

Sober research

Researcher seeks alternative to field sobriety tests

By Kyle Ross
THE BATTALION

Texas A&M researchers are developing technology that could help the work of law enforcement become more dependable.

Jay Porter, associate professor for the Department of Engineering Technology and Industrial Distribution, is spearheading work being done on a new, more reliable sobriety field test. Porter's goal is to eliminate dependence on human senses by introducing an electronic test to replace current field sobriety tests and eliminate human error.

In 1977, the Southern California Research Institute conducted studies on the consistency and accuracy of field sobriety testing. This research, sponsored by The National Highway Traffic Safety Administration, consisted of 238 drinking subjects and 10 police officers.

The study found that current sobriety tests given by law enforcement were reliable and could be used as evidence during trial. The federal government and, for the most part, society as a whole embraced the results. But the trust the public has placed in the accuracy of field sobriety tests may not be completely warranted.

Sobriety tests, as they stand, have inherent discrepancies. Despite efforts to regulate testing by standardizing the tests under the rules of the Standardized Field Sobriety Test, one flaw in the tests could not be remedied — human observation. "Current field tests require the officer to make judgment calls based on the performance (or physical or emotional state) of the suspect," Porter said. "While the tests are generally videotaped, it can still be difficult for an officer on the stand to recall exactly what he was thinking and what transpired the night of a particular arrest."

Despite the thumbs-up given by the NHTSA, error was discovered in the 1977 studies. The 10 police officers arrested 101 people. Of these arrests, an alarming 47 subjects were non-deserving; that is, none exhibited a blood alcohol level higher than .099 percent. These results forced the

NHTSA to grant further research.

In 1981 a second study, essentially a repeat of the 1977 study, was conducted with a few changes in place. The study would only focus on three methods of field sobriety testing believed to be the most reliable. More than 250 people were subjected to "the walk and turn," the "one leg stand" and the "horizontal gaze" tests. The NHTSA reported 118 arrests.

But again the results led to concern among the law enforcement community: 32 percent of the arrests were incorrect. Furthering this inconsistency, 21 people arrested had no alcohol in their system.

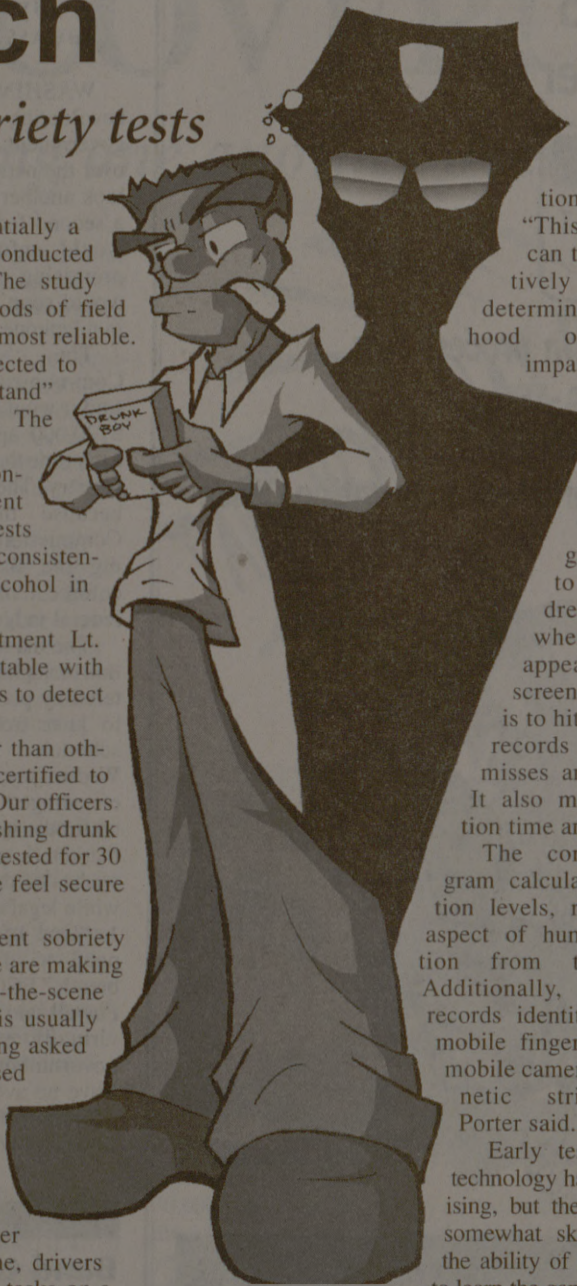
College Station Police Department Lt. Mark Langwell says he is comfortable with the ability of trained police officers to detect intoxicated drivers.

"While I admit some are better than others, our guys are all trained and certified to give these tests," Langwell said. "Our officers get to be pretty good at distinguishing drunk drivers. The tests given have been tested for 30 years, they're standardized and we feel secure in that."

Langwell may appreciate current sobriety testing, but lawyers across the state are making small fortunes by disqualifying on-the-scene evidence in court. Their premise is usually the same — police officers are being asked to make an opinionated arrest based on the interpretation of inconsistent and subjective tests.

Through his research, Porter said he hopes to bring a reliable sobriety test to law enforcement. His tester is based on a computer algorithm. Similar to a video game, drivers would be asked to execute various tasks on a keyboard or touch screen to demonstrate their level of response.

"The system administers both memory and physical dexterity tests and records results such as number of mistakes, timing and dexterity informa-



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tion," Porter said. "This information can then be objectively analyzed to determine the likelihood of physical impairment."

Among the tasks are a seven-digit recall and a "gopher game." Similar to the children's game, when an icon appears on the screen the suspect is to hit it. The game records successes, misses and false hits. It also monitors reaction time and accuracy.

The computer program calculates intoxication levels, removing the aspect of human observation from the testing. Additionally, the tester records identity through a mobile fingerprint unit, a mobile camera and a magnetic stripe reader, Porter said.

Early testing of this technology has been promising, but the results were somewhat skewed due to the ability of the individual to learn the game.

"We are currently revising the tests to solve this problem," Porter said. "Discussions with state law enforcement officials have indicated that they are interested in the technology if it can be refined."

U.S. alleges fraud in suit against Medco

By David B. Caruso
THE ASSOCIATED PRESS

PHILADELPHIA — Federal prosecutors accused the nation's biggest pharmacy benefit-management company Monday of defrauding clients by destroying prescriptions, switching patients' medications without their consent and giving favorable treatment to drug companies that paid hefty rebates.

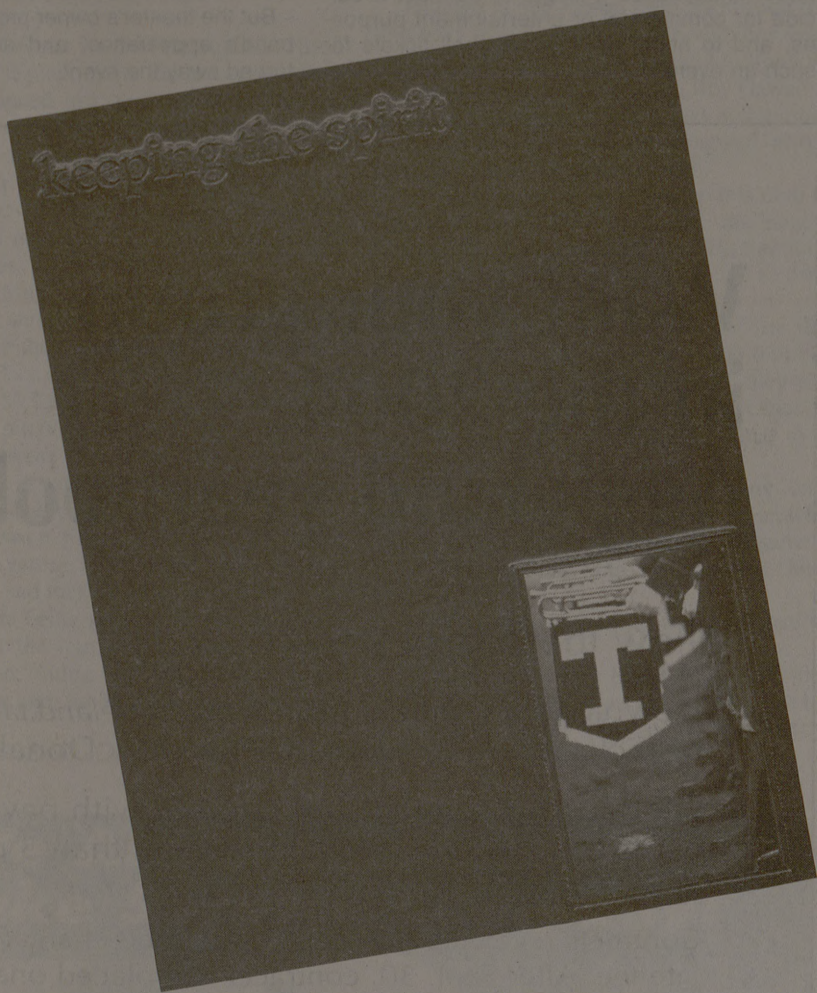
A lawsuit filed in Philadelphia accuses Medco Health Solutions of altering prescription records to avoid paying late penalties in its mail-order business and steering customers to drugs made by its former parent company, Merck, instead of competitors' less-expensive products.

Medco officials immediately called the charges either false or overstated.

"The full story will show that our people are highly skilled, our policies are rigorously enforced and our pharmacy practices, which are regularly inspected by state boards of pharmacy, lead our industry in lowering the cost of providing high-quality health care for millions of Americans," the company's chairman, president and CEO, David Snow, said in a statement.

The company acknowledged that some violations cited in the complaint occurred, but said they were isolated incidents that happened years ago and have since been corrected.

Pharmacy benefit-management companies use bulk-purchasing power to lower drug costs.



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