



Drug Prevention Program & Resource Guide 2011 Edition

SUBSTANCE ABUSE AWARENESS HANDBOOK COMPLETE WITH:

- STANDARDS OF CONDUCT
- LOCAL, STATE & FEDERAL LAWS
- CAMPUS POLICIES & SANCTIONS
- COMMONLY ABUSED DRUGS & ASSOCIATED HEALTH RISK
- LOCAL TREATMENT OPTIONS

Written according to guidelines outlined in Section 22: The Drug Free Schools and Communities Act Amendment of 1989- Public Law 101-226, EDGAR Part 86 and Title IV Guidelines



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Drug Prevention Program Certification Institutions of Higher Education

Sherman College has adopted and implemented a drug prevention program, and provides information on alcohol and drug awareness for its students and employees that include the annual distribution of program information through the student affairs and human resources offices. The library maintains information regarding drug awareness via videotape available for checkout for interested individuals. Counseling resources are available through the Office of Student Affairs.

Sherman College of Chiropractic prohibits the use of alcohol and other drugs. The college will enforce federal, state, and local laws, as well as its own alcohol and drug policies.

Also see: Policy 8013 – Tobacco Use
Policy 8004 – Student Code of Conduct

I. STANDARDS OF CONDUCT FOR EMPLOYEES AND STUDENTS REGARDING DRUGS AND ALCOHOL (Policy 8010, Revised 10/20/09):

- A. The possession, use or distribution of alcoholic beverages is forbidden on the premises of the college, except during the course of college-sponsored events. In such cases, the event organizer must obtain prior written consent from the college president or his or her designee.
- B. The possession, use or distribution of illegal drugs or substances of any kind is forbidden on the premises of the college.
- C. The unlawful possession, use, manufacture or distribution of illegal drugs or substances and alcohol on or off campus is cause for immediate dismissal.
- D. Individuals and sponsoring groups are accountable for their choices and behavior. If alcohol or other drug violations occur, the following disciplinary systems may be utilized:
 - College's Student Conduct Review Board
 - Legal prosecution
- E. A faculty member may be dismissed before the end of a contract term for the unlawful possession, use, manufacture or distribution of illegal drugs or substances or for teaching under the influence of drugs or alcohol.
- F. Students, employees, and guests must adhere to federal, state, local and college rules and regulations.

II. LEGAL REQUIREMENTS:

A. South Carolina Law: Individuals must be 21 years of age to purchase, possess, and/or consume alcohol. It is illegal to give or sell alcoholic beverages to persons who are under 21 years of age or who are intoxicated.



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B. Open Container Law: The State of South Carolina complies with the Transportation Equity Act for the 21st Century (TEA-21): The State of South Carolina has voluntarily submitted its open container law to the National Highway Traffic Safety Administration (NHTSA) for review and has been found to be in compliance with the provision in the federal highway bill, TEA-21.

Open Container (beer, wine): South Carolina law prohibits having an open container of beer or wine in a moving vehicle of any kind, except in the trunk or luggage compartment. If you are convicted of violating this law, you face a fine of up to \$100 or imprisonment for up to 30 days. (S.C. Code of Laws Section 61-4-110)

Open Container (liquor): South Carolina law prohibits having an open container of liquor in a moving vehicle of any kind, except in the trunk or luggage compartment. If you are convicted of violating this law, you face a fine of up to \$100 or imprisonment for up to 30 days. (S.C. Code of Laws Section 61-4-4020)

III. SANCTIONS:

Students found to be in violation of Sherman College's Code of Conduct or the Alcohol and Illegal Drug Restrictions Policy will be held accountable for their actions and will face disciplinary action and/or legal prosecution.

If students are found to be in violation of any of the following infractions, the following minimum sanctions are likely to occur:

1. Distribution of illegal drugs or substances: Dismissal
2. Possession, use or manufacture of illegal drugs: Two (2) term suspension/dismissal
3. Providing patient care while under the influence of alcohol and/or illegal drugs or substances: Two (2) term suspension/dismissal
4. Being under the influence of alcohol and/or illegal drugs or substances while on campus: One (1) term suspension/dismissal

Students may also be held accountable for allowing or soliciting violations of the standards of conduct by their guests. Campus disciplinary sanctions include, but are not limited to:

1. Written warnings
2. Probation
3. Fines
4. Suspension and/or dismissal

See Policy 8004 – Student Code of Conduct

IV. TITLE IV GUIDELINES:



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The college will adhere to the regulations/procedures as stated in the Title IV Guidelines concerning Financial Aid status and application.

The Title IV Guidelines are stated as follows:

A drug conviction can disqualify a student for FSA funds. The student self-certifies in applying for aid that he/she is eligible; the college is not required to verify this unless it has conflicting information in its possession.

A conviction that was reversed, set aside, or removed from the student's record does not count, nor does one received when the student was a juvenile, unless he/she was tried as an adult.

The period of ineligibility for FSA funds depends on whether the conviction was for sale or possession, and whether the student had previous offenses.

	Possession of illegal drugs	Sale of illegal drugs
1 st Offense	1 year from date of conviction	2 years from date of conviction
2 nd Offense	2 years from date of conviction	* Indefinite period
3 rd Offense	* Indefinite period	

If the student was convicted of both possessing and selling illegal drugs, and the periods of ineligibility are different, the student will be ineligible for the longer period.

A student regains eligibility the day he/she successfully completes a qualified drug rehabilitation program, though further drug convictions will make he/she ineligible again.

Students denied financial aid eligibility for an ***indefinite period** can regain it only after completing a rehabilitation program as described below or if a conviction is reversed, set aside, or removed from the student's record so that fewer than two (2) convictions for sale or three (3) convictions for possession remain on the record. It is the student's responsibility to certify to the college that he/she has completed the rehabilitation program; as with the conviction question on the FAFSA, the college is not required to verify the reported information unless it has conflicting information.

A qualified drug rehabilitation program must contain the following requirements:

1. Be qualified to receive funds directly or indirectly from a federal, state, or local government program.
2. Be qualified to receive payment directly or indirectly from a federally or state-licensed insurance company.
3. Be administered or recognized by a federal, state, or local government agency or court.
4. Be administered or recognized by a federally or state-licensed hospital, health clinic, or medical doctor.



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If a student certifies that he/she has completed a drug rehabilitation program, but the college does not believe that the program meets the requirements stated above, then the college must treat this as conflicting information and resolve the conflict before paying the student any FSA funds.

V. POLICY UPDATE:

The college will conduct a biennial review of the drug prevention program and/or policies to:

1. determine their effectiveness
2. implement any needed changes
3. ensure that disciplinary sanctions are consistently enforced



VI. HEALTH RISKS ASSOCIATED WITH THE USE OF ILLICIT DRUGS AND THE ABUSE OF ALCOHOL:

A. ALCOHOL:

- a. Highly addictive
- b. Nervous system depressant
- c. Can cause organic brain damage
- d. Can cause liver damage (cirrhosis)
- e. Upsets fluid balance in the body and may cause impotency, malnutrition, high blood pressure
- g. heart disease hypertension and menstrual imbalance
- h. Excessive intake impairs the activity of white blood cells in fighting disease and is associated with it. a greatly increased risk of cancer
- j. May cause alcoholic psychoses
- k. Idiosyncratic intoxication (low tolerance – acute reaction)
- l. Withdrawal delirium (Delirium tremens)
- m. Chronic alcoholic hallucinosis (auditory)
- n. Amnesic disorder (“Korsakoff”’s psychosis” – memory defect)
- o. Pregnant women, who drink heavily, frequently produce infants smaller and lighter than average who sometimes show facial and limb irregularities. HEW’s Third Report on Alcohol and Health, 1978 reports alcohol abuse is the third leading cause of birth defects; the first two being Down’s Syndrome and Spina Bifida. Also, causes Fetal Alcohol Syndrome.

B. DRUGS: The most common action of ALL DRUGS is their alteration of cell metabolism.

1. Anabolic Steroids-No intoxication effects, hypertension, blood clotting and cholesterol changes, liver cysts and cancer, kidney cancer, hostility and aggression, acne, premature stoppage of growth, prostate cancer, reduced sperm production, shrunken testicles, breast enlargement, menstrual irregularities, development of beard.

****Anadrol, Oxandrin, Durabolin, Depo-Testosterone, Equipoise: Roids, Juice**

2. Cannabinoids-Euphoria, slowed thinking and reaction time, confusion, impaired balance and coordination, cough, frequent respiratory infections, impaired memory and learning, increased heart rate, anxiety, panic attacks, tolerance, addiction, damages reproductive organs in males and females

a. Hashish (Boom, Chronic, Gangster, Hash, Hash oil, Hemp)

Symptoms: See above Cannbinoids



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b. Marijuana (Gateway drug: Blunt, Dope, Ganja, Herb, Joint, Mary Jane, Reefer, Pot,)

Symptoms: See above Cannbinoids

3. Depressants-Reduced anxiety, feeling of well-being, lowered inhibitions, slowed pulse and breathing, lowered blood pressure, poor concentration, fatigue, confusion, impaired coordination, memory judgment; addiction; respiratory depression and arrest, death.

a. Barbiturates (Amytal, Nembutal, Seconal, Phenobarbital;barbs, reds, phennies, yellows)

Symptoms: Sedation, drowsiness, depression, unusual excitement, fever, irritability, poor judgment, slurred speech, dizziness, life threatening, withdrawal

b. Benzodiazepines: (Ativan, Halcion, Librium, Valium, Xanax;candy, downers, sleeping pills)

Symptoms: Sedation, drowsiness, dizziness

c. Flunitrazepam (Rohypnol:Forget-me-pill, Mexican Valium, R2, Roche, Roofies, Roofinol, Date rape drug)

Symptoms: Visusal and gastrointestinal disturbances, urinary retention, memory loss for the time under the drug.

d. GHB (Gamma-hydroxybutyrate: G, Georgia homeboy, Liquid Ecstasy,Grievous bodily harm)

Symptoms: Drowsiness, nausea/vomiting, headache, loss of consciousness, loss of reflexes, seizures, coma death

e. Methaqualone (Quaalude, Sopor, Parest; Ludes, Mandrex, Quad, Quay)

Symptoms: Euphoria, depression, poor reflexes, slurred speech, coma

f. Dextromethorphan: Dissociative effects, distorted visual perceptions to complete dissociative effects,

Found in some cough and cold medicines: Robtripping, Rob, Triple C

4. Dissociative Anesthetics-Increased heart rate and blood pressure, impaired motor function/memory loss; numbness; nausea/vomiting

a. Ketamine (Ketalar SV: Cat Valium, K, Special K, Vitamin K)

Symptoms: At high doses, delirium, depression, respiratory depression and arrest



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b. PCP and analogs (Phencyclidine: Angel dust, boat, hog, love boat, peace pill)

Symptoms: Possible decrease in blood pressure and heart rate, panic, aggression, violence/loss of appetite, depression

5. Hallucinogens-Altered states of perception and feeling; nausea; persisting perception disorder(flashbacks)

a. LSD (Lysergic acid diethylamide; Acid, Blotter, Boomers, Cubes, Yellow Sunshines)

Symptoms: Increased body temperature, heart rate, blood pressure, loss of appetite, sleeplessness, numbness, weakness, tremors, persistent mental disorders

b. Mescaline (Buttons, Cactus, Mesc, Peyote)

Symptoms: Increased body temperature, heart rate, blood pressure, loss of appetite, sleeplessness, numbness, weakness, tremors

c. Psilocybin (Mexican mushroom)

Symptoms: Nervousness, paranoia

6. Inhalants- Stimulation, loss of inhibition, headache, nausea, slurred speech, loss of motor coordination, wheezing, cramps, weight loss, muscle weakness, depression, memory impairment, damage to cardiovascular and nervous systems, sudden death

a. Solvents (Paint thinners, Gasoline, Glues)

b. Gases (Butane, Propane, Aerosol propellants, Nitrous Oxide)

c. Nitrites (Isoamyl, Isobutyl, Cyclohexyl)

****Laughing Gas, Poppers, Snappers, Whippets**

7. Opioids and Morphine Derivatives-Pain relief, euphoria, drowsiness, nausea, constipation, confusion, sedation, respiratory depression and arrest, tolerance, addiction, unconsciousness, coma, death

a. Codeine (Empirin with Codeine, Fiorinal with Codeine, Robitussin with Codeine, Tylenol with Codeine: Cody, doors and floors, pancakes and syrup)

Symptoms: Less analgesia, sedation and respiratory depression than morphine



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b. Fentanyl and fentanyl analogs(Actiq, Durgesic: Apache, China Girl, China White, dance fever, Friend, Jackpot, Murder 8, TNT)

Symptoms: See above for opioids and morphine

c. Heroin (Diacetylmorphine; Brown sugar, Dope, H, Horse, Junk, Smack, White Horse)

Symptoms: Staggering gait, see above for opioids and morphine

d. Morphine (Roxanol, Duramorph: M, Miss Emma, Monkey, White stuff

e. Opium (Laudanum, paregoric: Big O, Black stuff, Block, Gum, Hop)

g. Oxycodone HCL (OxyContin: Oxy, OC, Killer)

h. Hydrocodone Bitartrate (Vicodin: Vike, Watson-387)

Symptoms: See above for opioids and morphine

8. Stimulants-Increased heart rate, blood pressure, metabolism; feelings of exhilaration, energy)

a. Amphetamines (Biphphetamine, Dexedrine; Bennies, Speed, Uppers, Crosses, Black Beauties)

Symptoms: Rapid breathing, tremor, loss of coordination, irritability, anxiousness, restlessness, delirium, panic, paranoia, impulsive behavior, aggressiveness, tolerance, addiction, psychosis

b. Cocaine (Cocaine hydrochloride; Blow, Bump, C, Candy, Charlie, Coke, Crack, Rock)

Symptoms: Increased temperature, chest pain, respiratory failure, nausea, abdominal pain, strokes, seizures, headaches, malnutrition, panic attacks

For more information call 1-800-COCAINE

c. MDMA (Adam, Clarity, Ecstasy, Lover's Speed, X, XTC)

Symptoms: Mild hallucinogenic effects, increased tactile sensitivity, empathic feelings, impaired memory and learning, hyperthermia, cardiac toxicity, renal failure, liver toxicity

d. Methamphetamine (Desoxyn; Chalk, Crank, Crystal, Fire, Glass, Ice, Meth, Speed)

Symptoms: Aggression, violence, psychotic behavior, memory loss, cardiac and neurological damage, impaired memory and learning, tolerance, addiction

e. Methylphenidate (Ritalin: JIF, MPH, R-ball, Skippy, Vitamin R, the Smart Drug)



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Symptoms: See above Stimulants

f. Nicotine (Cigarettes, Cigars, Smokeless tobacco, Snuff, Spit tobacco, Chew, Bidis)

Symptoms: Additional effects attributable to tobacco exposure; adverse pregnancy outcomes, chronic lung disease, cardiovascular disease, stroke, cancer, tolerance, addiction

Reference:

National Institute on Drug Abuse. (2009, July 27). Commonly Abused Drugs. Retrieved March 19, 2010 from <http://www.drugabuse.gov/DrugPages/DrugsofAbuse.html>



VII. PERSONAL COUNSELING:

Counseling and referral assistance for drug/substance abuse are available thru the Office of Student Affairs for employees and students; however, anyone suspected of drug or alcohol abuse is referred to the Spartanburg County Alcohol and Drug Abuse Commission on 187 W. Broad Street. Also, joining Alcoholics Anonymous and/or Drugs Anonymous is encouraged.

VIII. RESOURCES FOR EDUCATION AND TREATMENT:

On Campus

1. Student Services (578-8770, ext 224)
2. Campus Security (599-4852)

Off Campus

1. *Spartanburg Alcohol and Drug Abuse Commission*
(864)582-7588 www.sadac.org

To reduce human suffering from alcohol tobacco, and other drug use, abuse, and addiction by providing and promoting quality prevention, education, intervention, and treatment services in Spartanburg County.

The Spartanburg Alcohol & Drug Abuse Commission (SADAC) was established in 1971 by the Spartanburg County and the Spartanburg City Councils.

Nationally accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), SADAC is licensed by the S. C. Department of Health and Environmental Control (DHEC) as an outpatient facility for chemically dependent or addicted persons, and as a community Residential Care Facility for non-medical detoxification. SADAC staff are certified through the South Carolina Association of Alcoholism and Drug Abuse Counselors, South Carolina Association of Prevention Professionals and Advocates, and may hold state licensure or national certifications. Clinical staff hold bachelor and masters degrees in the areas of Education, Counseling, Human Services and other related fields.

SADAC is committed to the needs of an individual and believes that all persons have worth and dignity, regardless of their legal, emotional, social, or economic status. SADAC does not discriminate against any



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person on the basis of sex, race, color, religion, national origin, ancestry, age, sexual orientation, marital status, or handicap.

SADAC believes that alcohol, tobacco and other drug problems are treatable and preventable.

2. *Alcoholics Anonymous*

(864)585-1930 www.AA.org

Alcoholics Anonymous® is a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism. The only requirement for membership is a desire to stop drinking. There are no dues or fees for AA membership; we are self-supporting through our own contributions. AA is not allied with any sect, denomination, politics, organization or institution; does not wish to engage in any controversy, neither endorses nor opposes any causes. Our primary purpose is to stay sober and help other alcoholics to achieve sobriety.

3. *Narcotics Anonymous*

800-828-5689 www.NA.org

Narcotics Anonymous provides a recovery process and peer support network that are linked together. One of the keys to NA's success is the therapeutic value of addicts working with other addicts. Members share their successes and challenges in overcoming active addiction and living drug-free, productive lives through the application of principles contained within the Twelve Steps and Twelve Traditions of NA. These principles are the core of the Narcotics Anonymous recovery program. Narcotics Anonymous itself is a non-religious program of recovery; each member is encouraged to cultivate an individual understanding-religious or not-of the spiritual principles and apply these principles to everyday life. There are no social, religious, economic, racial, ethnic, national, gender, or class-status membership restrictions. There are no dues or fees for membership; most members regularly contribute in meetings to help cover the expenses incurred for the rent of a facility space.

Narcotics Anonymous is not affiliated with other organizations, including other twelve step programs, treatment centers, or correctional facilities. As an organization, NA does not employ professional counselors or therapists, nor does it provide residential facilities or clinics. NA has only one mission: to provide an environment in which addicts can help one another stop using drugs and find a new way to live.

4. *Carolina Center for Behavioral Health*

800-866-4673 www.thecarolinacenter.com

Serving individuals ages 18 and up, the Adult Addictive Program provides treatment for patients struggling with a range of chemical dependency issues. The level of care and other details of your treatment plan will be determined through an initial assessment. We have both inpatient and intensive outpatient programs to meet the needs of patients dealing with drug or alcohol abuse. Our facility is convenient to Greenville and areas throughout Upstate, SC.



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Online Services for locating assistance:

www.Addictionsearch.com 800-559-9503

References:

Alcoholics Anonymous. Retrieved March 18, 2010 from www.AA.org.

Carolina Center for Behavioral Health. Retrieved March 18, 2010 from www.thecarolinacenter.com.

Narcotics Anonymous. Retrieved March 18, 2010 from www.NA.org.

National Institute on Drug Abuse. (2009, July 27). Commonly Abused Drugs. Retrieved March 19, 2010 from <http://www.drugabuse.gov/DrugPages/DrugsofAbuse.html>

Spartanburg Alcohol and Drug Abuse Commission. Retrieved March 18, 2010 www.Sadac.org.