change that, officers, investigators, and first responders should know the signs of a drug overdose.
- Further, they need to be aware of the law in their jurisdiction, as well as federal law, as it relates to overdoses.
- Administrators should develop sound policy and procedures dictating that overdoses be handled as homicides, thereby giving these investigations priority and integrity.
- A successful overdose investigation has the potential to curtail drug use, drug crimes, and drug dealing in a particular area, gaining positive outcomes from an otherwise tragic event.
- **“THINK OUTSIDE THE BOX”**