Students, Faculty and Staff, June 3, 2015

Each year Oregon State University must notify each employee and student, in writing, of standards and expectations related to substance abuse, including:
- conduct standards;
- a description of appropriate sanctions for violation of federal, state, and local law and campus policy;
- a description of health risks associated with alcohol and drug use.

There have been a lot of exciting updates to our efforts this past year. Student Health Services launched the Alcohol, Drug and Violence Prevention Center (ADVPC), which facilitates collaboration among students, staff and faculty throughout the university and community. The center utilizes current theory and data-driven practices to reduce high-risk alcohol and drug use, violence, and support students in recovery.

New online prevention modules were successfully implemented this year through support from The Vice Provost for Student Affairs, University Housing and Dining Services, Office of Equity and Inclusion, Student Health Services, the Registrar, Enterprise Computing Services, the Graduate School, International Programs, and other offices. More than 3,900 individuals, representing over 90 percent of our first-year students, completed an alcohol prevention program prior to arriving on campus, and 6,000 new students completed an online sexual violence prevention program this year.

Finally, a new Advocacy Center will launch this fall to support survivors of sexual assault and other forms of violence. This center will integrate existing services on and off campus to assist survivors in navigating the complexity and range of options available to survivors. The search for an Advocate is in process and a new Advocacy Center GTA has been hired and will start this summer. These positions are funded through the Office of the Provost and supported through collaborations between the Vice Provost for Student Affairs, Student Health Services, Counseling and Psychological Services, and The Office of Equity and Inclusion.

Historically, this notification has been distributed in the spring term; however, the timing of future notifications will move to fall in order to better educate our community on resources, laws, policies and updates.

If you have any questions or would like more information please do not hesitate to contact me.
Take care and have a great summer.

Robert C. Reff, PhD

---

1 This Annual Notification is distributed to comply with the requirements of the 1989 amendments to the Drug-Free Schools and Communities Act (DFSCA), as articulated in the Education Department General Administrative Regulations (EDGAR) Part 86.1 — the DrugFree Schools and Campuses Regulations.
2014-2015 Annual Notification of Alcohol and Other Drug Information

OSU is required by law to notify annually all students, staff, and faculty of alcohol and other drug policies, sanctions, and risks associated with use.

This notification provides the campus community the following information:

A. Drug and alcohol programs available to employees or students ................................................................. 1
B. Health risks associated with alcohol abuse and illicit drug use ................................................................. 3
C. Standards of conduct and disciplinary sanctions for students regarding alcohol and drug use .............. 7
D. Standards of conduct and disciplinary sanctions for employees regarding alcohol and drug use .......... 8
E. Federal and state legal sanctions ................................................................................................................ 9

2014-2015 Annual Notification of Alcohol and Other Drug Information
Information for Students, Faculty, and Staff of Oregon State University

A. Drug and alcohol programs available to employees or students

At Oregon State University, we strive to provide an excellent teaching and learning environment that supports healthy choices for living. Included in the choices that confront everyone are decisions about the use of alcohol and other substances. If you or someone you know is being affected by alcohol or drug use, please use the recommended resources below. If you have any questions about the purpose of this email or its content, please contact:

For Students
Robert C. Reff, Director – Alcohol, Drug and Violence Prevention Center
541-737-7564
robert.reff@oregonstate.edu

Carl Yeh, Director – Student Conduct and Community Standards
541-737-3658
carl.yeh@oregonstate.edu

Students interested in more information about their own alcohol or drug use can contact:
The Alcohol, Drug and Violence Prevention Center, Student Health Services, 541-737-7564
Counseling and Psychological Services, 541-737-2131

Oregon State University has a Collegiate Recovery Community (CRC) on campus to support students in recovery. The CRC hosts open recovery meetings. For more information please visit:
http://studenthealth.oregonstate.edu/recovery

For Faculty/Staff
David M. Blake, PhD., SPHR
Office of Human Resources
122 Kerr Administration Building Employment Services
541-737-8300
human.resources@oregonstate.edu
Employees interested in more information can contact:

Employee Assistance Program (EAP)
OSU provides an Employee Assistance Program (EAP) available to all employees with .50 FTE or greater appointments. Through this program, each employee is allowed up three visits per calendar year at no cost for evaluation, limited counseling, and referral. Employees who live and work elsewhere in the state are provided the same services in their local areas. All employee contact with the EAP is confidential.

EAP Contact: Cascade Centers, Inc
541-757-3013 in Corvallis or 1-800-433-2320.

Treatment Program: Employees seeking treatment for substance abuse may be eligible for time off from work through the Federal Family and Medical Leave Act (FMLA). Contact the Benefits section of Human Resources at 541-737-2805 for more information.

For Students/Faculty/Staff
12-Step Programs: OSU acknowledges the value of 12-step programs in attaining and maintaining a drug-free lifestyle. Schedules of meetings for Alcoholics Anonymous, Narcotics Anonymous, Cocaine Anonymous, Al-Anon, and other 12-step groups can be obtained from the Benton County Health Department, 530 N.W. 27th St., 541-766-6835.
B. Health risks associated with alcohol abuse and illicit drug use

Commonly Abused Drugs
http://www.drugabuse.gov/drugs-abuse/commonly-abused-drugs/commonly-abused-drugs-chart

<table>
<thead>
<tr>
<th>Category and Name</th>
<th>Examples of Commercial and Street Names</th>
<th>How Administered*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nicotine</td>
<td>Found in cigarettes, cigars, bidis, and smokeless tobacco (snuff, spit tobacco, chew)</td>
<td>Smoked, snorted, chewed</td>
</tr>
</tbody>
</table>

**Acute Effects** - Increased blood pressure and heart rate

**Health Risks** - Chronic lung disease; cardiovascular disease; stroke; cancers of the mouth, pharynx, larynx, esophagus, stomach, pancreas, cervix, kidney, bladder, and acute myeloid leukemia; adverse pregnancy outcomes; addiction

<table>
<thead>
<tr>
<th>Category and Name</th>
<th>Examples of Commercial and Street Names</th>
<th>How Administered*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol (ethyl alcohol)</td>
<td>Found in liquor, beer, and wine</td>
<td>Swallowed</td>
</tr>
</tbody>
</table>

**Acute Effects** - In low doses, euphoria, mild stimulation, relaxation, lowered inhibitions; in higher doses, drowsiness, slurred speech, nausea, emotional volatility, loss of coordination, visual distortions, impaired memory, sexual dysfunction, loss of consciousness

**Health Risks** - Increased risk of injuries, violence, fetal damage (in pregnant women); depression; neurologic deficits; hypertension; liver and heart disease; addiction; fatal overdose

<table>
<thead>
<tr>
<th>Category and Name</th>
<th>Examples of Commercial and Street Names</th>
<th>How Administered*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marijuana</td>
<td>Blunt, dope, ganja, grass, herb, joint, bud, Mary Jane, pot, reefer, green, trees, smoke, sinsemilla, skunk, weed</td>
<td>Smoked, swallowed</td>
</tr>
<tr>
<td>Hashish</td>
<td>Boom, gangster, hash, hash oil, hemp</td>
<td>Smoked, swallowed</td>
</tr>
</tbody>
</table>

**Acute Effects** - Euphoria; relaxation; slowed reaction time; distorted sensory perception; impaired balance and coordination; increased heart rate and appetite; impaired learning, memory; anxiety; panic attacks; psychosis

**Health Risks** - Cough, frequent respiratory infections; possible mental health decline; addiction

<table>
<thead>
<tr>
<th>Category and Name</th>
<th>Examples of Commercial and Street Names</th>
<th>How Administered*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heroin</td>
<td><em>Diactylmorphine</em>: smack, horse, brown sugar, dope, H, junk, skag, skunk, white horse, China white; cheese (with OTC cold medicine and antihistamine)</td>
<td>Injected, smoked, snorted</td>
</tr>
<tr>
<td>Opium</td>
<td><em>Laudanum, paregoric</em>: big O, black stuff, block, gum, hop</td>
<td>Swallowed, smoked</td>
</tr>
</tbody>
</table>

**Acute Effects** - Euphoria; drowsiness; impaired coordination; dizziness; confusion; nausea; sedation; feeling of heaviness in the body; slowed or arrested breathing

**Health Risks** - Constipation; endocarditis; hepatitis; HIV; addiction; fatal overdose
### Cocaine

<table>
<thead>
<tr>
<th>Examples of Commercial and Street Names</th>
<th>How Administered*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cocaine hydrochloride: blow, bump, C, candy, Charlie, coke, crack, flame, rock, snow, toot</td>
<td>snorted, smoked, injected</td>
</tr>
</tbody>
</table>

**Acute Effects**
- Increased heart rate, blood pressure, body temperature, metabolism; feelings of exhilaration; increased energy, mental alertness; tremors; reduced appetite; irritability; anxiety; panic; paranoia; violent behavior; psychosis

**Health Risks**
- Weight loss, insomnia; cardiac or cardiovascular complications; stroke; seizures; addiction

Also, for cocaine – Nasal damage from snorting

Also, for methamphetamine – Severe dental problems

### Amphetamine

<table>
<thead>
<tr>
<th>Examples of Commercial and Street Names</th>
<th>How Administered*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biphetamine, Dexedrine: bennies, black beauties, crosses, hearts, LA turnaround, speed, truck drivers, uppers</td>
<td>swallowed, snorted, smoked, injected</td>
</tr>
</tbody>
</table>

### Methamphetamine

<table>
<thead>
<tr>
<th>Examples of Commercial and Street Names</th>
<th>How Administered*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Desoxyn: meth, ice, crank, chalk, crystal, fire, glass, go fast, speed</td>
<td>swallowed, snorted, smoked, injected</td>
</tr>
</tbody>
</table>

### Acute Effects
- Feelings of being separate from one's body and environment; impaired motor function

### Health Risks
- Analgesia; impaired memory; delirium; respiratory depression and arrest; death

---

### Club Drugs

<table>
<thead>
<tr>
<th>Category and Name</th>
<th>Examples of Commercial and Street Names</th>
<th>How Administered*</th>
</tr>
</thead>
<tbody>
<tr>
<td>MDMA (methyleneedioxy-methamphetamine)</td>
<td>Ecstasy, Adam, clarity, Eve, lover's speed, peace, uppers</td>
<td>swallowed, snorted, injected</td>
</tr>
<tr>
<td>Flunitrazepam**</td>
<td>Rohypnol: forget-me pill, Mexican Valium, R2, roach, Roche, roofinol, rope, rophies</td>
<td>swallowed, snorted</td>
</tr>
<tr>
<td>GHB**</td>
<td>Gamma-hydroxybutyrate: G, Georgia home boy, grievous bodily harm, liquid ecstasy, soap, scoop, goop, liquid X</td>
<td>swallowed</td>
</tr>
</tbody>
</table>

**Acute Effects, for MDMA**
- Mild hallucinogenic effects; increased tactile sensitivity; empathic feelings; lowered inhibition; anxiety; chills; sweating; teeth clenching; muscle cramping

**Also, for Flunitrazepam**
- Sedation; muscle relaxation; confusion; memory loss; dizziness; impaired coordination

**Also, for GHB**
- Drowsiness; nausea; headache; disorientation; loss of coordination; memory loss

**Health Risks, for MDMA**
- Sleep disturbances; depression; impaired memory; hyperthermia; addiction

**Also, for Flunitrazepam**
- Addiction

**Also, for GHB**
- Unconsciousness; seizures; coma

---

### Dissociative Drugs

<table>
<thead>
<tr>
<th>Category and Name</th>
<th>Examples of Commercial and Street Names</th>
<th>How Administered*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ketamine</td>
<td>Ketalar SV: cat Valium, K, Special K, vitamin K</td>
<td>injected, snorted, smoked</td>
</tr>
<tr>
<td>PCP and analogs</td>
<td>Phencyclidine: angel dust, boat, hog, love boat, peace pill</td>
<td>swallowed, smoked, injected</td>
</tr>
<tr>
<td>Salvia divinorum</td>
<td>Salvia, Shepherdess's Herb, Maria Pastora, magic mint, Sally-D</td>
<td>chewed, swallowed, smoked</td>
</tr>
<tr>
<td>Dextromethorphan (DXM)</td>
<td>Found in some cough and cold medications: Robotripping, Robo, Triple C</td>
<td>swallowed</td>
</tr>
</tbody>
</table>

**Acute Effects**
- Feelings of being separate from one's body and environment; impaired motor function

**Also, for ketamine**
- Analgesia; impaired memory; delirium; respiratory depression and arrest; death
Also, for PCP and analogs - Analgesia; psychosis; aggression; violence; slurred speech; loss of coordination; hallucinations

Also, for DXM - Euphoria; slurred speech; confusion; dizziness; distorted visual perceptions

Health Risks - Anxiety; tremors; numbness; memory loss; nausea

<table>
<thead>
<tr>
<th>Category and Name</th>
<th>Examples of Commercial and Street Names</th>
<th>How Administered*</th>
</tr>
</thead>
<tbody>
<tr>
<td>LSD</td>
<td>Lysergic acid diethylamide: acid, blotter, cubes, microdot yellow sunshine, blue heaven</td>
<td>swallowed, absorbed through mouth tissues</td>
</tr>
<tr>
<td>Mescaline</td>
<td>Buttons, cactus, mesc, peyote</td>
<td>swallowed, smoked</td>
</tr>
<tr>
<td>Psilocybin</td>
<td>Magic mushrooms, purple passion, shrooms, little smoke</td>
<td>swallowed</td>
</tr>
</tbody>
</table>

Acute Effects - Altered states of perception and feeling; hallucinations; nausea

Also, for LSD - Increased body temperature, heart rate, blood pressure; loss of appetite; sweating; sleeplessness; numbness, dizziness, weakness, tremors; impulsive behavior; rapid shifts in emotion

Also, for Mescaline - Increased body temperature, heart rate, blood pressure; loss of appetite; sweating; sleeplessness; numbness, dizziness, weakness, tremors; impulsive behavior; rapid shifts in emotion

Also, for Psilocybin - Nervousness; paranoia; panic

Health Risks, for LSD - Flashbacks, Hallucinogen Persisting Perception Disorder

<table>
<thead>
<tr>
<th>Category and Name</th>
<th>Examples of Commercial and Street Names</th>
<th>How Administered*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anabolic steroids</td>
<td>Anadrol, Oxandrin, Durabolin, Depo-Testosterone, Equipoise: roids, juice, gym candy, pumphers</td>
<td>Injected, swallowed, applied to skin</td>
</tr>
<tr>
<td>Inhalants</td>
<td>Solvents (paint thinners, gasoline, glues); gases (butane, propane, aerosol propellants, nitrous oxide); nitrites (isoamyl, isobutyl, cyclohexyl): laughing gas, poppers, snappers, whippets</td>
<td>Inhaled through nose or mouth</td>
</tr>
</tbody>
</table>

Acute Effects, for Anabolic steroids - No intoxication effects

Also, for Inhalants (varies by chemical) - Stimulation; loss of inhibition; headache; nausea or vomiting; slurred speech; loss of motor coordination; wheezing

Health Risks, for Anabolic steroids - Hypertension; blood clotting and cholesterol changes; liver cysts; hostility and aggression; acne; in adolescents—premature stoppage of growth; in males—prostate cancer, reduced sperm production, shrunken testicles, breast enlargement; in females—menstrual irregularities, development of beard and other masculine characteristics

Also, for Inhalants - Cramps; muscle weakness; depression; memory impairment; damage to cardiovascular and nervous systems; unconsciousness; sudden death

<table>
<thead>
<tr>
<th>Category and Name</th>
<th>Examples of Commercial and Street Names</th>
<th>How Administered*</th>
</tr>
</thead>
<tbody>
<tr>
<td>CNS Depressants</td>
<td>For more information on prescription medications, please visit the Commonly Abused Prescription Drug Chart</td>
<td></td>
</tr>
<tr>
<td>Stimulants</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Opioid Pain Relievers</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Notes

* Some of the health risks are directly related to the route of drug administration. For example, injection drug use can increase the risk of infection through needle contamination with staphylococci, HIV, hepatitis, and other organisms.
**Associated with sexual assaults.**

**Principles of Drug Addiction Treatment**

More than three decades of scientific research show that treatment can help drug-addicted individuals stop drug use, avoid relapse and successfully recover their lives. Based on this research, 13 fundamental principles that characterize effective drug abuse treatment have been developed. These principles are detailed in *NIDA's Principles of Drug Addiction Treatment: A Research-Based Guide*. The guide also describes different types of science-based treatments and provides answers to commonly asked questions.
C. Standards of conduct and disciplinary sanctions for students regarding alcohol and drug use

Student Conduct and Community Standards
The current Student Conduct Code can be found here:
http://studentlife.oregonstate.edu/sites/studentlife.oregonstate.edu/files/student_conduct_code_1.pdf

University Housing and Dining Policy Guide
The current student University Housing and Dining Policy Guide can be found here:
D. Standards of conduct and disciplinary sanctions for employees regarding alcohol and drug use

Oregon State University responds to cases of alcohol abuse and illegal drug activity by employees or students on a case-by-case basis. Details of each case are taken into consideration along with outcome of any legal action against the individual. Employees and students found to be in violation of the University’s drug-free campus and workplace policy may be subject to conduct or disciplinary sanctions consistent with applicable provisions of state and federal laws and University and Oregon State Board of Higher Education administrative rules. Sanctions imposed by the University can range from a warning or disciplinary action up to and including termination of employment or suspension from school. Other potential sanctions may include employment or academic probation, restrictions, attendance in an educational program, or referral to counseling or treatment. OSU employees and students who violate drug laws are subject to prosecution in the courts. Additionally, the law requires the University to report to the United States Department of Education any recipient of federal financial aid (e.g., Pell Grants, research grants) who is convicted of a drug-related crime on University property or at University events. The law also requires the University to report to federal agencies any employee convicted of violating a criminal drug statute if the employee is involved in work which is supported by that federal agency.

Oregon State University complies with the United States Drug-Free Schools and Campuses Act, the United States Drug-Free Workplace Act, Oregon Revised Statues 352.008, and OSSHE Administrative Rule 580-19-001. Annual distribution of drug-free campus and workplace information to employees and students is required by law.

For more information please visit: http://hr.oregonstate.edu/policies-procedures/employees
E. Federal and state legal sanctions

The following are Federal penalties and sanctions for Illegal Possession of a Controlled Substance. Additional penalties are imposed for trafficking.

21 U.S.C. 844(a). First conviction: Up to one year imprisonment and fined at least $1,000 but not more than $100,000, or both.

After one prior drug conviction: At least 15 days in prison, not to exceed two years and fined at least $2,500 but not more than $250,000, or both.

After two or more prior drug convictions: At least 90 days in prison, not to exceed three years and fined at least $5,000 but not more than $250,000, or both.

Special sentencing provisions for possession of crack cocaine: Mandatory at least five years in prison, not to exceed 20 years and fined up to $250,000, or both, if:

1st conviction and the amount of crack possessed exceeds five grams.
2nd crack conviction and the amount of crack possessed exceeds three grams.
3rd or subsequent crack conviction and the amount of crack possessed exceeds one gram.

21 U.S.C. 853(a)(2) and 881(a)(7). Forfeiture of personal real property used to possess or to facilitate possession of a controlled substance if that offense is punishable by more than one year imprisonment. (See special sentencing provisions re: crack.)

21 U.S.C. 881(c)(4). Forfeiture of vehicles, boats, aircraft or any other conveyance used to transport or conceal a controlled substance.

21 U.S.C. 844a. Civil fine of up to $10,000 (pending adoption of final regulations).

21 U.S.C. 853a. Denial of Federal benefits, such as student loans, grants, contracts, and professional and commercial licenses, up to one year for first offense, up to five years for second and subsequent offenses.

18 U.S.C. 922(g). Ineligible to receive or purchase a firearm.

Miscellaneous. Revocation of certain Federal licenses and benefits, e.g., pilot licenses, public housing tenancy, etc., are vested within the authorities of individual Federal agencies.

Oregon State University complies with the United States Drug-Free Schools and Campuses Act, the United States Drug-Free Workplace Act, Oregon Revised Statues 352.008, and OSSHE Administrative Rule 580-19-001. Annual distribution of drug-free campus and workplace information to employees and students is required by law.

State of Oregon Sanctions

For current information regarding Measure 91 in Oregon please visit: http://www.oregon.gov/olcc/marijuana/Pages/default.aspx

Oregon Chapter 475 — Controlled Substances; Illegal Drug Cleanup; Paraphernalia; Precursors https://www.oregonlegislature.gov/bills_laws/ors/ors475.html
Oregon Chapter 471 – Alcoholic Liquors; Controlled Substances; Drugs
https://www.oregonlegislature.gov/bills_laws/ors/ors471.html

For guide to alcohol laws and minors: