

Impairment Assessment

Student's Name: _____ **Grade:** _____ **Date:** _____ **Campus:** _____

Vital Signs (beginning of assessment)

B/P _____ Pulse _____ Reg/Irreg _____
Temp _____ Resp _____ Reg/Irreg _____

Vital Signs (end of assessment)

B/P _____ Pulse _____ Reg/Irreg _____
Temp _____ Resp _____ Reg/Irreg _____

Physical Appearance: neat/disheveled

Oral inspection: _____

Clean/unclean

Nasal inspection: _____

Level of Orientation to person/place/time: Oriented _____ Confused _____ Stupor _____

Coordination (circle)

Romberg balance: no swaying/swaying Estimation of 30 seconds: _____
One leg Stand: keeps leg up puts leg down puts foot down Uses arms for balance hops swaying

Activity Level (circle)

unremarkable hyperactive irritable belligerent silly slow restless dazed

Behavior/thought Process (circle all that apply)

normal agitated anxious excited paranoid lethargic hallucinating uncooperative nervous
drowsy confused relaxed euphoric disoriented

Speech (circle): unremarkable rambling slurred slow rapid

Breath (circle): normal ETOH chemical rancid marijuana other: _____

Complaints: chest pain _____ yes _____ no Runny nose _____ yes _____ no Other complaints: _____

History: Substance used/ingested _____

Eyes

General observations (circle) normal bloodshot watery contacts glasses

Pupils (circle) equal constricted dilated

Conjunctiva normal redness

Reaction to light reactive slowed non-reactive

Rebound dilatation present not present

Lack of smooth pursuit	R _____ present _____ not present L _____ present _____ not present	Move the stimulus from center to side in approximately 2 seconds and then back from side to center in approx. 2 seconds. Check both eyes twice.
Distinct nystagmus at Maximum deviation	R _____ present _____ not present L _____ present _____ not present	Move the stimulus from center to the side until there is no more of the white of the eye showing in the corner and hold for at least 4 seconds. Check both eyes twice.
Onset of nystagmus prior to 45 degrees	R _____ present _____ not present L _____ present _____ not present	Move the stimulus from the center to the side very slowly (at least 4 seconds), watch for the first twitch/jerk, hold, and ensure it continues. Check each eye twice.
Vertical nystagmus	_____ present _____ not present	Move the stimulus upward and hold for at least 4 seconds. Repeat.
Lack of convergence	_____ converge _____ no converge	Make two circles in front of the face, bring the stimulus in, and touch the bridge of the nose. Check to see if the eyes were able to converge (cross).

Plan _____ Return to class _____ 911 called _____ home with parent/guardian _____ return to administrator's office

Signature – R.N.

Date

Name of administrator present

CUMULATIVE DRUG SYMPTOMATOLOGY MATRIX

CATEGORIES	Depressants	Stimulants	Hallucinogens	P.C.P.	Narcotic Analgesic	Inhalants	Cannabis
H.G.N.	Present	None	None	Present	None	Present	None
Vertical Nystagmus	Present** (High Dose)	None	None	Present	None	Present** (High Dose)	None
Lack of Convergence	Present	None	None	Present	None	Present	Present
Pupil Size	Normal (1)	Dilated	Dilated	Normal	Constricted	Normal (4)	Dilated (6)
Reaction to Light	Slow	Slow	Normal (3)	Normal	Little or Non Visible	Slow	Normal
Pulse Rate	Down (2)	Up	Up	Up	Down	Up	Up
Blood Pressure	Down	Up	Up	Up	Down	Up/Down (5)	Up
Body Temperature	Normal	Up	Up	Up	Down	Up/Down or Normal DOS ***	Normal
Muscle Tone	Flaccid	Possibly Rigid	Possibly Rigid	Rigid	Normal or Flaccid	Flaccid	Normal
General Indicators	Uncoordinated Disoriented Sluggish Thick Slurred Speech Drowsiness Drunk Like Behavior Fumbling Impaired Vision Droopy Eyes Body Tremors Will Be Evident W/ Quaaludes	Restlessness Body Tremors Excited Talkative Exaggerated Reflexes Anxiety Grinding of Teeth Insomnia Dry Mouth Irritability Runny Nose Redness to Nasal Area	Dazed Appearance Body Tremors Synesthesia Paranoia Hallucinations Disoriented Memory Loss Flashbacks Piloerection *** Perspiring Uncoordinated Speech Difficulty	Perspiring Warm to Touch Repetitive Speech Cyclic Behavior Speech Difficulty Incomplete Verbal Responses Increased Pain Threshold Possibly Violent	Droopy eyelids- "On the Nod" Dry Mouth Facial Itching Droopy Eyelids Low Raspy Slow Speech Track Marks Euphoria Nausea Fresh Puncture Wounds	Odor of Substance Traces on Clothes or Face Bloodshot Watery Eyes Confused Disoriented Lack of Muscle Control Nausea Flushed Face Headaches	Odor of Marijuana Marijuana Debris in Mouth Eyelid Tremors Reddening of Conjunctiva Body Tremors Disoriented Relaxed Inhibitions Possible Paranoia
Duration of Effects	Barbs / 1 -16 Hrs Tranq / 4 - 8 Hrs Ludes / 4- 8 Hrs	Coca / 5-90 Min Amp / 4 -8 Hrs M.Amp / 12 Hrs	Will Vary Widely DOS ***	Onset / 1-5 Min Peak / 15-30 Min Effects / 4-6 Hrs	Heroin/4-6 Hrs Methadone up to 24 Hrs	Volatile Solvents 6 - 8 Hrs Others - Short	Exhibit Effects 2 -3 Hrs Impaired up to 24 Hrs

1. Soma & Quaaludes usually dilate pupils.
2. Quaaludes & Alcohol may elevate.
3. Certain Psychedelic Amphetamines cause slow reaction to light.
4. Normal in most cases, must be dilated.
5. Down with Anesthetic Gases, up with Volatile Solvents and Aerosols.
6. Pupil size possibly normal.

PUPIL SIZE:
Normal Range = 3.0 mm - 6.5 mm
PULSE:
Normal Range = 60 -100 BPS
BLOOD PRESSURE:
Normal Range = 120 / 140 Systolic

** With LSD Piloerection may be observed (goose bumps, hair standing on end)
*** Depends on Substance Used.

70 / 90 Diastolic
BODY TEMP.: Normal Range
98.6 degrees F + / - 1.0 degree