

DWI INVESTIGATION FIELD NOTES

I. NAME _____ SEX _____ RACE _____
ADDRESS _____ CITY/STATE _____ OP.LIC.NO. _____
D.O.B. _____ / _____ / _____ SOC. SEC. # _____
VEHICLE MAKE _____ YEAR _____ LIC. _____ STATE _____
DISPOSITION _____ NO. PASSENGERS _____
INCIDENT LOCATION _____
DATE _____ / _____ / _____ TIME _____ CRASH YES NO

II. VEHICLE IN MOTION

INITIAL OBSERVATIONS _____
OBSERVATION OF STOP _____

III. PERSONAL CONTACT

OBSERVATION OF DRIVER _____
STATEMENTS _____
PRE-EXIT SOBRIETY TESTS _____
OBSERVATION OF THE EXIT _____
ODORS _____

GENERAL OBSERVATIONS

SPEECH _____
ATTITUDE _____
CLOTHING _____
PHYSICAL DEFECTS / DRUGS OR MEDICATIONS USED _____

IV. PRE-ARREST SCREENING

HORIZONTAL GAZE NYSTAGMUS

Equal Pupils Yes No LACK OF SMOOTH PURSUIT
Equal Tracking Yes No DISTINCT AND SUSTAINED NYSTAGMUS AT MAXIMUM DEVIATION
Vertical Nystagmus Yes No ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
Other (i.e., Resting Nystagmus) _____

| LEFT | RIGHT |
|------|-------|
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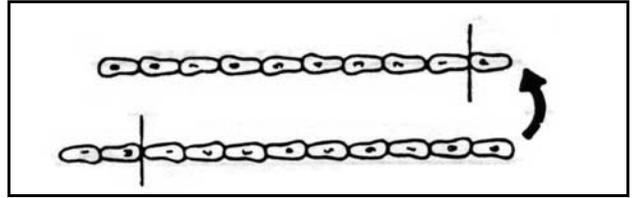
WALK AND TURN

INSTRUCTIONS STAGE

CANNOT KEEP BALANCE

STARTS TOO SOON

WALKING STAGE



FIRST NINE STEPS

SECOND NINE STEPS

STOPS WALKING

MISSES HEEL -TO- TOE

STEPS OFF LINE

RAISES ARMS

ACTUAL STEPS TAKEN

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IMPROPER TURN (Describe) _____

CANNOT DO TEST (EXPLAIN) _____

OTHER: _____

ONE LEG STAND

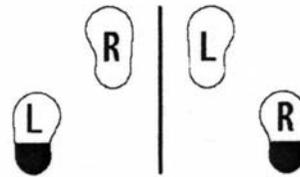
| | |
|---|---|
| L | R |
| | |
| | |
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| | |

Sways while balancing.

Uses arms to balance.

Hopping.

Puts foot down.



Type of Footwear

CANNOT DO TEST (EXPLAIN) _____

OTHER: _____

OTHER FIELD SOBRIETY TESTS

NAME OF TEST _____

DESCRIBE PERFORMANCE _____

NAME OF TEST _____

DESCRIBE PERFORMANCE _____

NAME OF TEST _____

DESCRIBE PERFORMANCE _____

PBT (1) (optional) Time: _____ Results: _____

PBT (2) (optional) Time: _____ Results: _____