

# *Substance Use and Criminality in Nevada: A 2016-2023 Analysis*

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# Table of Contents

|  |    |
|--|----|
| Acknowledgements.....  | 2  |
| Table of Contents .....  | 3  |
| Introduction .....   | 4  |
| Background .....   | 4  |
| Prevalence of Substance Use Disorder in the National Incarcerated Population .....   | 4  |
| <i>Figure 1. State Prisoners and Sentenced Jail Inmates Who Had Ever Used or Regularly Used Drugs, by Drug Type, 2002, 2004 and 2007-2009.....</i> | 5  |
| <i>Figure 2: Criminal Justice Involvement by Level of Opioid Use in the United States, 2015-2016.....</i>  | 6  |
| Risk Factors and Consequences of Opioid Use Disorder (OUD) in Prison.....  | 6  |
| Co-occurrence of Substance Use and Mental Illness.....   | 7  |
| Response of the Criminal Justice System.....   | 8  |
| Nevada Specific Methodology .....  | 8  |
| Part 1: Criminal History Repository.....   | 9  |
| Part 2: State Forensic Facilities.....   | 9  |
| Results.....   | 9  |
| Part 1: Criminal History Repository.....   | 9  |
| <i>Table 1. Substance Related Arrest and Conviction Charges in Nevada, 2016-2023 .....</i>   | 10 |
| <i>Table 2. Individuals Arrested and Convicted for Drug Related Charges in Nevada, 2016-2023 .....</i>   | 11 |
| <i>Table 3. Felony Drug Convictions in Nevada, 2016-2023 .....</i>   | 11 |
| Part 2: State Forensic Facilities.....   | 12 |
| Current Self-Reported Opioid Use in Forensic Patients .....  | 12 |
| <i>Figure 3. Histogram of Drug Use in Nevada Across all Fiscal Years 2021-2023 .....</i>   | 13 |
| <i>Table 4. Rates of Self-Disclosed Opioid Use in Nevada by Fiscal Year, 2021-2023 .....</i>   | 13 |
| <i>Table 5. Rates of Self-Disclosed Drug Use in Nevada by Fiscal Year, 2021-2023 .....</i>   | 14 |
| Beyond Self Reporting: Additional Analysis to Determine Substance Use in Forensic Patients ....  | 14 |
| <i>Table 6. Forensic Clients with a PDMP Record .....</i>  | 14 |
| <i>Table 7. Forensic Clients with a Drug Related Arrest.....</i>   | 15 |
| Conclusion.....  | 15 |
| References.....  | 17 |
| Appendix .....   | 20 |

## Introduction

Understanding the link between opioid use and criminal behavior is critical for criminal justice and public health initiatives, highlighting the societal impacts of opioid abuse and its contribution to criminal activities. In the first part of this analysis, Nevada's statewide Criminal History Repository was used to understand how substance use, including but not limited to opiates, among individuals in the Nevada criminal justice system from 2016 to 2023 influenced criminal behavior. By analyzing data on drug-related arrests and convictions, the study explores the relationship between substance use and crime, aiming to inform interventions and policies that reduce drug-related criminality and improve public safety and health outcomes. Part two of this study investigates drug use specifically among forensic patients at State-ran forensic hospitals from fiscal years 2021 to 2023. The study contextualizes these findings within the broader national drug crisis, noting the significantly higher substance-use rates among people on parole or probation compared to the general population, and the critical role of Opioid Use Disorder (OUD) medications in reducing mortality and recidivism post-incarceration. By examining self-reported data alongside national trends in substance use, crime, and incarceration, the research underscores the urgent need for comprehensive treatment strategies and policy reforms to address drug use within forensic populations.

Since prevalence rates of specific illicit substances in the forensic population can vary by substance type, and because polysubstance use is common, it is more meaningful to consider indiscriminate substance use rather than a narrow focus on one substance to adequately capture the challenges of this population. According to the U.S. Drug Enforcement Administration, synthetic opioids like fentanyl are increasingly being mixed with other illicit drugs such as heroin, methamphetamine, and cocaine to increase the potency of the drug with a less expensive counterpart. These drugs are also often then sold as pills, powders and/or nasal sprays which are made to look like legitimate prescription opioids.

## Background

### Prevalence of Substance Use Disorder in the National Incarcerated Population

The overlap of substance use disorders and incarceration continues to be a significant national issue. Various studies have been conducted to better understand how pervasive substance use is among the incarcerated population, and while the exact findings vary between studies, they all demonstrate a strong correlation between drug use and incarceration.

According to the National Institute on Drug Abuse (NIDA) approximately 65% of the incarcerated population is diagnosed with a substance use disorder, while an additional 20% were under the influence of drugs or alcohol at the time of their crime, suggesting that a staggering 85% of inmates have been affected by substance use or related disorders (NIDA, 2021).

A 2020 study conducted by the Bureau of Justice Statistics (BJS) found that 71.6% of state prisoners regularly used drugs, that drug offenses account for 46% of incarcerations, and that 53% of inmates reported drug use in the month prior to their offense (BJS, 2020). A breakdown of the findings of this report by drug are displayed in the table below.

**Figure 1. State Prisoners and Sentenced Jail Inmates Who Had Ever Used or Regularly Used Drugs, by Drug Type, 2002, 2004 and 2007-2009**

| Type of drug                      | State prisoners  |                  | Sentenced jail inmates |                |
|-----------------------------------|------------------|------------------|------------------------|----------------|
|                                   | 2004*            | 2007-2009        | 2002*                  | 2007-2009      |
| <b>Ever used</b>                  |                  |                  |                        |                |
| Any drug <sup>a</sup>             | 83.2%            | 81.4%**          | 84.5%                  | 83.5%          |
| Marijuana/hashish                 | 77.6             | 76.6             | 77.7                   | 78.1           |
| Cocaine/crack                     | 46.8             | 47.3             | 50.5                   | 51.5           |
| Heroin/opiates                    | 23.2             | 26.4**           | 21.2                   | 28.2**         |
| Depressants <sup>b</sup>          | 21.3             | 30.4**           | 22.1                   | 34.1**         |
| Stimulants <sup>c</sup>           | 28.5             | 32.4**           | 28.9                   | 34.1**         |
| Methamphetamine                   | 23.4             | 26.1             | 23.9                   | 28.7**         |
| Hallucinogens <sup>d</sup>        | 32.6             | 41.7**           | 34.0                   | 46.2**         |
| Inhalants                         | 13.6             | 16.9**           | 13.2                   | 16.9**         |
| <b>Regularly used<sup>e</sup></b> |                  |                  |                        |                |
| Any drug <sup>a</sup>             | 69.2%            | 71.6%**          | 70.5%                  | 74.9%**        |
| Marijuana/hashish                 | 59.0             | 62.7**           | 59.3                   | 64.4**         |
| Cocaine/crack                     | 30.0             | 34.2**           | 32.4                   | 38.5**         |
| Heroin/opiates                    | 13.0             | 16.6**           | 12.2                   | 18.9**         |
| Depressants <sup>b</sup>          | 9.9              | 18.3**           | 11.0                   | 20.8**         |
| Stimulants <sup>c</sup>           | 17.9             | 23.4**           | 18.1                   | 23.9**         |
| Methamphetamine                   | 14.9             | 19.2**           | 14.8                   | 19.8**         |
| Hallucinogens <sup>d</sup>        | 13.3             | 21.7**           | 13.9                   | 22.5**         |
| Inhalants                         | 4.5              | 6.0**            | 4.3                    | 5.0            |
| <b>Total count</b>                | <b>1,226,200</b> | <b>1,265,400</b> | <b>444,500</b>         | <b>375,700</b> |

Note: Detail sums to more than total because person may have used more than one type of drug. See appendix table 6 for standard errors.

\*Comparison group.

\*\*Difference with comparison group is significant at the 95% confidence level.

<sup>a</sup>Includes other unspecified drugs.

<sup>b</sup>Includes barbiturates, tranquilizers, and Quaaludes.

<sup>c</sup>Includes amphetamines and methamphetamine.

<sup>d</sup>Includes LSD, PCP, and ecstasy.

<sup>e</sup>Used drugs at least once a week for at least a month.

Source: Bureau of Justice Statistics, National Inmate Surveys, 2007 and 2008-09; Survey of Inmates in Local Jails, 2002; and Survey of Inmates in State Correctional Facilities, 2004.

Source: Bureau of Justice Statistics. "Drug Use, Dependence, and Abuse Among State Prisoners and Jail Inmates, 2007-2009." 2020.

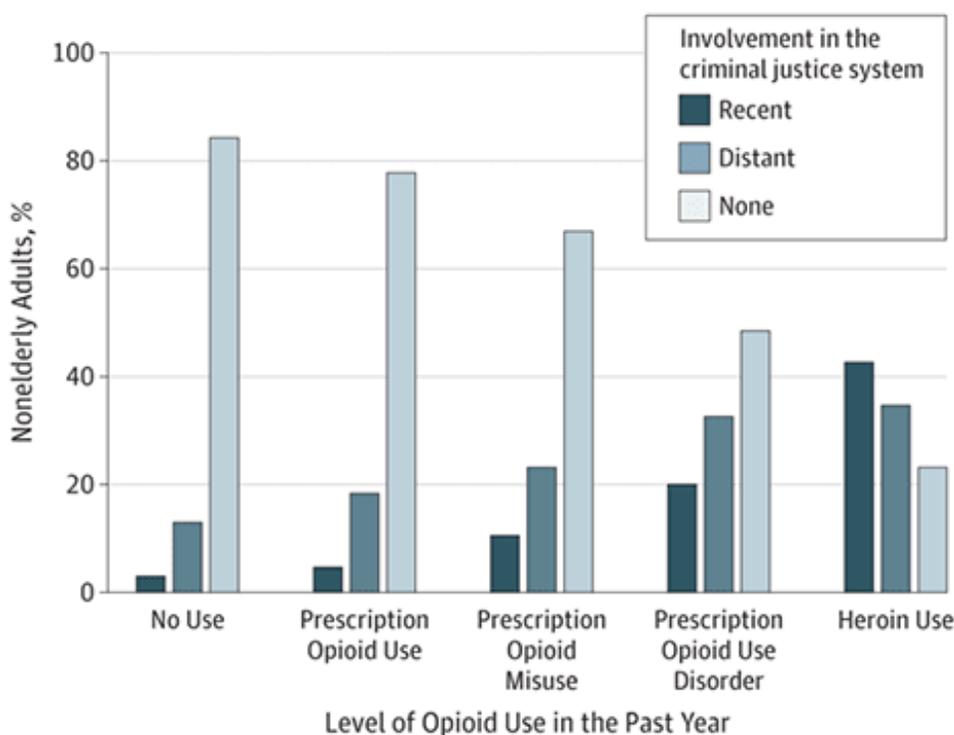
Each year over 200,000 people with a heroin use disorder are incarcerated nationally, a figure constituting 24-36% of the incarcerated population (Boutwell et al., 2007; Bronson et al., 2017; Legal Action Center, 2011). The BJS report mentioned above found that from 2007-2009, 26.4% of state prisoners reported ever having used heroin/opiates, and 16.6% reported regularly using heroin/opiates (BJS, 2020). The Substance Abuse and Mental Health Services Administration (SAMHSA) reports similarly, that approximately 17% of people incarcerated in state prisons and 19% of people incarcerated in jails report

regular opioid use. Further, according to a study published by Jama Network Open (2018), history of involvement in the criminal justice system increased as intensity of opioid use increased:

- no use, 15.9% [19,562,158 of 123,319,911]; 95% CI, 15.4%-16.4%
- prescription opioid use, 22.4% [13,712,162 of 61,204,541]; 95% CI, 21.7%-23.1%
- prescription opioid misuse, 33.2% [2,793,391 of 8,410,638]; 95% CI, 30.9%-35.6%
- prescription opioid use disorder, 51.7% [762,189 of 1,473,552]; 95% CI, 45.4%-58.0%; and
- heroin use, 76.8% [668,453 of 870,250]; 95% CI, 70.6%-82.1%)

The graph below shows criminal justice involvement by level of opioid use in the United States using 2015-2016 data and illustrates the strong correlation between the two.

**Figure 2: Criminal Justice Involvement by Level of Opioid Use in the United States, 2015-2016**



*Note: Recent involvement in the criminal justice system refers to involvement within the past 12 months. Distant involvement in the criminal justice system refers to involvement within an individual's lifetime but not within the past 12 months.*

Source: JAMA Network Open. 2018;1(3):e180558. Doi:10.1001/jamanetworkopen.2018.0558

### Risk Factors and Consequences of Opioid Use Disorder (OUD) in Prison

Individuals with OUD who are involved in the criminal legal system face an increased risk of opioid-related overdose due to several factors. These include diminished tolerance following forced withdrawal while incarcerated, inadequate counseling prior to release, correctional facilities' failure to identify individuals at risk of resuming use, and insufficient post-release follow-up (Binswanger et al., 2013; Møller et al., 2010). Upon release, many individuals resume opioid use, and two-thirds are rearrested for a new offense

within three years (de Andrade et al., 2018; Langan & Levin, 2002). Substance-use rates among people on parole and probation are two to three times substance-use rates among the general population (The Pew Charitable Trusts, 2018).

Barriers such as inadequate social support, poverty, stigma, and limited access to medications for opioid use disorder (MOUDs) in the community further heighten the risk of post-release overdose (Joudrey et al., 2019). A study by Zgoba et al. (2020) in *The Journal of the American Academy of Psychiatry and the Law* supports these observations, demonstrating a direct link between drug dependency and recidivism rates. The study specifically found that offenders with a substance use disorder had a higher risk of recidivism than those without, regardless of the presence of mental illness.

Access to adequate treatment for substance use, both during and after incarceration, is also a key factor. Treatment using MOUDs is correlated with reduced risk of mortality following release from incarceration. People with OUD who were receiving MOUD were 75% less likely to die, and 85% less likely to die due to drug overdose, in the first month after release (Marsden et al., 2017). People who receive treatment using methadone and buprenorphine have lower rates of re-arrest and reincarceration (Evans et al., 2019; Farrell-Macdonald et al., 2014; Westerberg et al., 2016).

## Co-occurrence of Substance Use and Mental Illness

When an individual is diagnosed with a substance use disorder and any mental illness disorder, the diagnosis is a co-occurring disorder (The Case for Screening and Treatment of Co-Occurring Disorders). Co-occurring includes any mental illness (AMI) and serious mental illness (SMI). SMI causes serious functional impairment which interferes with everyday life. In the 2022 National Survey on Drug Use and Health, 1 in 12 (8.4%) adults aged 18 or older have had both AMI and a substance use disorder (SUD) and 7.4 million adults aged 18 or older in 2022 have had SMI and a SUD (Results from the 2022 National Survey on Drug Use and Health: A Companion Infographic). In 2022, 10.9 million individuals with an AMI or SMI with a SUD did not receive any kind of treatment for substance use or mental health. Concurrently, those who did seek treatment solely received mental health treatment. When specifically looking at SUDs with opiates 27% of those who have a history with opiates have a serious mental illness, 64% have any mental illness, and approximately 11% to 26% have alcohol use disorder or another substance use disorder (<https://heal.nih.gov/research/new-strategies/optimizing-care>).

The ongoing opioid crisis in the United States has underscored the urgent need to address opioid use among forensic populations—individuals within the criminal justice system requiring psychiatric evaluation and treatment. As discussed above, substance-use rates among those involved with the criminal justice system are disproportionately high compared to the general population. Substance use is also higher among those with a mental health diagnosis.

Recent statistics (James & Glade, 2006, McFadden et al., 2021) document the high rate of comorbidity of mental illness and substance use in the forensic population. Estimates reach as high as 60 – 75% for the individuals qualifying for both a mental health diagnosis and a substance use diagnosis according to the DSM-5-TR, when examining incarcerated individuals. Further, substance use can undoubtedly substantially interfere with an individual's ability to adequately cope with their mental health struggles and adherence to treatment and increase the likelihood of a poor outcome, once released back into the community (Baillargeon et al., 2010).

## Response of the Criminal Justice System

The American Psychiatric Association (APA) and the Substance Abuse and Mental Health Services Administration (SAMHSA) have both emphasized the critical need for integrated treatment programs within correctional facilities to address substance use. The APA's 2023 policy brief revealed a 40% reduction in recidivism rates among participants diagnosed with opioid use disorders who received integrated treatment (APA, 2023).

Research highlighted in an article from the National Center for Biotechnology Information (NCBI) further demonstrates the link between opioid use and criminality, discussing how opiate prevention initiatives could play a crucial role in reducing offending, especially among females. The study notes, "Opiate-positive cases had higher rates of offending than test-negative controls, both prior to, and post, opiate initiation. Initiation of opiate use increased the relative risk (RR) by 16% for males but doubled it for females. The RR increase in non-serious acquisitive crime was greater than that seen in serious crime. For males only, opiate initiation narrowed the difference in violent offending rate between cases and controls. A larger offending increase was associated with opiate initiation in female, compared to male, users" (Pierce et al., 2017). This evidence suggests that opiate use significantly influences the likelihood of criminal behavior, with notable differences in impact between genders, underlining the importance of targeted prevention and treatment strategies within correctional settings.

## Nevada Specific Methodology

To understand the impacts of opioids on Nevada's incarcerated populations, a two-part analysis was conducted, focusing on conviction records and a subgroup of forensically incarcerated individuals. The statistics derived from these sources will likely underreport the true extent of the problem. The method utilizes the Criminal History Repository (CHR), which employs the assumption that an arrest for a substance-related crime serves as a proxy for general substance use. It is widely recognized that substance use can drive individuals to engage in a broader range of criminal activities beyond those directly related to substances. Therefore, the statistics generated from the CHR inherently underrepresent the full scope of the issue.

There is slightly more detailed information about substance use among the forensically incarcerated subgroup available. Upon intake, these individuals are prompted to self-report their substance use. This self-reported data provides an estimate of substance use within this population but is also assumed to be under-representative. In the analysis of both data sources, a broad definition of substance was used, without specifically focusing on opioids. It's important to note that rates of polysubstance use are high, indicating that many individuals use multiple substances concurrently, which complicates treatment and intervention strategies.

While these data sources offer the best available estimates of substance use disorder among Nevada's incarcerated populations, they lack much of the depth and breadth that is available through national research, most specifically from formal substance use disorder screenings for those incarcerated. Many of the statistics cited in the background section of this report were obtained by formally assessing inmates, providing a critical foundation for understanding the scale and specifics of substance-related issues within these facilities. This report highlights the gap in comprehensive data and underscores the importance of systematic screenings to enhance the accuracy of our findings and improve interventions. For these

reasons, it is anticipated that the statistics specific to Nevada derived from this analysis will underreport the prevalence of substance use, resulting in figures that are lower than those presented in the background section of this report.

## Part 1: Criminal History Repository

For the first part of this analysis the Criminal History Repository (CHR) for the years 2016 to 2023 was utilized. The CHR was created through legislation and codified into Nevada Revised Statute (NRS) 179A.075 and contains information about arrests in Nevada that resulted in convictions. For each arrest, a record is created for an individual that contains information about the original arrest charges as well as the charges that someone was convicted of. Relevant variables in this repository include:

- **Arrest Nevada Offense Code (NOC)** – The arrest charges. This variable is used to determine the number of drug related arrests.
- **Disposition NOC** – The offense a person is actually charged and convicted for. This variable is used to determine the number of drug related convictions.
- **Offense Class** – Final charge class (felony, misdemeanor, etc.) at time of disposition. This variable is used to determine the number of felony convictions.

Drug-related arrests were identified using National Occupational Classification (NOC) codes associated with substances. A list of relevant NOC codes was created and used to filter the arrests, which contains the detailed charges linked to each arrest record. NOC codes on this list can be found in Appendix A of this paper. The list of appropriate NOC codes was developed in collaboration with the Nevada Department of Public Safety State Police Records, Communications, and Compliance Division. Please keep in mind that these drug charges are not limited to opioids. There is not a way in the CHR to isolate opioids specifically. Also, please note that this analysis is limited to criminal behavior that results in both charges and convictions, and that this analysis underrepresents the true relationship between substance use and criminal behavior.

## Part 2: State Forensic Facilities

Secondly, this study investigates substance use among forensic patients at Lake's Crossing Center and Stein hospitals from fiscal years 2021 to 2023, utilizing self-reported data from the AVATAR system. AVATAR is an electronic health record containing demographic, treatment, billing, and financial information for state run mental health facilities throughout the state of Nevada. Through voluntary disclosures upon commitment, patients report on their drug use, including the use of opioids classified as heroin and opiates. The analysis examines the rates of self-disclosed opioid use, highlighted by a concerning discrepancy between self-reported rates and potentially higher actual use rates. This discrepancy is attributed to factors such as social desirability bias, recall bias, fear of legal repercussions, and a lack of awareness or denial about one's drug use.

# Results

## Part 1: Criminal History Repository

To understand the dynamics of substance use among Nevada's incarcerated population, this analysis first considers the number of arrests related to substance use, where any conviction occurred, even if the

conviction was not for a drug offense. Then the focus was narrowed to arrests that resulted in convictions related to drug offenses. An individual may be arrested for one type of crime but ultimately convicted of another, due to plea agreements or changes in the charges as the case progresses through the judicial system. The Criminal History Repository (CHR) only includes arrests that resulted in at least one conviction.

**Table 1** shows the number and percentage of drug related arrests that resulted in a conviction in Nevada. The percentage of arrests that resulted in convictions that are drug related has grown from a low of 12% in 2017 to 20% in 2022 and 19% in 2023. This equated to 3,129 arrests in 2023. This is a statistically significant increase in the proportion of arrests that are drug related from 2017 to 2023 at the  $\alpha = 0.05$  level of significance, with a *p-value* < 0.00001.

**Table 1. Substance Related Arrest and Conviction Charges in Nevada, 2016-2023**

| Year | Number of Total Arrests Resulting in a Conviction | Number of Drug Related Arrests | Percent of Arrests Related to Drugs | Number of Drug Related Convictions | Percent of Convictions Related to Drugs |
|------|---|--------------------------------|-------------------------------------|------------------------------------|---|
| 2016 | 46,276  | 6,964                          | 15.0%                               | 7,225                              | 15.6%                                   |
| 2017 | 45,247  | 5,403                          | 11.9%                               | 6,495                              | 14.4%                                   |
| 2018 | 48,570  | 6,516                          | 13.4%                               | 7,401                              | 15.2%                                   |
| 2019 | 51,750  | 6,878                          | 13.3%                               | 5,839                              | 11.3%                                   |
| 2020 | 37,107  | 6,117                          | 16.5%                               | 3,775                              | 10.2%                                   |
| 2021 | 34,502  | 6,758                          | 19.6%                               | 4,609                              | 13.4%                                   |
| 2022 | 28,758  | 5,608                          | 19.5%                               | 4,252                              | 14.8%                                   |
| 2023 | 16,049  | 3,129                          | 19.5%                               | 2,115                              | 13.2%                                   |

Acknowledging that a single person may experience multiple arrests and recognizing that underlying substance use may contribute to a variety of crimes beyond those explicitly drug-related, the table below considers the data on a per-person basis. The statistics presented in **Table 2** reveal an increasing trend in the proportion of individuals apprehended for drug-related offenses. Specifically, the data indicate a significant increase from a low of 13% in 2017 to 21% in both 2022 and 2023 when examining the unique individuals within the criminal history repository. This translates to a total of 2,887 individuals implicated in drug-related activities in 2023.

**Table 2. Individuals Arrested and Convicted for Drug Related Charges in Nevada, 2016-2023**

| Year | Number of People Arrested and Convicted | Number of People Arrested with a Drug Related Charge | Percent of People Arrested with a Drug Related Charge | Number of People with Drug Related Convictions | Percent of People with Drug Related Convictions |
|------|---|--|---|--|---|
| 2016 | 38,546                                  | 6,421  | 16.7%   | 6,681  | 17.3%   |
| 2017 | 37,669                                  | 5,059  | 13.4%   | 5,989  | 15.9%   |
| 2018 | 39,770                                  | 5,941  | 14.9%   | 6,590  | 16.6%   |
| 2019 | 40,699                                  | 6,153  | 15.1%   | 5,230  | 12.9%   |
| 2020 | 30,836                                  | 5,576  | 18.1%   | 3,492  | 11.3%   |
| 2021 | 29,082                                  | 6,110  | 21.0%   | 4,179  | 14.4%   |
| 2022 | 24,232                                  | 5,116  | 21.1%   | 3,894  | 16.1%   |
| 2023 | 13,606                                  | 2,887  | 21.2%   | 1,956  | 14.4%   |

Some individuals are arrested and convicted more than once per year. When considering unique individuals convicted, the percentage of being drug related has stayed relatively constant from 2016 (17%) to 2023 (14%).

When a conviction results in a felony offense, the individual convicted typically serves time in prison. As illustrated in **Table 3**, the percent of felony convictions that are related to drugs increased significantly from 17% in 2016 to 41% in 2023. In addition, when considering all drug related convictions, the percentage that are felonies has similarly been increasing over time.

**Table 3. Felony Drug Convictions in Nevada, 2016-2023**

| Year | Number of Felonies | Number of Drug Related Felonies | Percent of Felonies that are Drug Related | Percent of Drug Convictions that are Felonies |
|------|--------------------|---------------------------------|---|---|
| 2016 | 7,991              | 1,385                           | 17.3%                                     | 19.2%   |
| 2017 | 6,105              | 1,096                           | 18.0%                                     | 16.9%   |
| 2018 | 2,053              | 700                             | 34.1%                                     | 9.5%  |
| 2019 | 1,839              | 299                             | 16.3%                                     | 5.1%  |
| 2020 | 3,282              | 833                             | 25.4%                                     | 22.1%   |
| 2021 | 5,935              | 2,440                           | 41.1%                                     | 52.9%   |
| 2022 | 5,532              | 2,380                           | 43.0%                                     | 56.0%   |
| 2023 | 2,170              | 896                             | 41.3%                                     | 42.4%   |

Based on data in the criminal history repository alone, the percentage of felonies that are drug related is our best estimate of the percentage of new prison inmates in Nevada each year that are incarcerated due to drug use – at over 41% in 2023, and up from 17% just seven years prior. This does not consider

individuals whose drug use may have played a part in other criminal behavior of which drug-related felony convictions did not result, or individuals who suffer from substance use disorders but were not convicted of substance use related crimes, and therefore is under representative of the true impact of substance use on criminality.

While the data from the criminal history repository provides valuable insight, it's important to acknowledge the inherent limitations of these findings in fully capturing the extent of the drug problem among the incarcerated population. Without formal and systematic testing for substance use disorders among all individuals entering the correctional system, the true prevalence of drug-related issues is significantly underestimated. The lack of comprehensive screening and diagnostic measures means that these estimates are conservative at best, and the real scope of the issue may be far greater, signaling a potentially missed opportunity for intervention and treatment at a critical point of intervention. The background of this report references national studies, including one by NIDA in 2021, which estimate that substance use or related disorders affect 85% of inmates. These national findings are crucial for understanding the broader impact of substance-related issues on the incarcerated population in Nevada and should be considered in efforts to quantify this issue.

## Part 2: State Forensic Facilities

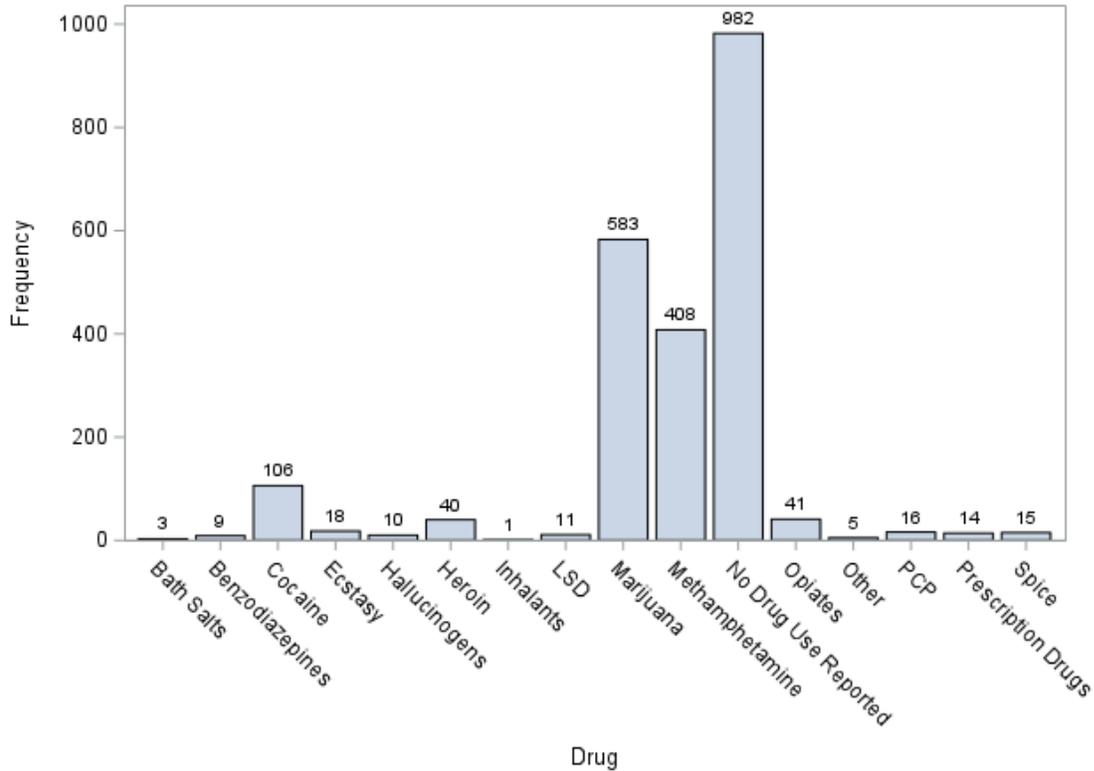
As a proxy to substance use disorder screens for incarcerated Nevadans, the Nevada Division of Public and Behavioral Health (DPBH) implements an intake screening given to forensically incarcerated people which allows them to self-disclose drug use, including opioids. This section examines the rates of self-disclosed drug use within this population.

Self-reported rates of opioid use and drug use can be misleading because they are often much lower than the actual rates due to several factors. Firstly, there is the issue of social desirability bias, where individuals may underreport drug use to present themselves in a more favorable light, especially when opioid use carries a stigma. Secondly, there might be recall bias, as individuals may not accurately remember or may intentionally omit instances of their opioid use. Thirdly, fear of potential legal repercussions or privacy concerns, even in supposedly confidential surveys or studies, can lead to underreporting. Additionally, there may be a lack of awareness or denial about one's own drug use, which is particularly relevant for prescription opioids, where individuals might not consider prescribed substance use as 'drug use' per se. All these factors contribute to the discrepancy between self-reported and actual rates of opioid use.

### Current Self-Reported Opioid Use in Forensic Patients

To understand opioid use within our forensic patients, data from Lake's Crossing Center and Stein hospitals were collected from the AVATAR system for fiscal years 2021 to 2023. When committed, patients can voluntarily disclose the types of drugs they use and whether they use the drugs intravenously. The distribution of reported drugs used each fiscal year are reported below in **Figure 3**.

**Figure 3. Histogram of Drug Use in Nevada Across all Fiscal Years 2021-2023**



Rates of reported opioid use (illustrated as heroin and opiates in the histograms above) in forensically incarcerated peoples are reported in **Table 4** below.

**Table 4. Rates of Self-Disclosed Opioid Use in Nevada by Fiscal Year, 2021-2023**

| Fiscal Year | Number of Opioid Users | Number of Clients | Rate of Opioid Use (%) |
|-------------|------------------------|-------------------|------------------------|
| 2021        | 24                     | 565               | 4.2%                   |
| 2022        | 19                     | 609               | 3.1%                   |
| 2023        | 26                     | 624               | 4.2%                   |

Polysubstance use is a prevalent issue within the incarcerated population. This phenomenon, where individuals use multiple substances either simultaneously or at different times, can complicate self-reporting measures. Specifically, with the rise of fentanyl as an adulterant in various illicit drugs, many individuals may unknowingly consume fentanyl, rendering them unable to accurately self-report its use. This lack of awareness is not restricted to fentanyl; it extends to other substances that are often mixed or substituted without the user's knowledge.

Given this context, the general rates of drug use reported by the forensic population, as shown in **Table 5**, might offer a more realistic proxy for understanding the breadth of opioid use—including undisclosed consumption of fentanyl and other opioids. While the self-disclosed rates of opioid use, as indicated in **Table 4**, reflect a relatively stable percentage, they do not capture the entire picture. The larger rates of general drug use, displayed in **Table 5**, suggest a broader trend that likely encompasses undisclosed opioid use. This assertion is supported by the higher percentages of drug use overall, which can imply a significant number of polysubstance users within this demographic, including those with opioid use that is either unrecognized or unreported. Therefore, the aggregate data on drug use should be considered an indirect indicator of opioid use trends within the incarcerated population.

**Table 5. Rates of Self-Disclosed Drug Use in Nevada by Fiscal Year, 2021-2023**

| Fiscal Year | Number of Drug Users | Number of Clients | Rate of Drug Use (%) |
|-------------|----------------------|-------------------|----------------------|
| 2021        | 242                  | 565               | 42.8%                |
| 2022        | 266                  | 609               | 43.7%                |
| 2023        | 308                  | 624               | 49.4%                |

### Beyond Self Reporting: Additional Analysis to Determine Substance Use in Forensic Patients

To better understand the forensic population beyond self-reported substance use, individuals were cross-referenced with Nevada’s Prescription Drug Monitoring Program (PDMP) data and the Criminal History Repository (CHR). The PDMP provides insight into whether individuals may have had exposure to controlled substances that could potentially lead to substance use disorders. The CHR was utilized to perform a parallel analysis to Part 1 on this forensic sub population, gaining valuable insights on the rates of drug-related arrests and convictions. This integrated approach enhances our ability to comprehensively assess the dynamics of substance use and related criminal behavior among the incarcerated.

### Prescription Drug Monitoring Program (PDMP)

The PDMP is a state-run electronic database that tracks the prescribing and dispensing of controlled prescription drugs to patients, aiming to prevent prescription drug misuse and enhance patient safety. Nearly half (49.9%) of Nevada’s forensic population from 2021 to 2023 have a prescription reported in PDMP.

**Table 6. Forensic Clients with a PDMP Record**

| Fiscal Year | Number of Clients in PDMP | Number of Clients | % of Clients in PDMP |
|-------------|---------------------------|-------------------|----------------------|
| 2021        | 275                       | 565               | 48.7%                |
| 2022        | 315                       | 609               | 51.7%                |
| 2023        | 308                       | 624               | 49.4%                |

Interestingly, in 2023, 308 forensic patients were identified as having prescriptions in the PDMP, and 308 forensic patients self-report drug use. These are not the same exact 308 people though there is significant overlap.

### Criminal History Repository (CHR)

To understand the circumstances a forensic patient was originally arrested under, we can again utilize the CHR for the years 2005 to 2023. When looking at the CHR, some forensic clients could not be matched to the criminal history repository without additional information. In 2021, 131 clients were not found in the CHR. In 2022, 136 were not found in the CHR, and 170 of the 2023 clients were not found in the CHR.

**Table 7. Forensic Clients with a Drug Related Arrest**

| Fiscal Year | Number of Clients found in the CHR | Number of Clients with a Drug Related Arrest | % Clients in CHR with a Drug Related Arrest |
|-------------|------------------------------------|--|---|
| <b>2021</b> | 434                                | 145  | <b>33.4%</b>                                |
| <b>2022</b> | 473                                | 164  | <b>34.7%</b>                                |
| <b>2023</b> | 454                                | 156  | <b>34.4%</b>                                |

This information reveals that 33.4% to 34.7% of forensic clients had drug-related arrests, further validating the prevalence of substance use among this demographic. This is lower than the rate of self-reported substance use.

The analysis of opioid use among forensic patients in Lakes-crossing and Stein hospitals, from fiscal years 2021 to 2023, has unearthed significant insights into the patterns of substance use within this vulnerable population. From 2021 to 2023, the overall rate of self-reported drug use among the forensic population at the two hospitals was 45.4%. Comparatively, the PDMP data shows that nearly half of the forensic population (approximately 49.9% over the three years) were prescribed controlled substances.

## Conclusion

This study on substance use and criminal behavior in Nevada confirms a significant link between substance use and criminal activities. Nevada-specific data indicate an upward trend in the percentage of arrests and convictions that are drug related, with drug-related arrests accounting for a low of 12% of arrests that resulted in convictions in 2017 to over 19% in 2023. Even more noteworthy is the percentage of felony convictions that are drug related, at over 41% in 2023. This is an increase of nearly 139% since 2016 and underscores an urgent need for targeted interventions within correctional facilities.

Over 45% of Nevada’s forensic patients self-reported drug use, equating to 816 out of 1,798 individuals between 2021 and 2023, while approximately 34% of forensic clients were found to have been arrested for drug-related charges – which surpasses the rate of drug arrests in Nevada’s general arrested and convicted population.

Despite these findings, our study is constrained by the limitations of available data, which likely underrepresent the true extent of substance use among the incarcerated population in Nevada. The

reliance on self-reported data and records from the PDMP does not capture the complete scope of substance use disorders, particularly given the known issues of underreporting and unrecognized polysubstance use, as discussed through the report. These gaps in data suggest that our analysis provides only a partial view of the problem.

National statistics, such as those from NIDA, which estimate that 65% of the nationally incarcerated population is diagnosed with a substance use disorder and an additional 20% were under the influence at the time of their crime, offer a more accurate estimate of the prevalence of substance use and its impact on criminality. This stark contrast underscores the need for more comprehensive and systematic approaches to data collection and analysis in Nevada to better understand and address the interplay between substance use and criminal behavior.

The integration of statewide criminal statistics and detailed forensic patient reports provides compelling evidence of the heightened risk of drug-related offenses among those with mental health challenges, advocating for a more nuanced approach to policy and treatment strategies. These strategies should address the root causes of substance abuse in both the general and forensic populations, aiming to mitigate the cycle of crime and addiction. This approach will enhance public safety while supporting the rehabilitation needs of individuals with substance use disorders.

Simultaneously, national statistics indicate that treatment with Opioid Use Disorder (OUD) medications drastically reduces mortality and recidivism, with those treated being 75% less likely to die post-release. These findings necessitate urgent policy reforms to expand access to comprehensive treatment strategies, improve accuracy in self-reporting, and integrate effective OUD medications within forensic settings. Enhanced screening and confidentiality measures are also critical to ensure accurate treatment planning to support the rehabilitation of individuals with substance use disorders, ultimately reducing the cycle of crime and addiction.

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# Appendix

## NOC Codes Related to drugs.

| NOC   | NOC DESCRIPTION                                   | NRS       |
|-------|---|-----------|
| 50024 | MANSLAUGHTER, TAKE DRUGS TO TERM PREGNANCY        | 200.22    |
| 50041 | ATT MANSLAUGHTER, TAKE DRUGS TO TERM PREGNANCY    | 200.22    |
| 50042 | CONSP MANSLAUGHTER, TAKE DRUGS TO TERM PREGNANCY  | 200.22    |
| 50170 | ADMIN DRUG TO AID COMM OF FELONY                  | 200.405   |
| 50171 | ADMIN C/S TO AID COMM OF CRIME OF VIOLENCE        | 200.408   |
| 50172 | ATT ADMIN DRUG TO AID COMM OF FELONY              | 200.405   |
| 50173 | CONSP ADMIN DRUG TO AID COMM OF FELONY            | 200.405   |
| 50174 | ATT ADMIN C/S TO AID COMM OF VIOLENT CRIME        | 200.408   |
| 50175 | CONSP ADMIN C/S TO AID COMM OF VIOLENT CRIME      | 200.408   |
| 51086 | DISP C/S W/O REG                                  | 453.232   |
| 51087 | DISP C/S W/O P-SCRPT                              | 453.256   |
| 51089 | OPER PLACE FOR SALE/GIFT/USE C/S, (2+)            | 453.316.2 |
| 51093 | SELL SCH I OR II C/S, (2ND)                       | 453.321.2 |
| 51094 | SELL SCH I OR II C/S, (2ND)-E/DW                  | 453.321.2 |
| 51095 | SELL SCH I OR II C/S, (2ND)-E/CG                  | 453.321.2 |
| 51096 | SELL SCH I OR II C/S, (3+)                        | 453.321.2 |
| 51097 | SELL SCH I OR II C/S, (3+)-E/DW                   | 453.321.2 |
| 51098 | SELL SCH I OR II C/S, (3+)-E/CG                   | 453.321.2 |
| 51105 | SELL SCH III, IV, V C/S, (3+)                     | 453.321.4 |
| 51106 | SELL SCH III, IV, V C/S, (3+)-E/DW                | 453.321.4 |
| 51107 | SELL SCH III, IV, V C/S, (3+)-E/CG                | 453.321.4 |
| 51108 | MFG OR ATT, C/S OR POSS CHEMS FOR MFG C/S         | 453.322.3 |
| 51109 | MFG/ATT/POSS CHEM MFG C/S-REC FAC MNR/PARK E/SCH  | 453.322.3 |
| 51110 | ACT RE C/S RECS/INSPECT/STORAGE                   | 453.326   |
| 51111 | DISTR SCH I OR II C/S                             | 453.331.1 |
| 51112 | USE BOGUS REG FOR MFG/DISTR C/S                   | 453.331.1 |
| 51113 | FALSE REP TO POSS C/S                             | 453.331.1 |
| 51114 | OBT C/S BY FRAUD/FORGERY                          | 453.331.1 |
| 51115 | FRAUD INFO RE LAWFUL MFG/POSS/DISTR C/S           | 453.331.1 |
| 51116 | FALSIFY P-SCRPT FOR C/S                           | 453.331.1 |
| 51117 | MAKE/POSS INSTMT FOR C-FEIT C/S, LABELING         | 453.331.1 |
| 51119 | FALSE REP TO PHARM TO OBT P-SCRPT C/S             | 453.331.1 |
| 51120 | UNLAW MISD ACT RE IMIT C/S                        | 453.332   |
| 51121 | DISTR/POSS TO SELL IMIT C/S BY ADULT TO MINOR     | 453.332.3 |
| 51122 | USE/POSS TO USE IMIT C/S, (1ST/2ND)               | 453.332.4 |
| 51123 | USE/POSS IMIT C/S, (3+)                           | 453.332.4 |
| 51124 | ADV/SOLICIT TO PROMO DISTR IMIT C/S (1ST/2ND)     | 453.332.4 |
| 51125 | ADV/SOLICIT TO PROMO DISTR IMIT C/S, (3+)         | 453.332.4 |
| 51126 | SELL C/S BY PERS BY ADULT TO MINOR, (2+)          | 453.334   |
| 51141 | POSS TO SELL SCH I/II, FLNTRZPM/GHB, (1ST)        | 453.337.2 |
| 51142 | POSS-SELL SCH I/II/D-RAPE 1ST-REC FAC/PARK-E/SCH  | 453.337.2 |
| 51143 | POSS TO SELL SCH I/II, FLNTRZPM/GHB, (1ST)-E/CG   | 453.337.2 |
| 51144 | POSS TO SELL SCH I/II, FLNTRZPM/GHB, (2ND)        | 453.337.2 |
| 51145 | POSS-SELL SCH I/II/D-RAPE 2ND-REC FAC/PARK-E/SCH  | 453.337.2 |
| 51146 | POSS TO SELL SCH I/II, FLNTRZPM/GHB, (2ND)-E/CG   | 453.337.2 |
| 51147 | POSS TO SELL SCH I/II, FLNTRZPM/GHB, (3+)         | 453.337.2 |
| 51148 | POSS-SELL SCH I/II/D-RAPE 3RD+-REC FAC/PARK-E/SCH | 453.337.2 |
| 51149 | POSS TO SELL SCH I/II, FLNTRZPM/GHB, (3+)-E/CG    | 453.337.2 |

| NOC   | NOC DESCRIPTION                                    | NRS       |
|-------|--|-----------|
| 51150 | POSS TO SELL, SCH III, IV, V C/S, (1ST/2ND)        | 453.338.2 |
| 51151 | POSS-SELL SCH III/IV/V-1ST/2ND-REC FAC/PARK-E/SCH  | 453.338.2 |
| 51152 | POSS TO SELL, SCH III, IV, V C/S, (1ST/2ND)-E/CG   | 453.338.2 |
| 51153 | POSS TO SELL, SCH III, IV, V C/S, (3+)             | 453.338.2 |
| 51154 | POSS-SELL, SCH III/IV/V C/S 3+, REC FAC/PRK-E/SCH  | 453.338.2 |
| 51155 | POSS TO SELL, SCH III, IV, V C/S, (3+)-E/CG        | 453.338.2 |
| 51174 | ATT DISP C/S W/O REG                               | 453.232   |
| 51175 | ATT DISP C/S W/O REG                               | 453.232   |
| 51177 | ATT DISP C/S W/O P-SCRIPT                          | 453.256   |
| 51178 | ATT DISP C/S W/O P-SCRIPT                          | 453.256   |
| 51182 | ATT OPER PLACE FOR SALE/GIFT/USE C/S, (2+)         | 453.316.2 |
| 51184 | ATT ACT RE C/S RECS/INSPECT/STORAGE                | 453.326   |
| 51185 | ATT ACT RE C/S RECS/INSPECT/STORAGE                | 453.326   |
| 51186 | ATT DISTR SCH I OR II C/S                          | 453.331.1 |
| 51187 | ATT DISTR SCH I OR II C/S                          | 453.331.1 |
| 51188 | ATT USE BOGUS REG FOR MFG/DISTR C/S                | 453.331.1 |
| 51189 | ATT USE BOGUS REG FOR MFG/DISTR C/S                | 453.331.1 |
| 51190 | ATT FALSE REP TO POSS C/S                          | 453.331.1 |
| 51191 | ATT FALSE REP TO POSS C/S                          | 453.331.1 |
| 51192 | ATT FURN FRAUD INFO RE LAWFUL MFG/POSS/DISTR C/S   | 453.331.1 |
| 51193 | ATT FURN FRAUD INFO RE LAWFUL MFG/POSS/DISTR C/S   | 453.331.1 |
| 51194 | ATT FALSIFY P-SCRIPT FOR C/S                       | 453.331.1 |
| 51195 | ATT FALSIFY P-SCRIPT FOR C/S                       | 453.331.1 |
| 51196 | ATT MAKE/POSS INSTMT FOR C-FEIT C/S, LABELING      | 453.331.1 |
| 51197 | ATT MAKE/POSS INSTMT FOR C-FEIT C/S, LABELING      | 453.331.1 |
| 51200 | ATT FALSE REP TO PHARM TO OBT P-SCRIPT FOR C/S     | 453.331.1 |
| 51201 | ATT FALSE REP TO PHARM TO OBT P-SCRIPT FOR C/S     | 453.331.1 |
| 51202 | ATT DISTR/POSS TO SELL IMIT C/S BY ADULT TO MINOR  | 453.332.3 |
| 51203 | ATT DISTR/POSS TO SELL IMIT C/S BY ADULT TO MINOR  | 453.332.3 |
| 51205 | ATT USE, POSS TO USE IMIT C/S, (3+)                | 453.332.4 |
| 51206 | ATT USE, POSS TO USE IMIT C/S, (3+)                | 453.332.4 |
| 51208 | ATT ADV/SOLICIT TO PROMO DISTR IMIT C/S, (3+)      | 453.332.4 |
| 51209 | ATT ADV/SOLICIT TO PROMO DISTR IMIT C/S, (3+)      | 453.332.4 |
| 51210 | ATT SELL C/S BY ADULT TO MINOR, (2+)               | 453.334   |
| 51220 | ATT POSS TO SELL SCH I/II C/S, FLNTRZPM/GHB, (1ST) | 453.337.2 |
| 51221 | ATT POSS TO SELL SCH I/II C/S, FLNTRZPM/GHB, (1ST) | 453.337.2 |
| 51222 | ATT POSS TO SELL SCH I/II C/S, FLNTRZPM/GHB, (2ND) | 453.337.2 |
| 51223 | ATT POSS TO SELL SCH I/II C/S, FLNTRZPM/GHB, (2ND) | 453.337.2 |
| 51224 | ATT POSS TO SELL SCH I/II C/S, FLNTRZPM/GHB, (3+)  | 453.337.2 |
| 51225 | ATT POSS/SELL, SCH III, IV, V C/S, (1ST/2ND)       | 453.338.2 |
| 51226 | ATT POSS/SELL, SCH III, IV, V C/S, (1ST/2ND)       | 453.338.2 |
| 51227 | ATT POSS/SELL, SCH III, IV, V C/S, (3+)            | 453.338.2 |
| 51228 | ATT POSS/SELL, SCH III, IV, V C/S, (3+)            | 453.338.2 |
| 51236 | ATT TRAFFICK SCH II C/S, 28 - 200 GRM              | 453.3395. |
| 51238 | ATT TRAFFICK SCH II C/S, 200 - 400 GRM             | 453.3395. |
| 51239 | ATT TRAFFICK OF SCH II C/S, 400+ GRM               | 453.3395. |
| 51240 | USE C/S IN PRESENCE OF CHILD                       | 453.3325. |
| 51241 | SELL/SUPPLY/PREScribe C/S IN PRESENCE OF CHILD     | 453.3325. |

| NOC   | NOC DESCRIPTION                                     | NRS       |
|-------|---|-----------|
| 51242 | MFG C/S IN PRESENCE OF CHILD                        | 453.3325. |
| 51243 | USE C/S IN PRESENCE OF CHILD, W/SBH TO CHILD        | 453.3325. |
| 51244 | SELL/SUPPLY/PRESCRIBE C/S, CHILD PRESENT, W/SBH     | 453.3325. |
| 51245 | MFG C/S IN PRESENCE OF CHILD, W/SBH TO CHILD        | 453.3325. |
| 51246 | DEATH FROM DISCOVERY/CLEANUP OF LAB TO MFG C/S      | 453.3353. |
| 51247 | ATT USE C/S IN PRESENCE OF CHILD                    | 453.3325. |
| 51248 | FILL DRUG P-SCRPT, I-NET PHMICY, IN NV              | 453.3638. |
| 51249 | DLVR C/S OR FAKE BY ILLEGAL I-NET PHMICY            | 453.3638. |
| 51250 | FILL SCH I DRUG P-SCRPT, I-NET PHMICY, IN NV        | 453.3638. |
| 51251 | DLVR SCH I OR FAKE, I-NET PHMICY, IN NV             | 453.3638. |
| 51252 | FILL DRUG P-SCRPT I-NET PHMICY, IN NV, C/DOSBH      | 453.3638. |
| 51253 | DLVR C/S OR FAKE, I-NET PHMICY, IN NV, C/DOSBH      | 453.3638. |
| 51254 | FILL DRUG P-SCRPT, I-NET PHMICY, NONRES             | 453.3638. |
| 51255 | DLVR C/S OR FAKE, I-NET PHMICY, NONRES              | 453.3638. |
| 51256 | FILL SCH I DRUG, I-NET PHMICY, NONRES               | 453.3638. |
| 51257 | DLVR SCH I OR FAKE C/S, I-NET PHMICY, NONRES        | 453.3638. |
| 51258 | FILL DRUG P-SCRPT, I-NET PHMICY, NONRES, C/DOSBH    | 453.3638. |
| 51259 | DLVR C/S OR FAKE, I-NET PHMICY, NONRES, C/DOSBH     | 453.3638. |
| 51260 | FILL/AID UNLAW IMPORT P-SCRPT DRUG, VIA I-NET       | 453.3639. |
| 51261 | FILL/AID UNLAW IMPORT P-SCRPT DRUG, VIA I-NET       | 453.3639. |
| 51262 | FILL/AID UNLAW IMPORT P-SCRPT, VIA I-NET, C/DOSBH   | 453.3639. |
| 51263 | UNLAW FILL/AID I-NET P-SCRPT DRUG                   | 453.3639. |
| 51264 | UNLAW FILL/AID I-NET SCH I DRUG                     | 453.3639. |
| 51265 | UNLAW FILL/AID I-NET P-SCRPT DRUG, C/DOSBH          | 453.3639. |
| 51266 | PRESCRIBE DRUG, I-NET PHMICY, NV PHYS               | 453.3643. |
| 51267 | PRESCRIBE SCH I DRUG, I-NET PHMICY, NV PHYS         | 453.3643. |
| 51268 | PRESCRIBE DRUG, I-NET PHMICY, NV PHYS, C/DOSBH      | 453.3643. |
| 51269 | PRESCRIBE DRUG, I-NET PHMICY, NONRES PHYS           | 453.3643. |
| 51270 | PRESCRIBE SCH I DRUG, I-NET PHMICY, NONRES PHYS     | 453.3643. |
| 51271 | PRESCRIBE DRUG, I-NET PHMICY, NONRES PHYS, C/DOSBH  | 453.3643. |
| 51272 | PRESCRIBE DRUG, I-NET PHMICY, NONRES LIC PHYS       | 453.3643. |
| 51273 | PRESCRIBE SCH I DRUG, I-NET PHMICY, NONRES LIC PHYS | 453.3643. |
| 51274 | PRESCRIBE DRUG, I-NET PHMICY, NONRES PHYS, C/DOSBH  | 453.3643. |
| 51275 | ATT FILL DRUG P-SCRPT, I-NET PHMICY, IN NV          | 453.3638. |
| 51276 | ATT FILL DRUG P-SCRPT, I-NET PHMICY, IN NV          | 453.3638. |
| 51277 | ATT DLVR C/S OR FAKE BY ILLEGAL I-NET PHMICY        | 453.3638. |
| 51278 | ATT DLVR C/S OR FAKE BY ILLEGAL I-NET PHMICY        | 453.3638. |
| 51279 | ATT FILL SCH I DRUG, I-NET PHMICY, NV PERS          | 453.3638. |
| 51280 | ATT DLVR SCH I OR FAKE, I-NET PHMICY, IN NV         | 453.3638. |
| 51281 | ATT FILL DRUG P-SCRPT, I-NET PHMICY, NONRES         | 453.3638. |
| 51282 | ATT FILL DRUG P-SCRPT, I-NET PHMICY, NONRES         | 453.3638. |
| 51283 | ATT DLVR C/S OR FAKE, I-NET PHMICY, NONRES          | 453.3638. |
| 51284 | ATT DLVR C/S OR FAKE, I-NET PHMICY, NONRES          | 453.3638. |
| 51285 | ATT FILL SCH I DRUG, I-NET PHMICY, NONRES           | 453.3638. |
| 51286 | ATT DLVR SCH I OR FAKE C/S, I-NET PHMICY, NONRES    | 453.3638. |
| 51287 | ATT FILL/AID UNLAW IMPORT P-SCRPT DRUG, VIA I-NET   | 453.3639. |
| 51288 | ATT FILL/AID UNLAW IMPORT P-SCRPT DRUG, VIA I-NET   | 453.3639. |
| 51289 | ATT FILL/AID UNLAW IMPORT SCH I P-SCRPT, VIA I-NET  | 453.3639. |

| NOC   | NOC DESCRIPTION                                     | NRS       |
|-------|---|-----------|
| 51290 | ATT UNLAW FILL/AID I-NET P-SCRPT DRUG               | 453.3639. |
| 51291 | ATT UNLAW FILL/AID I-NET P-SCRPT DRUG               | 453.3639. |
| 51292 | ATT UNLAW FILL/AID I-NET SCH I DRUG                 | 453.3639. |
| 51293 | ATT PRESCRIBE DRUG, I-NET PHMICY, NV PHYS           | 453.3643. |
| 51294 | ATT PRESCRIBE DRUG, I-NET PHMICY, NV PHYS           | 453.3643. |
| 51295 | ATT PRESCRIBE SCH I C/S, I-NET PHMICY, NV PHYS      | 453.3643. |
| 51296 | ATT PRESCRIBE DRUG, I-NET PHMICY, NONRES PHYS       | 453.3643. |
| 51297 | ATT PRESCRIBE DRUG, I-NET PHMICY, NONRES PHYS       | 453.3643. |
| 51298 | ATT PRESCRIBE SCH I C/S, I-NET PHMICY, NONRES PHYS  | 453.3643. |
| 51299 | ATT PRESCRIBE DRUG, I-NET PHMICY, NONRES LIC PHYS   | 453.3643. |
| 51300 | ATT PRESCRIBE DRUG, I-NET PHMICY, NONRES LIC PHYS   | 453.3643. |
| 51301 | ATT PRESCRIBE SCH I DRUG, I-NET PHMICY, NONRES PHYS | 453.3643. |
| 51302 | ADMIN/POSS FOR PURP OF ADMIN C/S W/O AUTH           | 453.375   |
| 51303 | DISP C/S W/O AUTH                                   | 453.377   |
| 51304 | OBT C/S OR P-SCRPT DRUG FROM AUTH PERS              | 453.391.1 |
| 51305 | OBT MULTI C/S OR P-SCRPT W/O DISCLOSURE             | 453.391.2 |
| 51306 | CONSP VIOL UCS ACT, (1ST)                           | 453.401.1 |
| 51307 | CONSP VIOL UCS ACT, (2ND)                           | 453.401.1 |
| 51308 | CONSP VIOL UCS ACT, (3+)                            | 453.401.1 |
| 51312 | FILL C/S P-SCRPT BY PHARM FOR NON-PATIENT USE       | 453.431.1 |
| 51313 | PROVIDE FALSE NAME TO OBT P-SCRPT FOR C/S           | 453.431.2 |
| 51314 | FILL ALTERED P-SCRPT FOR C/S BY PHARM W/O APRV      | 453.431.3 |
| 51315 | FILL P-SCRPT FOR SCH II C/S W/I REQ TIME            | 453.431.4 |
| 51316 | VIOL BY PHARM OF BOARD C/S REGS, P-SCRPT NOT REQ    | 453.505.1 |
| 51317 | FALSE REP TO PHARM TO OBT C/S, P-SCRPT NOT REQ      | 453.505.2 |
| 51318 | POSS/SELL NASAL INHALER W/C/S STIMULANT             | 453.521   |
| 51319 | ATT ADMIN/POSS FOR PURP OF ADMIN C/S W/O AUTH       | 453.375   |
| 51320 | ATT ADMIN/POSS FOR PURP OF ADMIN C/S W/O AUTH       | 453.375   |
| 51321 | ATT DISP C/S W/O AUTH                               | 453.377   |
| 51322 | ATT DISP C/S W/O AUTH                               | 453.377   |
| 51323 | ATT OBT MULTI C/S OR P-SCRPT W/O DISCLOSURE         | 453.391.2 |
| 51324 | ATT OBT MULTI C/S OR P-SCRPT W/O DISCLOSURE         | 453.391.2 |
| 51328 | ATT FILL C/S P-SCRPT BY PHARM FOR NON-PATIENT USE   | 453.431.1 |
| 51329 | ATT FILL C/S P-SCRPT BY PHARM FOR NON-PATIENT USE   | 453.431.1 |
| 51330 | ATT FILL ALTERED P-SCRPT FOR C/S BY PHARM W/O APRV  | 453.431.3 |
| 51331 | ATT FILL ALTERED P-SCRPT FOR C/S BY PHARM W/O APRV  | 453.431.3 |
| 51332 | ATT FILL P-SCRPT FOR SCH II C/S W/I REQ TIME        | 453.431.4 |
| 51333 | ATT FILL P-SCRPT FOR SCH II C/S W/I REQ TIME        | 453.431.4 |
| 51336 | DLVR/SELL/POSS/MFG DRUG-PARA                        | 453.56    |
| 51337 | DLVR DRUG-PARA BY ADULT TO MINOR 3+ YRS JUNIOR      | 453.562   |
| 51338 | ADV DRUG-PARA                                       | 453.564   |
| 51339 | USE/POSS DRUG-PARA                                  | 453.566   |
| 51340 | ATT DLVR/SELL/POSS/MFG DRUG-PARA                    | 453.56    |
| 51341 | ATT DLVR/SELL/POSS/MFG DRUG-PARA                    | 453.56    |
| 51342 | ATT DLVR DRUG-PARA BY ADULT TO MINOR 3+ YRS JUNIOR  | 453.562   |
| 51343 | ATT DLVR DRUG-PARA BY ADULT TO MINOR 3+ YRS JUNIOR  | 453.562   |
| 51349 | FURN DANG DRUG W/O P-SCRPT                          | 454.221   |
| 51350 | FAIL MAINT/PROD DANG DRUG RECS BY PHMICY/HOSP/PRACT | 454.286   |

| NOC   | NOC DESCRIPTION                                    | NRS       |
|-------|--|-----------|
| 51351 | BULK SUPPLIER FAIL MAINT ACCURATE DANG DRUGS RECS  | 454.291   |
| 51352 | USE MINOR AS AGT IN ACT RE DANG DRUGS              | 454.306   |
| 51353 | FURN DANG DRUG TO MINOR                            | 454.306   |
| 51354 | OBT DANG DRUG BY FRAUD/FORGERY                     | 454.311.1 |
| 51355 | POSS BOGUS P-SCRPT FOR DANG DRUG                   | 454.311.2 |
| 51356 | RCV/POSS OTHERS DANG DRUG BY BOGUS P-SCRPT         | 454.311.3 |
| 51357 | FILL BOGUS P-SCRPT FOR DANG DRUG                   | 454.311.3 |
| 51358 | POSS DANG DRUG W/O P-SCRPT, (1ST/2ND)              | 454.316.1 |
| 51359 | POSS DANG DRUG W/O P-SCRPT, (3+)                   | 454.316.1 |
| 51360 | DISP/FURN DANG DRUG W/O P-SCRPT                    | 454.301   |
| 51362 | MISREP BY PHONE TO OBT DANG DRUG, (1ST)            | 454.326.1 |
| 51363 | MISREP BY PHONE TO OBT DANG DRUG, (2+)             | 454.326.2 |
| 51364 | POSS/SELL NASAL INHALER W/STIMULANT DRUG           | 454.341   |
| 51365 | USE/POSS DRUG/CHEM/POISON FOR EUPHORIA/HALLUCINATE | 454.346   |
| 51366 | POSS DRUG NOT FOR I-STATE COMMERCE                 | 454.351   |
| 51367 | VIOL DANG DRUG LAWS/REGS                           | 454.231   |
| 51371 | ATT FURN DANG DRUG W/O P-SCRPT                     | 454.221   |
| 51372 | ATT FURN DANG DRUG W/O P-SCRPT                     | 454.221   |
| 51373 | CONSP FURN DANG DRUG W/O P-SCRPT                   | 454.221   |
| 51374 | ATT USE MINOR AS AGT IN ACT RE DANG DRUGS          | 454.306   |
| 51375 | CONSP USE MINOR AS AGT IN ACT RE DANG DRUGS        | 454.306   |
| 51376 | ATT FURN DANG DRUG TO MINOR                        | 454.306   |
| 51377 | CONSP FURN DANG DRUG TO MINOR                      | 454.306   |
| 51378 | CONSP OBT DANG DRUG BY FRAUD/FORGERY               | 454.311.1 |
| 51379 | ATT POSS BOGUS P-SCRPT FOR DANG DRUG               | 454.311.2 |
| 51380 | ATT POSS BOGUS P-SCRPT FOR DANG DRUG               | 454.311.2 |
| 51381 | CONSP POSS BOGUS P-SCRPT FOR DANG DRUG             | 454.311.2 |
| 51382 | ATT RCV/POSS OTHERS DANG DRUG BY BOGUS P-SCRPT     | 454.311.3 |
| 51383 | ATT RCV/POSS OTHERS DANG DRUG BY BOGUS P-SCRPT     | 454.311.3 |
| 51384 | CONSP RCV/POSS OTHERS DANG DRUG BY BOGUS P-SCRPT   | 454.311.3 |
| 51385 | ATT FILL BOGUS P-SCRPT FOR DANG DRUG               | 454.311.3 |
| 51386 | ATT FILL BOGUS P-SCRPT FOR DANG DRUG               | 454.311.3 |
| 51387 | CONSP FILL BOGUS P-SCRPT FOR DANG DRUG             | 454.311.3 |
| 51389 | CONSP POSS DANG DRUG W/O LEGAL P-SCRPT             | 454.316   |
| 51390 | ATT POSS DANG DRUG W/O LEGAL P-SCRPT, (3+)         | 454.316.1 |
| 51391 | ATT POSS DANG DRUG W/O LEGAL P-SCRPT, (3+)         | 454.316.1 |
| 51392 | CONSP MISREP BY PHONE TO OBT DANG DRUG             | 454.326   |
| 51393 | ATT MISREP BY PHONE TO OBT DANG DRUG, (2+)         | 454.326.2 |
| 51394 | ATT MISREP BY PHONE TO OBT DANG DRUG, (2+)         | 454.326.2 |
| 51427 | POSS GUN UNDER INFL OF ALC/DRUG                    | 202.257   |
| 51630 | POSS INTOX BEV OR C/S IN M/HLTH FAC                | 433.554.1 |
| 51631 | M/HLTH FAC EMP UNDER INFL OF LIQ OR C/S            | 433.554.1 |
| 51643 | POSS INTOX BEV OR C/S IN CHILD M/HLTH FAC          | 433B.340. |
| 51644 | EMP CHILD M/HLTH FAC UNDER INFL LIQ OR C/S         | 433B.340. |
| 51687 | FTC W/BOARD OF HEALTH REGS RE COMM DISEASE/DRUG OD | 441A.920  |
| 51771 | SKI/SNOWBOARD WHILE INTOX OR UNDER INFL C/S        | 455A.170. |
| 51773 | ENTER SKATEBOARD PARK WHILE INTOX OR INFL C/S      | 455B.290. |
| 51933 | DISSEMINATE INFO RE TAX ON C/S                     | 372A.080  |

| NOC   | NOC DESCRIPTION                                    | NRS       |
|-------|--|-----------|
| 52106 | ACT AS COUNSELOR/INTERN/DETOX TECH W/O LIC/CERT    | 641C.950  |
| 52107 | FTC LAWS/REGS RE ALC/DRUG/GAMBLING COUNSELORS      | 641C.950  |
| 52182 | USE INTOX LIQ/DRUG BY ON DUTY PHARM                | 639.283   |
| 52185 | MKT RESTRICTED DRUG/DEV/POISON BY UNLIC PERS       | 639.285   |
| 52199 | FRAUD BY WHOLESALE DISTRIBUTOR OF P-SCRIPT DRUGS   | 639.55    |
| 52492 | EXCESS USE INTOX OR C/S BY CIVIL OFF               | 283.45    |
| 53376 | MFG/COMPOUND/PROCESS/PACKAGE DRUG W/O LIC          | 585.550.1 |
| 53377 | FTC LAWS/REGS RE FOOD/DRUGS/COSMETICS              | 585.550.2 |
| 53406 | ATT MFG/COMPOUND/PROCESS/PACKAGE DRUG W/O LIC      | 585.550.1 |
| 53407 | ATT MFG/COMPOUND/PROCESS/PACKAGE DRUG W/O LIC      | 585.550.1 |
| 53408 | CONSP MFG/PROCESS/PACKAGE DRUG W/O LIC             | 585.550.1 |
| 53435 | FURN OR ATT, C/S TO STATE PRISONER                 | 212.160.1 |
| 53437 | POSS C/S OR PARAPHERNALIA BY DOC PRISONER          | 212.160.3 |
| 53464 | CONSP FURN C/S TO STATE PRISONER                   | 212.160.1 |
| 53466 | ATT POSS C/S OR PARAPHERNALIA BY DOC PRISONER      | 212.160.3 |
| 53467 | ATT POSS C/S OR PARAPHERNALIA BY DOC PRISONER      | 212.160.3 |
| 53468 | CONSP POSS C/S OR PARAPHERNALIA BY DOC PRISONER    | 212.160.3 |
| 53819 | INTOX PEDESTRIAN/ANIMAL RIDER ON ROAD              | 484B.297. |
| 54209 | W-CRAFT DUI ALC/DRUG                               | 488.41    |
| 54249 | DUI ALC/DRUG, A-CRAFT                              | 493.130.1 |
| 54331 | FAIL TO IMPLEMENT AC/DRUG TEST PGM                 | 382.115   |
| 54332 | FAIL TO CONDUCT PRE-EMPMT DRUG TESTING             | 382.301   |
| 54354 | POSSESS C/S  | 392.4     |
| 54355 | DUI C/S  | 392.4     |
| 54479 | USE/POSS DRUG-PARA                                 | 8.04.126  |
| 54480 | POSS DRUG NOT FOR I-STATE COMMERCE                 | 8.04.125  |
| 54555 | INTOX PEDESTRIAN/ANIMAL RIDER ON ROAD              | 10.14.040 |
| 54663 | INTOX PEDESTRIAN/ANIMAL RIDER ON ROAD              | 8.01.08A1 |
| 54763 | USE/POSS/MFG DRUG-PARA                             | 10.92.010 |
| 54809 | USE/POSS DRUG-PARA                                 | 9.453.566 |
| 54810 | USE/POSS DRUG/CHEM/POISON FOR EUPHORIA/HALLUCINATE | 9.454.346 |
| 54811 | POSS DRUG NOT FOR I-STATE COMMERCE                 | 9.454.351 |
| 54918 | INTOX PEDESTRIAN/ANIMAL RIDER ON ROAD              | 70.265    |
| 55038 | ENTER/USE RECREATION AREA WHILE INTOX OR INFL      | 455B.460  |
| 55141 | CONSP USE/POSS DRUG-PARA                           | 453.566   |
| 55199 | USE/POSS DRUG-PARA                                 | 53.195    |
| 55219 | SELL SCH I/II C/S, 2ND, REC FAC MNR, PARK-E/SCH    | 453.321.2 |
| 55381 | LOITER FOR PURP OF ENGAGING IN DRUG ACTIVITY       | 9.16.020  |
| 55548 | DRUG-PARA STORE OWNER ALLOW MINOR ON PREMISES      | 4.98.020  |
| 55549 | MINOR REMAIN ON DRUG-PARA STORE PREMISES           | 4.98.030  |
| 55632 | ADV DRUG-PARA                                      | 9.04.080  |
| 55633 | USE/POSS DRUG-PARA                                 | 9.04.070  |
| 55681 | CONSP TO POSSES SCH, I, II, III OR IV C/S 1ST/2ND  | 453.336.2 |
| 55828 | USE/POSS DRUG-PARA                                 | 9.21.010  |
| 56234 | POSS DRUG NOT FOR I-STATE COMMERCE                 | 53.19     |
| 56274 | ALLOW SELL/CONSUME/POSS C/S AT OUTDOOR FESTIVAL    | 25.271.6  |
| 56311 | POSS/CONSUME ALC BEV OR C/S IN PARK                | 95.275    |
| 56395 | DRIVER DISOBEY PEACE OFF WHILE DUI, WZ OR COMM VEH | 484B.550. |

| NOC   | NOC DESCRIPTION                                    | NRS       |
|-------|--|-----------|
| 56418 | UNLAW MISD ACT RE IMIT C/S                         | 8.17.040  |
| 56419 | USE/POSS DRUG-PARA                                 | 8.17.030  |
| 56525 | INTOX PEDESTRIAN/ANIMAL RIDER ON ROAD              | 6.06.755D |
| 56942 | UNLAW MISD ACT RE IMIT C/S                         | 10.02.010 |
| 56946 | ADV DRUG-PARA                                      | 10.02.010 |
| 56947 | USE/POSS DRUG/CHEM/POISON FOR EUPHORIA/HALLUCINATE | 10.02.010 |
| 56948 | POSS DRUG NOT FOR I-STATE COMMERCE                 | 10.02.010 |
| 56989 | POSS GUN UNDER INFL OF ALC/DRUG                    | 10.02.010 |
| 57484 | INTOX PEDESTRIAN/ANIMAL RIDER ON ROAD              | 7.01.08   |
| 57485 | INTOX PEDESTRIAN/ANIMAL RIDER ON ROAD              | 10.02.010 |
| 58184 | INTOX PEDESTRIAN/ANIMAL RIDER ON ROAD              | 14.331    |
| 58383 | ATT TO CONSPIRE TO VIOL UCS ACT                    | 453.401.1 |
| 58384 | ATT TO CONSPIRE TO VIOL UCS ACT                    | 453.401.1 |
| 58425 | USE/POSS DRUG/CHEM/POISON FOR EUPHORIA/HALLUCINATE | 8.40.010  |
| 58452 | ATT POSS DRUG NOT FOR I-STATE COMMERCE             | 454.351.1 |
| 58472 | UNLAW MFG/DISP/SELL DRUG/MEDICINE/CHEM NOT R/SBH   | 639.100.2 |
| 58473 | UNLAW MFG/DISP/SELL DRUG/MEDICINE/CHEM R/SBH       | 639.100.2 |
| 58481 | ATT DRIVER DISOBEY PEACE OFF WHILE DUI, WZ OR COMM | 484B.550. |
| 58482 | ATT DRIVER DISOBEY PEACE OFF WHILE DUI, WZ OR COMM | 484B.550. |
| 58506 | CONSP ADMIN DRUG TO AID COMM OF CERTAIN FELONIES   | 200.405   |
| 58558 | USE/POSS DRUG/CHEM/POISON FOR EUPHORIA/HALLUCINATE | 10.58.010 |
| 58701 | UNLAW ST AGENT PREVENT PATIENT OBT INVEST DRUG     | 454.690.3 |
| 58764 | LOITER FOR PURP OF ENGAGING IN DRUG ACTIVITY       | 5-1-4-4   |
| 58836 | POSS/CONSUME ALC BEV OR C/S IN PARK                | 4-2-13B19 |
| 58963 | INTOX PEDESTRIAN/ANIMAL RIDER ON ROAD              | 5-1-2/484 |
| 59362 | INTOX PEDESTRIAN/ANIMAL RIDER ON ROAD              | 8-1-1/484 |
| 59784 | INTOX PEDESTRIAN/ANIMAL RIDER ON ROAD              | 8-1-12/48 |
| 60037 | INTOX PEDESTRIAN/ANIMAL RIDER ON ROAD              | 7/2/2002  |
| 60589 | POSS DRUG NOT FOR I-STATE COMMERCE                 | 7/1/2025  |
| 60629 | CONSP TO POSS FIREARM UNDER INFL OF ALC/DRUG       | 202.257   |
| 60682 | FTC W/REPORTING/DATABASE LAWS REGARDING C/S        | 453.1635  |
| 60734 | ATT BY PHARM VIOL BOARD C/S REGS, P-SCRPT NOT REQ  | 453.505.1 |
| 60735 | ATT FALSE REP TO PHARM TO OBT C/S, P-SCRPT NOT REQ | 453.505.2 |
| 60737 | ATT POSS DANG DRUG W/O LEGAL P-SCRPT, (1ST/2ND)    | 454.316.1 |
| 60839 | ATT ADV/SOLICIT TO PROMO DISTR IMIT C/S, (1ST/2ND) | 453.332.4 |
| 60852 | ATT USE/POSS TO USE IMIT C/S, (1ST/2ND)            | 453.332.4 |
| 60942 | USE/POSS DRUG-PARA                                 | 8.02.120  |
| 61127 | PRESCRIBE SCH II C/S FOR SELF/SPOUSE/CHLD          | 453.381.1 |
| 61128 | ATT PRESCRIBE SCH II C/S FOR SELF/SPOUSE/CHLD      | 453.381.1 |
| 61129 | ATT PRESCRIBE SCH II C/S FOR SELF/SPOUSE/CHLD      | 453.381.1 |
| 61331 | INTOX PEDESTRIAN/ANIMAL RIDER ON ROAD              | 8/7/2005  |
| 61603 | OP OF VESSEL/TOWED DEV WHILE INTOX OR USE OF C/S   | 488.400.2 |
| 62062 | OPER PLACE FOR SALE/GIFT/USE OF C/S, 1ST OFF       | 453.316.1 |
| 62063 | ATT OPER PLACE FOR SALE/GIFT/USE OF C/S, 1ST OFF   | 453.316.1 |
| 62064 | ATT OPER PLACE FOR SALE/GIFT/USE OF C/S, 1ST OFF   | 453.316.1 |
| 62067 | SELL/TRANS OR ATT SCH 1 OR II C/S, 1ST OFF         | 453.321.2 |
| 62068 | SELL/TRANS OR ATT SCH 1 OR II C/S, 2ND OFF         | 453.321.2 |
| 62069 | SELL/TRANS OR ATT SCH 1 OR II C/S, 3RD+ OFF        | 453.321.2 |

| NOC   | NOC DESCRIPTION                                    | NRS       |
|-------|--|-----------|
| 62070 | SELL/TRANS OR ATT SCH III, IV OR V C/S, 1ST OFF    | 453.321.4 |
| 62071 | SELL/TRANS OR ATT SCH III, IV OR V C/S, 2ND OFF    | 453.321.4 |
| 62073 | POSS SCH I, II C/S LT 14 GRAMS, 1ST OR 2ND OFF     | 453.336.2 |
| 62074 | ATT POSS SCH I, II C/S LT 14 GRAMS, 1ST OR 2ND OFF | 453.336.2 |
| 62075 | ATT POSS SCH I, II C/S LT 14 GRAMS, 1ST OR 2ND OFF | 453.336.2 |
| 62076 | POSS SCH I, II C/S LT 14 GRAMS, 3RD+ OFF           | 453.336.2 |
| 62077 | ATT POSS SCH I, II C/S LT 14 GRAMS, 3RD+ OFF       | 453.336.2 |
| 62078 | ATT POSS SCH I, II C/S LT 14 GRAMS, 3RD+ OFF       | 453.336.2 |
| 62079 | POSS SCH I, II C/S 14 GRAMS BUT LT 28 GRAMS        | 453.336.2 |
| 62080 | ATT POSS SCH I, II C/S 14 GRAMS BUT LT 28 GRAMS    | 453.336.2 |
| 62081 | ATT POSS SCH I, II C/S 14 GRAMS BUT LT 28 GRAMS    | 453.336.2 |
| 62082 | POSS SCH I, II C/S 28 GRAMS BUT LT 42 GRAMS        | 453.336.2 |
| 62083 | ATT POSS SCH I, II C/S 28 GRAMS BUT LT 42 GRAMS    | 453.336.2 |
| 62084 | POSS SCH I, II C/S 42+ GRAMS                       | 453.336.2 |
| 62085 | ATT POSS SCH I, II C/S 42+ GRAMS                   | 453.336.2 |
| 62086 | POSS SCH III-V C/S LT 28 GRAMS, 1ST OR 2ND OFF     | 453.336.2 |
| 62087 | ATT POSS SCH III-V C/S LT 28 GRAMS, 1ST OR 2ND OFF | 453.336.2 |
| 62088 | ATT POSS SCH III-V C/S LT 28 GRAMS, 1ST OR 2ND OFF | 453.336.2 |
| 62089 | POSS SCH III-V C/S LT 28 GRAMS, 3RD+ OFF           | 453.336.2 |
| 62090 | ATT POSS SCH III-V C/S LT 28 GRAMS, 3RD+ OFF       | 453.336.2 |
| 62091 | ATT POSS SCH III-V C/S LT 28 GRAMS, 3RD+ OFF       | 453.336.2 |
| 62092 | POSS SCH III-V C/S 28 GRAMS BUT LT 200 GRAMS       | 453.336.2 |
| 62093 | ATT POSS SCH III-V C/S 28 GRAMS BUT LT 200 GRAMS   | 453.336.2 |
| 62094 | ATT POSS SCH III-V C/S 28 GRAMS BUT LT 200 GRAMS   | 453.336.2 |
| 62095 | POSS SCH III-V C/S 200+ GRAMS                      | 453.336.2 |
| 62096 | ATT POSS SCH III-V C/S 200+ GRAMS                  | 453.336.2 |
| 62097 | TRAFF SCH I-II C/S, FLNTRZPM/GHB, 100G BUT LT 400G | 453.3385. |
| 62098 | ATT TRAFF SCH I-II, FLNTRZPM/GHB 100G BUT LT 400G  | 453.3385. |
| 62099 | TRAFFIC SCH I, II C/S, FLNTRZPM/GHB, 400+ GRAMS    | 453.3385. |
| 62100 | ATT TRAFFIC SCH I, II C/S, FLNTRZPM/GHB, 400+ GRAM | 453.3385. |
| 62101 | USE OR BE UNDER THE INFLUENCE OF A C/S             | 453.411   |
| 62396 | SELL SCH I OR II C/S, 1ST, REC FAC MNR/PARK        | 453.321.2 |
| 62429 | ATT SELL/SUPPLY/PREScribe C/S IN PRESENCE OF CHILD | 453.3325. |
| 62494 | POSS GUN UNDER INFL OF ALC/DRUG                    | 1.08.020  |
| 62530 | USE/POSS DRUG-PARA                                 | 1.08.020  |
| 62531 | USE/POSS DRUG/CHEM/POISON FOR EUPHORIA/HALLUCINATE | 1.08.020  |
| 62532 | POSS DRUG NOT FOR I-STATE COMMERCE                 | 1.08.020  |
| 62553 | ATT USE C/S IN PRESENCE OF CHILD                   | 453.3325. |
| 65878 | INTOX PEDESTRIAN/ANIMAL RIDER ON ROAD              | 1.08.010  |
| 66046 | ATT CARRY/POSS FA DURING/IN RE COMM OF DRUG OFF    | 202.360.3 |
| 66061 | CARRY/POSS FA DURING AND IN RE COMM OF DRUG OFF    | 202.360.3 |
| 66101 | TRAFFIC FENTANYL MT 28 GRAMS/LT 42 GRAMS           | SB035     |
| 66102 | ATT TRAFFIC FENTANYL MT 28 GRAMS/LT 42 GRAMS       | SB035     |
| 66103 | TRAFFIC FENTANYL MT 42 GRAMS/LT 100 GRAMS          | SB035     |
| 66104 | ATT TRAFFIC FENTANYL MT 42 GRAMS/LT 100 GRAMS      | SB035     |
| 66105 | MISREP OF FENTANYL PRODUCT                         | SB035     |
| 66106 | ATT MISREP OF FENTANYL                             | SB035     |
| 66114 | CONSP DRIVER DISOBEY PEACE OFF WHILE DUI           | 484B.550. |

| NOC   | NOC DESCRIPTION                                   | NRS       |
|-------|---|-----------|
| 66120 | INTOX PEDESTRIAN ON ROAD                          | 10.04.030 |
| 66177 | SELL SCH I/II C/S, 1ST-1K FT SCH/PLYGRD/PARK/POOL | 453.321.2 |
| 66179 | SELL SCH I OR II C/S, 1ST-BUS STOP W/1 HR OF SCH  | 453.321.2 |
| 66185 | POSS DRUG NOT FOR I-STATE COMMERCE                | 9.24.010  |