

Quarterly findings

Results presented in this report are for 151,434 individual solid dosage drug items analyzed by 22 State lab systems (100 individual State labs) and 22 local labs between July 1, 2001 and September 30, 2001.¹ Overall, 314 distinct substances were identified among the analyzed items submitted.

The results approximate drug evidence seized by law enforcement and sent to State and local forensic laboratories for analysis. Variation in local and State policy can influence when and whether drug items will be submitted to a lab and subsequently analyzed. It is also important to note that the Northeast is currently under represented among NFLIS reporting labs.

Selected drugs of interest

NFLIS provides results of drugs identified and reported by participating labs. By providing timely data on specific item analyses, the database can be instrumental in highlighting relatively uncommon but emerging drugs that are of interest to the drug control community. Drugs such as carisoprodol, hydrocodone, oxycodone, and ketamine, can be traced by their frequency of appearance in labs across the country.

Exhibit 1 shows the number of times a selected drug of interest was identified by reporting labs during the quarter.

About the System

The National Forensic Laboratory Information System (NFLIS) is a DEA-sponsored project to systematically collect solid dosage drug analyses results from state and local forensic laboratories. NFLIS provides the basis for developing information for drug control and enforcement efforts.

For more details, please see page 9.

Highlights

- The top four drugs, cannabis/THC, cocaine, heroin, and methamphetamine, accounted for 86% of analyzed items by NFLIS labs during the quarter.
- Drug types reported varied considerably across regions. For instance, 14% of drug items analyzed in the Northeast were identified as heroin compared to 4% in the South, while reported results of cocaine ranged from 37% in the South to 18% in the West.
- A critical function of NFLIS is the identification and monitoring of emerging drugs of abuse, such as hydrocodone, oxycodone, ketamine, and carisoprodol, each of which was among the "Top 25" most frequently reported drugs during the quarter.
- Among club drugs reported during the quarter, 83% were identified as 3,4 methylenedioxymethamphetamine (MDMA or Ecstasy), 10% as ketamine, 4% as MDA, and 3% as GHB/GBL.
- Analgesics, mainly hydrocodone and oxycodone, represented 2% of all analyzed items. The West continues to report the highest relative frequency of hydrocodone and the Northeast the greatest relative frequency of oxycodone.
- More than half of benzodiazepines were identified as alprazolam (e.g., Xanax) and a quarter were identified as diazepam (e.g., Valium).

Exhibit 1 Selected drugs of interest, by census region

Number of analytic results^a

Drug	Census Region				Total
	W	MW	NE	S ^b	
MDMA	180	194	222	1,259	1,855
Hydrocodone	121	123	39	932	1,215
Oxycodone	49	154	140	789	1,132
Ketamine	17	57	53	102	229
Carisoprodol	8	22	9	130	169
Methylphenidate	7	40	10	73	130
MDA	9	40	3	35	87
GHB/GBL ^c	0	9	1	48	58
Tramadol	0	4	6	15	25
4-Methoxyamphetamine	1	0	0	1	2
Dextromethorphan	0	0	1	0	1
Lysergic acid	0	0	0	1	1
Subtotal selected drugs	392	643	484	3,385	4,904
Total analyzed items					151,434

^aIncludes up to three substances per item.

^bResults for Texas State labs are for the period June 1, 2001 - August 31, 2001.

^cIncludes items identified as Gamma-Hydroxybutyric Acid and Gamma-Butyrolactone.

For example, MDMA (or Ecstasy) was identified 1,855 times, hydrocodone 1,215 times, oxycodone 1,132 times, Ketamine 229 times, and Carisoprodol 169 times. Each of these drugs were among the “Top 25” most frequently reported items for the quarter.

Club drugs

Exhibit 2 presents results for “club drugs” identified during the quarter. This classification refers to drugs used at all-night “rave” parties and at other dance clubs and bars. Multiple data sources have documented a sharp rise in club drug use since the mid-1990s, particularly among teenagers and young adults (The DAWN Report: Club Drugs, 2000; Monitoring the Future, 2000; National Household Survey on Drug Abuse [NHSDA], 1999). The increase in club drug use is alarming because persons are too often unaware that these types of drugs are harmful or addictive as drugs such as heroin (Drug Enforcement Agency, Drug Intelligence Brief: An Overview of Club Drugs, 2000).

MDMA remains the most common club drug reported by forensic labs, accounting for 83% of all club drugs reported in NFLIS during the quarter. Ketamine accounted for 10% of the analyzed club drugs, MDA for 4% and GHB/GBL for 3%. Exhibit 2a presents the distribution of the top four club drugs reported in each

region. The South and West reported the highest relative percentages of MDMA. The Midwest reported the lowest relative frequency of MDMA but the highest frequency (13%) of MDA. One in five club drugs reported in the Northeast and Midwest were identified as ketamine.

Exhibit 2

Frequency of club drugs

Number and percentage of total identified club drugs

Club Drug	Total ^a	Percentage
MDMA	1,855	82.55%
Ketamine	229	10.19%
MDA	87	3.87%
GHB/GBL ^b	58	2.58%
Flunitrazepam (Rohypnol)	9	0.40%
MDEA	7	0.31%
Paramethoxyamphetamine (PMA)	2	0.09%
Total club drugs	2,247	100%
Total analyzed items	151,434	

^aResults for Texas State labs are for the period June 1, 2001 - August 31, 2001.

^bIncludes items identified as Gamma-Hydroxybutyric Acid and Gamma-Butyrolactone.

Legend

■	MDMA
■	Ketamine
■	MDA
■	GHB/GBL ^b
■	Other

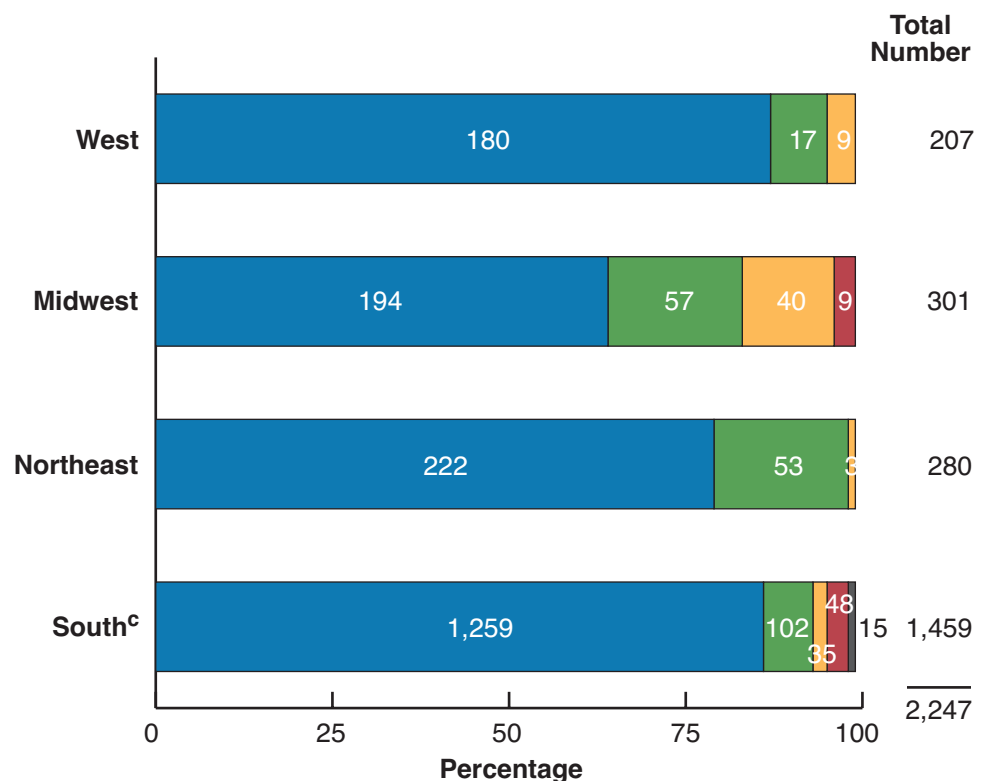
^aIn the west, one “other” type of club drug was reported, and in the northeast, one GHB/GBL and one “other” item was reported.

^bIncludes items identified as Gamma-Hydroxybutyric Acid and Gamma-Butyrolactone.

^cResults for Texas State labs are for the period June 1, 2001 - August 31, 2001.

Exhibit 2a

Distribution of club drugs by region^a

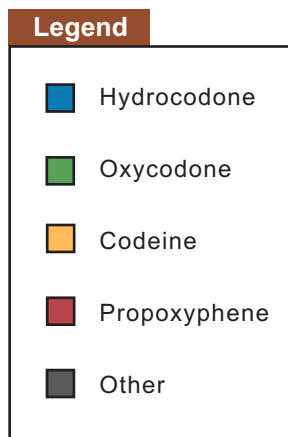


Analgesics

Exhibit 3 describes results for common pain relievers reported in the NFLIS data for the quarter. The non-medical use of analgesics is a growing problem in this country. Among prescription drugs, pain relievers had the largest number of new users in 1999, nearly 1.5 million persons, the vast majority of whom were teenagers or young adults (National Household Survey on Drug Abuse, 2000). Of particular concern is the increased diversion and abuse of Oxycodone. From 1998 to 2000, oxycodone mentions in emergency departments increased 108% according to the 2000 DAWN report.

Overall a total of 3,178 of drug items reported in NFLIS were identified as analgesics, representing 2% of all analyzed items. About 74% of analgesics were identified as either oxycodone or hydrocodone, while 8% were reported as codeine, 6% as propoxyphene, and 6% as morphine.

Regional differences existed in the specific types of analgesics reported by NFLIS-participating labs (Exhibit 3a). Oxycodone remained the most common analgesic reported in the Northeast, representing nearly two-thirds of analgesics reported. About a third of analgesics analyzed in the Midwest and South were identified as oxycodone. The West and South reported the highest relative frequency of hydrocodone, while the Midwest had the greatest relative frequency of codeine.



^aResults for Texas State labs are for the period June 1, 2001 - August 31, 2001.

Exhibit 3

Frequency of analgesics

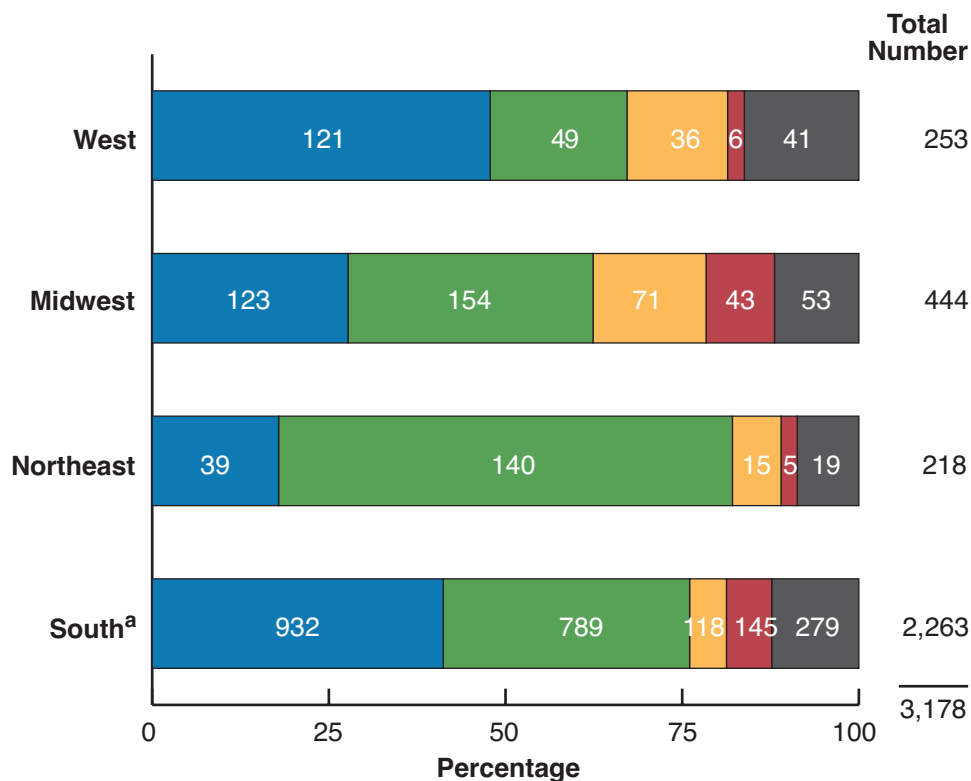
Number and percentage of total identified analgesics

Analgesic	Total ^a	Percentage
Hydrocodone	1,215	38.23%
Oxycodone	1,132	35.62%
Codeine	240	7.55%
Propoxyphene	199	6.26%
Morphine	178	5.60%
Hydromorphone	82	2.58%
Meperidine (Pethidine)	53	1.67%
Nalbuphine	35	1.10%
Tramadol	25	0.79%
Fentanyl	9	0.28%
Buprenorphine	4	0.13%
Pentazocine	4	0.13%
Butorphanol tartrate	2	0.06%
Total analgesics	3,178	100%
Total analyzed items	151,434	

^aResults for Texas State labs are for the period June 1, 2001 - August 31, 2001.

Exhibit 3a

Distribution of analgesics by region



^aResults for Texas State labs are for the period June 1, 2001 - August 31, 2001.

Benzodiazepines

Benzodiazepines, medically prescribed to treat anxiety, stress, panic attacks, and short-term sleep disorders, are among the most commonly diverted and abused pharmaceutical drug categories (NIDA, Epidemiologic Trends in Drug Abuse, 2001). According to DAWN (1999) there were more emergency department visits involving benzodiazepines (including alprazolam, clonazepam, and diazepam) than for marijuana, heroin, or cocaine.

A total of 2,768 benzodiazepines were identified in the NFLIS database during this quarter. Exhibit 4 presents the number and percentage of specific benzodiazepine items. More than half of items analyzed were identified as alprazolam (e.g., Xanax), with the greatest relative frequencies found in the Midwest and South regions (Exhibit 4a). A quarter of all benzodiazepines were identified as diazepam (e.g., Valium), with this drug representing over half of benzodiazepines reported in the West.

Exhibit 4

Frequency of benzodiazepines

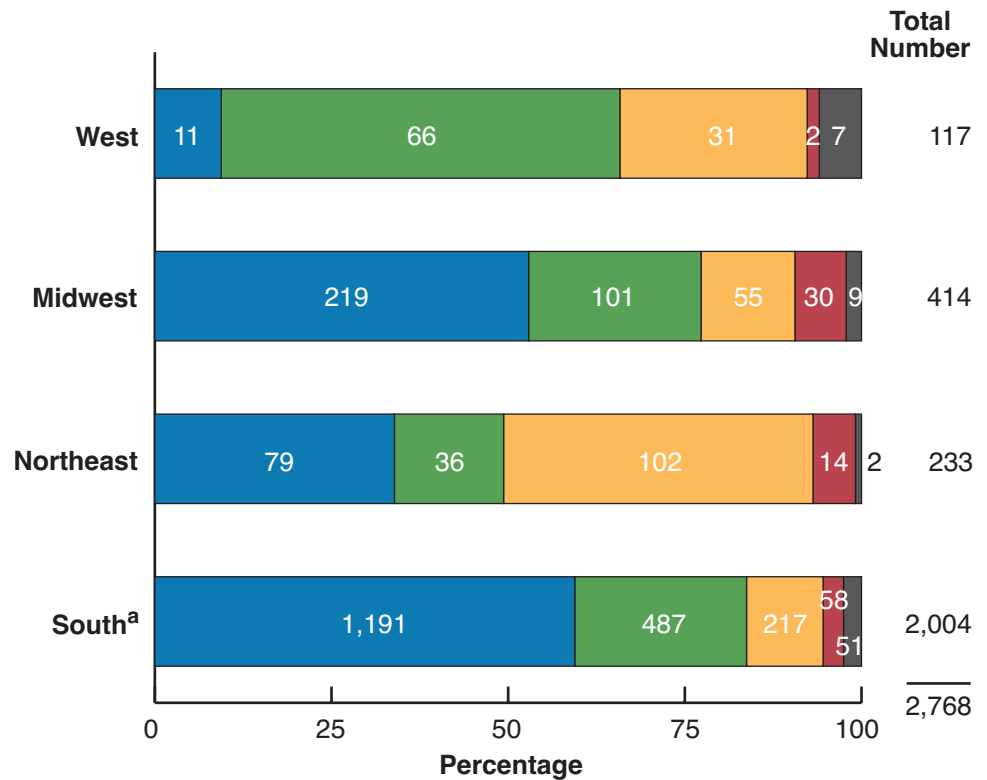
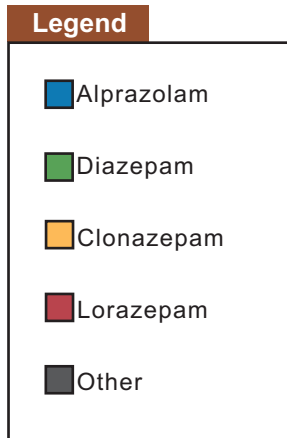
Number and percentage of total identified benzodiazepines

Benzodiazepines	Total ^a	Percentage
Alprazolam	1,500	54.19%
Diazepam	690	24.93%
Clonazepam	405	14.63%
Lorazepam	104	3.76%
Temazepam	33	1.19%
Chlordiazepoxide	17	0.61%
Triazolam	10	0.36%
Flunitrazepam	9	0.33%
Total anabolic steroids	2,768	100%
Total analyzed items	151,434	

^aResults for Texas State labs are for the period June 1, 2001 - August 31, 2001.

Exhibit 4a

Distribution of benzodiazepines by region



^aResults for Texas State labs are for the period June 1, 2001 - August 31, 2001.

Summary of results

The 25 most frequently identified substances are listed in Exhibit 5. As shown, the top four drugs comprised over 86% of all items analyzed, while the top 25 drugs comprised 94%. A number of other drugs represent the remainder of the most commonly analyzed substances, including MDMA (1.2%), alprazolam (1.0%), hydrocodone (0.8%), and oxycodone (0.7%). An additional 1,201 items (0.8%) were determined to be non-controlled non-narcotic substances.

Previously illustrated drug categories (Exhibit 1, 2, and 3) that are of special interest to law enforcement agencies are represented in Exhibit 5. Drugs from three categories of special interest to law enforcement agencies are represented in Exhibit 5. These include several categories of diverted pharmaceuticals (prescription analgesics, benzodiazepines, and muscle relaxants), as well as club drugs. Overall, four prescription analgesics were among the “Top 25” drugs reported this quarter— hydrocodone, oxycodone, codeine, and morphine. Two club drugs, MDMA and ketamine, were also among the most commonly reported drug items, while the most commonly found benzodiazepines were alprazolam, diazepam, and clonazepam. Finally, carisoprodol, a muscle relaxant, was also among the Top 25 most frequently identified drugs, representing 169 items.

Exhibit 5

25 most frequently identified drugs

Number and percentage of total analyzed items

Drug	Number	Percentage
Cannabis/THC	55,694	36.78%
Cocaine	46,471	30.69%
Methamphetamine	20,161	13.31%
Heroin	8,410	5.55%
MDMA	1,855	1.22%
Alprazolam	1,500	0.99%
Hydrocodone	1,215	0.80%
Non-controlled non-narcotic drug	1,201	0.79%
Oxycodone	1,132	0.75%
Diazepam	690	0.46%
Pseudoephedrine	608	0.40%
Clonazepam	405	0.27%
Amphetamine	376	0.25%
Phencyclidine	309	0.20%
Codeine	240	0.16%
Ketamine	229	0.15%
Psilocin	219	0.14%
Propoxyphene	199	0.13%
Lysergic Acid Diethylamide	193	0.13%
Morphine	178	0.12%
Methadone	173	0.11%
Ephedrine	170	0.11%
Carisoprodol	169	0.11%
Acetaminophen	158	0.10%
Phosphorus	151	0.10%
Total	142,106	93.84%
Total analyzed items	151,434	

Legend

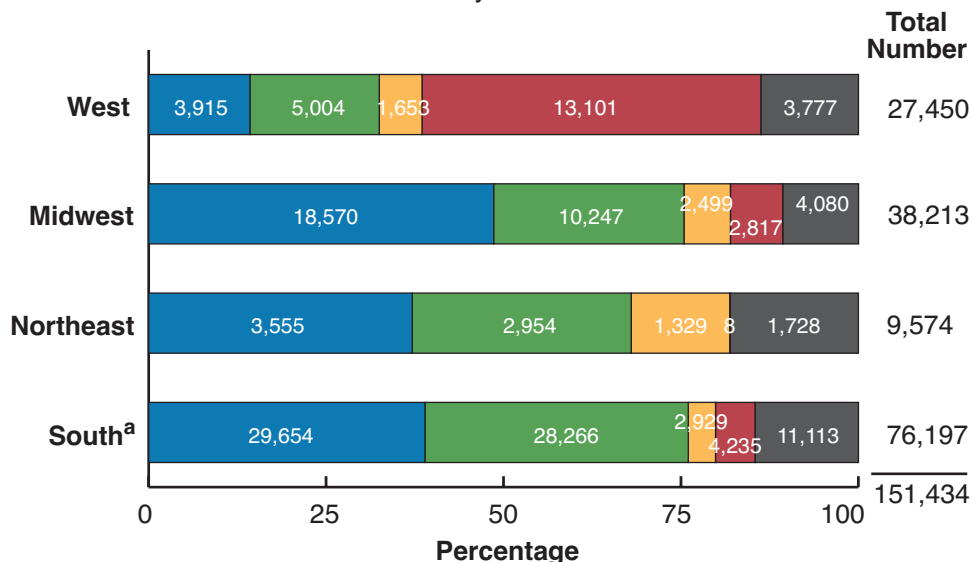
- Cannabis
- Cocaine
- Heroin
- Methamphetamine
- Other

^aResults for Texas State labs are for the period June 1, 2001 - August 31, 2001.

Exhibit 5a

Distribution of drug results by region

Number of total analyzed items



Major drug categories by region

Regional variation exists across drug categories identified by NFLIS labs, although some caution should be used when interpreting these results. For instance, some labs in the West do not routinely analyze suspected cannabis, therefore the number of reported cannabis items in the West may not be representa-

tive of cannabis seizures for that region. Nationally, 37% of drug items analyzed by NFLIS labs were identified as cannabis/THC (Exhibit 6). Nearly half of items reported in the Midwest were identified as cannabis/THC (49%) as were over a third of items in the Northeast and South (37% and 39% respectively).

Stimulants, mainly methamphetamine, were the most prevalent drug identified in Western labs representing 48% of items

reported. In the Midwest, the relative frequency of stimulants (8%) has been steadily increasing over the past several quarters. The prevalence of heroin varies substantially across regions, ranging from 14% of items in the Northeast to 4% in the South. The relative percentage of cocaine ranges from 37% in the South to 18% in the West. No substance was identified in over 4% of all items.

Exhibit 6 Frequency of analyzed items, by census region and drug category

Number and percentage of total analyzed items

Drug Category	Census Region				Total
	West	Midwest	Northeast	South ^a	
Marijuana/THC^b	3,915	18,570	3,555	29,654	55,694
	(14.26%)	(48.60%)	(37.13%)	(38.92%)	(36.78%)
Cocaine	5,004	10,247	2,955	28,266	46,472
	(18.23%)	(26.82%)	(30.86%)	(37.10%)	(30.69%)
Stimulants	13,220	2,940	47	4,619	20,826
	(48.16%)	(7.69%)	(0.49%)	(6.06%)	(13.75%)
Heroin	1,653	2,499	1,329	2,929	8,410
	(6.02%)	(6.54%)	(13.88%)	(3.84%)	(5.55%)
No substance identified	1,583	1,184	399	3,254	6,420
	(5.77%)	(3.10%)	(4.17%)	(4.27%)	(4.24%)
Other substances	1,341	1,301	486	1,422	4,550
	(4.89%)	(3.40%)	(5.08%)	(1.86%)	(3.00%)
Narcotics	273	581	236	2,345	4,435
	(0.99%)	(1.52%)	(2.47%)	(3.08%)	(2.27%)
Depressants/tranquilizers	127	443	259	2,118	2,947
	(0.46%)	(1.16%)	(2.71%)	(2.78%)	(1.95%)
Hallucinogens	334	448	308	1,590	2,680
	(1.22%)	(1.17%)	(3.22%)	(2.09%)	(1.77%)
Total	27,450	38,213	9,574	76,197	151,432
	(100%)	(100%)	(100%)	(100%)	(100%)

^aResults for Texas State labs are for the period June 1, 2001 - August 31, 2001.

^bIncludes items identified as "Cannabis with Phencyclidine (PCP)."

NFLIS Interactive Data Site Access

In January 2001, the NFLIS Interactive Data Site (IDS) was made available to all NFLIS labs. The IDS allows these labs to run parameterized queries against the NFLIS database. Labs can run queries for their own data at the individual case level and can also calculate aggregate regional and national results. Generally, labs will not have access to other labs' individual data. However, multiple labs within a State system, such as the Illinois State Police labs, will have access to each others data consistent with policies set by the headquarters lab. Enlisted NFLIS labs that have not begun submitting data files are limited to regional and national-level queries.

The IDS is implemented as a secure web site located on a restricted server that is accessible only through a direct dial-in connection. RTI provides a toll-free telephone number for participating labs to use. The IDS system is not presently accessible via the Internet. To access it, lab staff must dial into the NFLIS server directly and then use either Netscape or Internet Explorer to view the IDS. Each participating lab is provided with a lab-specific user-name and password as well as detailed instruction on how to use the IDS.

The IDS provides the capacity to query the data using standardized queries that generate customized reports. Lab staff can specify the time period, region, type of lab, and drug

type in order to customize these queries. For example, Exhibit 7 is a screen shot of an IDS query that can be used to generate a table of specific drug counts by lab type, lab region, and specific drug(s) of interest.²

The IDS is continually being improved and developed. While the system is fully operational, new query options and other features will continue to be added over the next several months. Participating labs are encouraged to submit suggestions for improvement by using the feedback page in the IDS, by sending an e-mail to NFLIS@rti.org, or by calling Al Bethke at (919) 485-7737.

Exhibit 7 A parameterized IDS query

The screenshot shows the NFLIS Interactive Data Site (IDS) interface in Microsoft Internet Explorer. The page title is "National Forensic Laboratory Information System - Microsoft Internet Explorer". The main content area is titled "Specific Drug Counts" and includes a "Show Me Detailed Instructions" button. The interface is divided into five numbered steps for configuring a query:

- 1. Specify Time Period:** Includes radio buttons for "Submission Date" and "Completion Date". The "Completion Date" is selected. The "Start Date" is set to July 2001 and the "End Date" is set to September 2001.
- 2. Select Labs by Type and Region OR Select Specific Labs:** Includes radio buttons for "State Labs", "Local/Regional Labs", and "Both Types of Labs". The "State Labs" option is selected. Below are radio buttons for regions: "Northeast", "Midwest", "South", "West", and "All Regions". The "South" region is selected. To the right, there are two lists: "Labs to select from" (IL ISP Carbondale, IL ISP Chicago, IL ISP Joliet, IL ISP Metro East, IL ISP Morton, IL ISP Rockford) and "Selected Labs" (empty).
- 3. Select Substances:** Includes two lists: "Substances to select from" (modafinil, monoacetylmorphine, montelukast sodium, morphine, morphine acetate, morphine sulfate) and "Selected Substances" (codeine, dextromethorphan, hydrocodone, hydromorphone, morphine). The "morphine" substance is selected in both lists.
- 4. Select Count Type:** Includes radio buttons for "by Item" and "by Case". The "by Item" option is selected.
- 5. Run the Query:** A button to execute the query.

The left sidebar contains a "Database Queries" menu with links to Home, Database Characteristics, 25 Most Frequently Identified Drugs, Drug Categories, DEA Drugs of Interest, Specific Drug Counts, Select Data Records, Drug Table, and Feedback. The bottom status bar shows "Done" and "Internet".

Benefits & Limitations of NFLIS data

Benefits

The systematic collection and analysis of solid dosage drug analysis data can improve our understanding of the changes and trends in the Nation's illegal drug problem. The information system can also be a major resource for supporting drug enforcement and drug policy initiatives both nationally and in specific communities around the country. The DEA, the Office of National Drug Control Policy (ONDCP), and other Federal agencies will be served by the NFLIS database. The data can also benefit State, regional, and local task forces as well as single-agency operations. NFLIS will help the drug control community achieve its mission by:

- highlighting the extent and variations of controlled substances over time and across geographic areas,
- improving access to recent estimates of drug availability by local, State, and national agencies,
- identifying emerging drug problems in a timely fashion, and
- providing current information about the diversion of licit drugs into illicit channels.

NFLIS provides an opportunity for State and local labs to participate in a useful and high visibility initiative. Participating labs receive regular reports that summarize data from their specific labs, as well

as national and regional data. Labs also have access to the NFLIS database that provides critical information about local, regional, and national trends in drug seizures, purchases, and recoveries by law enforcement agencies. Participating labs are also able to run customized queries on their own data, a feature useful for managing current workloads and for planning future needs.

Limitations

NFLIS has limitations that must be considered when interpreting findings generated from the database:

- NFLIS includes results from completed lab analyses only. Evidence secured by law enforcement but not analyzed is not included in the system.
- The absolute and relative frequency of analyzed results for individual drugs is in part a function of labs participating in NFLIS, as well as State and local policies that relate to the enforcement and prosecution of specific drugs. For example, California labs dominate the current data in the West and the vast majority of California law enforcement agencies do not actively prosecute misdemeanor cannabis charges. As a result, the frequency of reported cannabis items are almost certainly lower than they would be if policies were similar to most States in other regions.

- Lab policies and procedures for handling drug evidence vary. Some labs analyze all evidence submitted, while others analyze only selected items. For example, a lab may analyze only the items that are likely to contain substances associated with higher legal penalties (e.g., cocaine versus marijuana).
- Labs vary with respect to the records they maintain. For example, some labs' automated records include the weight of the sample selected for analysis (e.g., the weight of one of five bags of powder), while others record total weight.
- Currently, NFLIS includes only State and local labs. Drug analyses conducted by Federal forensic labs are not included.
- The type of evidence submitted for analysis is affected by differing law enforcement strategies for targeting specific types of drug trafficking.

In the coming months, special studies will be conducted that will enable us to better characterize our findings. Information from these studies will enhance our ability to link the reported analytical findings with the true scope of the Nation's illegal drug markets.

Behind the data

RTI, under contract to the DEA, began the planning, design, and implementation of NFLIS in September 1997. A survey of 308 State and local forensic labs conducted in mid-1998 identified 276 individual labs that routinely perform solid dosage drug analyses.* Results from the survey and information from other sources were used to establish a sampling frame to identify the State lab systems and local labs that make up the NFLIS sample.

Thirty-one State lab systems and 31 local labs were sampled by NFLIS. These State systems and local labs include 165 individual labs that analyzed more than 1 million items in 1997. Some labs were considered to be important for strategic reasons, such as geographic location or caseload size, and were included in the sample with certainty. Other labs were randomly selected to generate a sample that will be used to make national and regional estimates. Geographic region, type of lab (State lab system or local lab), and estimated annual drug caseload were used in establishing the sample and sample weights. Enlistment of labs for NFLIS began in 1998 and efforts to secure participation agreements (memoranda of understanding) are ongoing. The DEA and RTI provide modest assistance to labs to facilitate their participation in NFLIS. This includes computer

hardware and software as well as the design and implementation of basic lab information systems (LIMS) for use in establishing automated drug analysis databases.

As of December 2001, 49 of the 62 sampled State lab systems and local labs (a total of 138 individual labs) had signed formal agreements to participate in NFLIS. Of the remaining sampled labs, some are in the process of upgrading their LIMS or require another specific data entry system to facilitate their reporting to NFLIS.

In addition to the sampled labs, other labs have volunteered to contribute data to NFLIS. To date, 18 non-sampled labs have agreed to participate. Because these labs are not part of the NFLIS sample, their data will not be used to generate national and regional estimates. However, these labs represent an initial step toward the ultimate goal of including data from all State and local forensic labs that conduct solid dosage drug analyses. In some cases, these additional participants will provide NFLIS with the results of all drug analyses conducted in some States, adding to the ability of the system to report on drug analyses at the State and local levels. Data from these additional participants will be included in NFLIS analyses and reports, as appropriate.

The following table presents an overview of the anticipated and current coverage of NFLIS. As shown, 49 of the State lab sys-

tems and local labs (together totaling 130 individual labs) that have joined NFLIS have begun to regularly report their drug analyses data. These reporting labs represent an annual caseload of more than 600,000 cases. Once a sufficient number of sampled labs is reporting regularly, statistically representative national estimates will be generated and reported.

The core NFLIS data elements include lab case number (or other identifier), submission number, lab item/exhibit number, date case was received, location of submitting agency, form of item/exhibit (e.g., powder), total quantity of item/exhibit, date case was completed or reported, and substance(s) identified. Optional NFLIS data elements include name of the submitting agency, submitting agency case number, how the evidence was acquired (e.g., seized, purchased), origin of drug (legal or illegal manufacturer), unique packaging or markings, drug purity, secondary active drugs (adulterants) or diluents, and non-controlled substance(s) identified. The data are reported to NFLIS, recoded, reformatted into a standard format, validated and edited as necessary, and stored in a database.

**1998 Survey of State and Local Forensic Laboratories, Research Triangle Institute, August 1999.*

Planned and current NFLIS coverage, by census region^a

State Lab Systems	West		Midwest		Northeast		South		Total	
	No.	Caseload ^b	No.	Caseload	No.	Caseload	No.	Caseload	No.	Caseload
Sampling Frame ^c	10	99,300	13	169,300	10	104,300	16	355,200	49	728,100
Sample ^d	6	85,500	6	136,472	6	83,536	13	298,641	31	604,149
Enlisted ^e										
Sampled	4	65,400	6	136,472	3	41,033	12	301,599	25 ^g	544,504
Non-Sampled	4	10,542	0	0	1	550	0	0	5	11,092
Reporting ^f										
Sampled	3	62,500	6	136,472	3	41,033	9	243,784	21 ^h	483,789
Non-Sampled	1	1,700	0	0	1	550	0	0	2	2,250
Local Labs										
Sampling Frame ^c	34	152,800	31	120,300	19	216,300	32	163,900	116	653,300
Sample ^d	9	93,745	8	51,672	6	172,031	9	90,353	31	407,801
Enlisted ^e										
Sampled	6	66,735	6	28,210	5	32,031	7	68,846	24	195,822
Non-Sampled	2	5,500	4	18,600	2	15,650	5	18,801	13	58,551
Reporting ^f										
Sampled	4	26,217	5	25,010	5	32,031	6	65,401	20	148,659
Non-Sampled	0	0	2	8,700	2	15,650	2	5,738	6	30,088

^a The overall NFLIS sample is being expanded to include all State Lab systems and approximately 55 local municipal labs.

^b Estimated 1997 caseloads derived from the 1998 Survey of State and Local Forensic Laboratories, Research Triangle Institute, August 1999.

^c Total number of identified State lab systems and local labs that perform solid dosage drug analyses.

^d A statistical sample of State lab systems and local labs that will allow for regional and national estimates of drug analyses results.

^e Sampled and non-sampled State lab systems and local labs that have signed memoranda of understanding agreeing to regularly contribute data to NFLIS, as of December 2001.

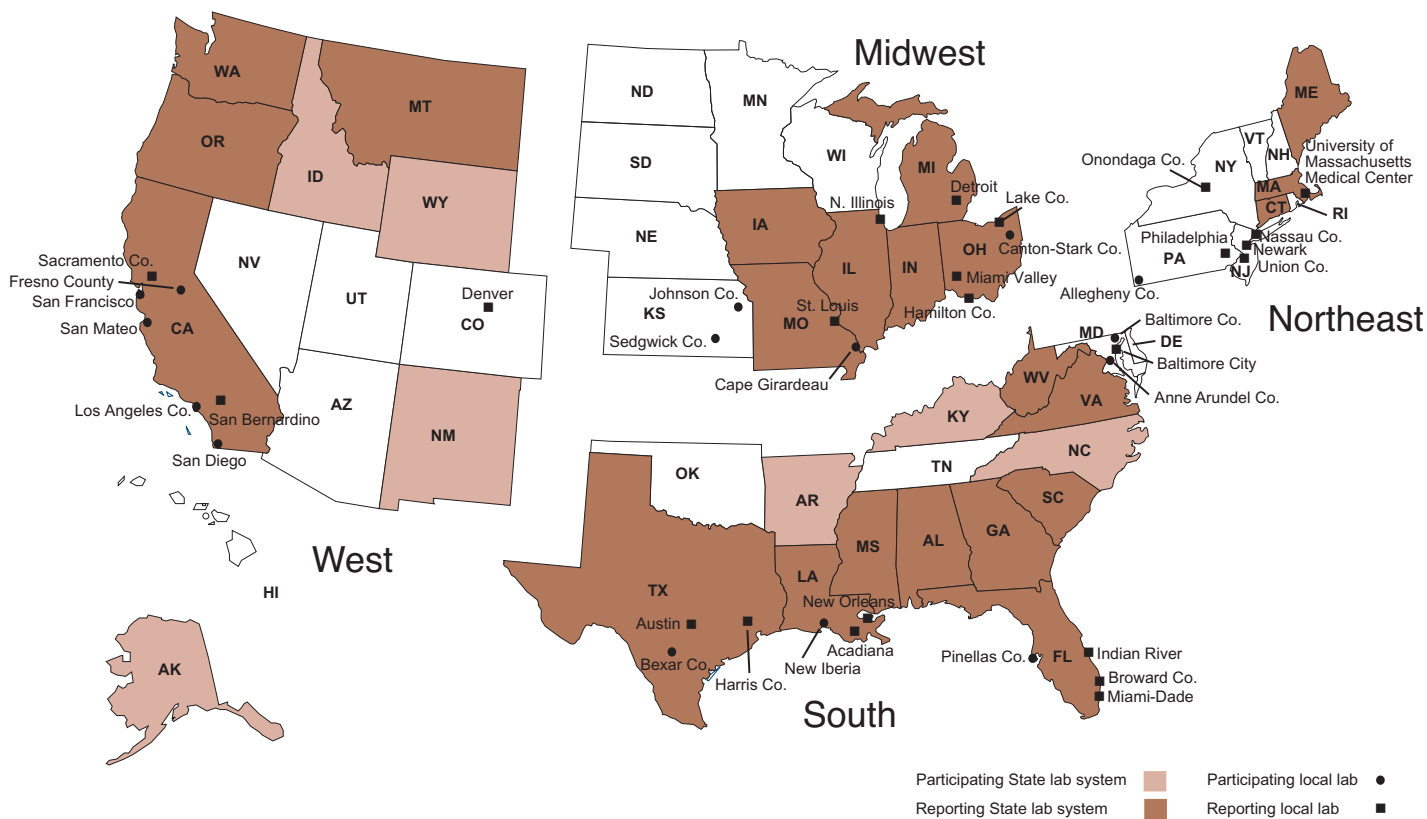
^f Sampled and non-sampled State lab systems and local labs that submitted data for at least part of the third quarter of 2001.

^g These enlisted State lab systems represent 113 individual labs.

^h These reporting State lab systems represent 102 individual labs.

Appendix

Participating labs, by census region



This quarterly report summarizes data reported by 22 State labs (100 individual State labs) and 22 local labs from July 1, 2001 to September 30, 2001 (due to technical and/or other reporting issues a few labs listed as reporting on pg.9 were unable to contribute data for this report). A number of additional labs and lab systems have formally joined NFLIS and are considered “participating” in the program but have not yet begun to report solid dosage drug analysis data on a regular basis. RTI is working with

all of these enlisted labs towards various lab information system solutions to ensure that reporting can begin as soon as possible. Overall, 30 State labs systems and 37 local labs had formally joined NFLIS and agreed to regularly report data to the system as of yearend 2001. State and local labs reporting data for this report as well as labs that had formally agreed to participate as of 2001 are identified in the map above.

The State lab systems and local labs that have begun regular NFLIS reporting do not necessarily reflect the trends

of their respective regions or the Nation. Although the data represent all analyses submitted to NFLIS by the reporting labs for the quarter, extrapolation from these data to national or regional estimates is not currently possible. Statistically representative national and regional estimates of drug analysis results are expected to be available by mid-2002, when a sufficient number of labs are regularly reporting their data.

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Notes

¹ Results were received for 160,215 items, including 8,643 for which the result was “No Analysis” and 138 for which the result was “Non-Drug Evidence”; these items were excluded from the analyses reported in this report. Some items may include multiple substances. Unless otherwise specified, the results reported here are for the first substance identified in an item.

² Data in this report will not match comparable data that are run using the IDS because the database has expanded since the report was prepared and because special arrangements were made for the data used in the report for one State system.

Participating NFLIS State lab systems (sampled and non-sampled)

As of December 2001

State	State System Name
AK	Alaska DPS Crime Detection Lab (Anchorage)
AL	Alabama Department of Forensic Sciences (9 sites)
AR	Arkansas State Crime Laboratory (Little Rock)
CA	California Department of Justice Bureau of Forensic Services (10 sites)
CT	Connecticut Department of Public Safety Controlled Substances/Toxicology Laboratory (Hartford)
FL	Florida Department of Law Enforcement (7 sites)
GA	Georgia State Bureau of Investigation Forensic Sciences Division (7 sites)
IA	Iowa Division of Criminal Investigation Laboratory (Des Moines)
ID	Idaho State Police Forensic Services (3 sites)
IL	Illinois State Police Division of Forensic Services (8 sites)
IN	Indiana State Police Laboratory (4 sites)
KY	Kentucky State Police Central Lab (6 sites)
LA	Louisiana State Police Crime Laboratory (Baton Rouge)
MA	Massachusetts Department of Public Health Drug Analysis Laboratory (2 sites)
MA	Massachusetts Department of State Police Crime Laboratory (Sudbury)
ME	Maine Department of Human Services Laboratory (Augusta)
MI	Michigan Department of State Police Forensic Science Division (7 sites)
MO	Missouri State Highway Patrol Crime Laboratory Division (6 sites)
MS	Mississippi Department of Public Safety Crime Laboratory (4 sites)
MT	Montana State Forensic Science Division Laboratory (1 site)
NC	North Carolina State Bureau of Investigation Crime Laboratory (2 sites)
NM	New Mexico Department of Public Safety Crime Laboratory (2 sites)
OH	Ohio State Highway Patrol (Columbus)
OR	Oregon State Police Forensic Services Division (8 sites)
SC	South Carolina Law Enforcement Division Crime Laboratory (Columbia)
TX	Texas Department of Public Safety Crime Laboratory Service (13 sites)
VA	Virginia Division of Forensic Sciences (4 sites)
WA	Washington State Patrol Forensic Laboratory Services Bureau (6 sites)
WV	West Virginia State Police Forensic Laboratory (South Charleston)
WY	Wyoming State Crime Laboratory (Cheyenne)

Participating NFLIS local labs (sampled and non-sampled)

As of December 2001

State	Lab Name
CA	Fresno County Sheriff's Forensic Lab (Fresno)
CA	Los Angeles County Sheriffs Department (Downey)
CA	Sacramento County Laboratory of Forensic Services (Sacramento)
CA	San Bernardino Sheriffs Office (San Bernardino)
CA	San Diego Police Department Crime Laboratory (San Diego)
CA	San Francisco Police Department Crime Laboratory (San Francisco)
CA	San Mateo County Sheriffs Forensic Laboratory (San Mateo)
CO	Denver Police Department Crime Laboratory Bureau (Denver)
FL	Broward County Sheriffs Crime Laboratory (Ft. Lauderdale)
FL	Regional Crime Laboratory at Indian River Community College (Ft. Pierce)
FL	Miami-Dade Police Department Crime Laboratory Bureau (Miami)
FL	Pinellas County Forensic Laboratory (Largo)
IL	Northern Illinois Police Crime Lab (Chicago)
KS	Johnson County Crime Laboratory (Mission)
KS	Sedgwick County Regional Forensic Science Center (Wichita)
LA	Acadiana Criminalistics Laboratory (New Iberia)
LA	New Orleans Department of Police Scientific Criminal Investigations Division (New Orleans)
MA	University of Massachusetts Medical Center Drugs of Abuse Laboratory (Worcester)
MD	Anne Arundel County Police Crime Laboratory (Millersville)
MD	Baltimore City Police Crime Laboratory (Baltimore)
MD	Baltimore County Police Department Forensic Investigation Division (Towson)
MI	Detroit Police Department Crime Laboratory (Detroit)
MO	St. Louis Police Department Crime Laboratory (St. Louis)
MO	South East Missouri Regional Crime Lab (Cape Girardeau)
NJ	Newark Department of Police Forensic Laboratory (Newark)
NJ	Union County Prosecutors Office Laboratory (Westfield)
NY	Nassau County Police Department Scientific Investigation Bureau (Mineola)
NY	Onondaga County Center for Forensic Sciences (Syracuse)
OH	Canton-Stark Co. Crime Lab (Canton)
OH	Hamilton County Coroners Laboratory (Cincinnati)
OH	Lake County Regional Forensic Laboratory (Painesville)
OH	Miami Valley Regional Crime Laboratory (Dayton)
PA	Allegheny County Division of Laboratories (Pittsburgh)
PA	Philadelphia Police Department Crime Laboratory (Philadelphia)
TX	Austin Police Department Crime Laboratory (Austin)
TX	Bexar County Forensic Science Center Criminal Investigation Laboratory (San Antonio)
TX	Harris County Medical Examiner Office (Houston)

Contact us

For more information on NFLIS or to become a participating lab, please use the following contact information.

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