



**SEPTUAGÉSIMO CUARTO PERÍODO ORDINARIO DE SESIONES**  
**11-14 de diciembre, 2023**  
**Washington D.C.**

**OEA/Ser.L/XIV.2.**  
**CICAD/doc.2815/23**  
**13 de diciembre, 2023**  
**Original: inglés**

**SISTEMA NACIONAL DE INFORMACIÓN DE LABORATORIOS FORENSES  
(NFLIS)**

# Sistema Nacional de Información de Laboratorios Forenses (NFLIS)



Liqun L. Wong, Jefe de Unidad

Sección de evaluación de drogas y sustancias  
químicas

Administración del control de drogas de Estados  
Unidos

DRUG ENFORCEMENT ADMINISTRATION

NFLIS

NATIONAL FORENSIC LABORATORY  
INFORMATION SYSTEM

# Objetivo principal del sistema NFLIS



**Ley de sustancias controladas (CSA)**

Salvar vidas

Clasificación de drogas

**Acciones de control**

Complemento de las bases de datos de salud pública

Prioridad a la interdicción de drogas

Reglamentación de los precursores

**Datos científicos verificados**



# Componentes del NFLIS



## NFLIS-Drug

Recoge los resultados de los análisis de drogas de los laboratorios de investigación criminal en los ámbitos federal, estatal y local

## NFLIS-MEC

Las oficinas de los médicos forenses informan sobre las muertes en las que se detectaron drogas



## NFLIS-Tox

Los laboratorios de toxicología públicos y privados comunican los resultados toxicológicos de las pruebas realizadas antes del fallecimiento del paciente

# Repercusiones del NFLIS - Informes del Congreso



United States Government Accountability Office  
Report to Congressional Addressees

April

**Opioides sintéticos:**  
consideraciones para la  
clasificación por categorías  
de las sustancias  
relacionadas con el fentanilo

**Fentanyl-Related  
Substances**

## REPORT Informe al Congreso

Evaluación de necesidades de laboratorios  
forenses y oficinas de médicos forenses

**NIJ.OJP.GOV** National Institute  
of Justice

UNITED STATES OF AMERICA

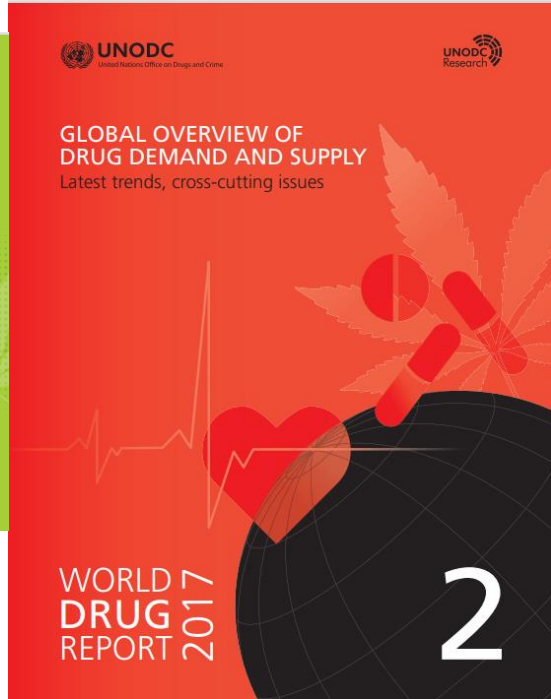
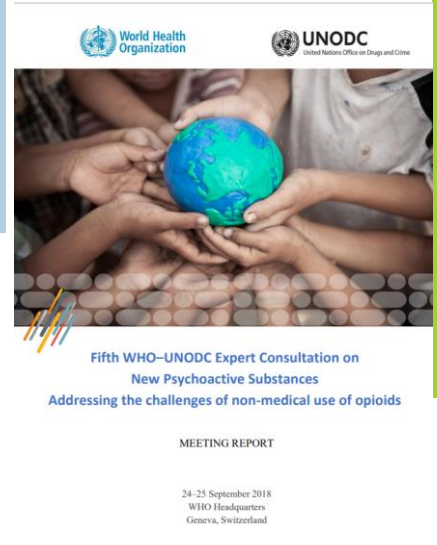
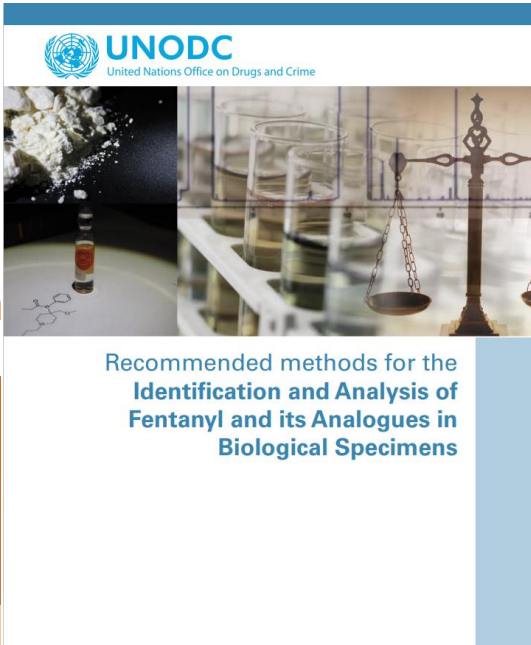
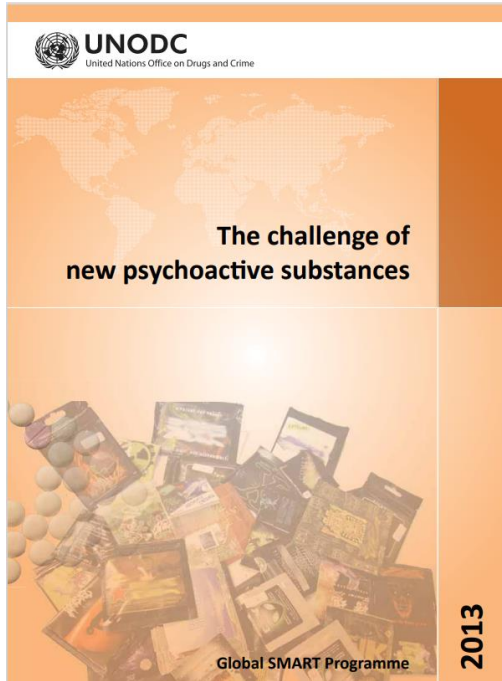
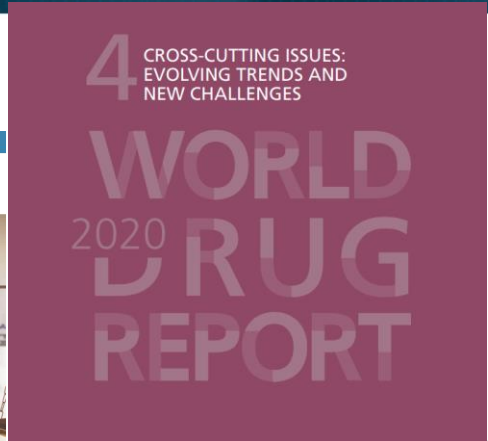
### Comisión de lucha contra el tráfico de opioides sintéticos

#### Final Report

The United States Senate  
The United States House of Representatives  
The Office of National Drug Control Policy  
The Drug Enforcement Administration  
The Department of Homeland Security  
The Department of Defense  
The Department of the Treasury  
The Department of State  
The Office of the Director of National Intelligence

A row of logos for various U.S. government agencies, including the U.S. House of Representatives, U.S. Senate, U.S. Department of Justice, U.S. Department of Homeland Security, U.S. Department of Defense, U.S. Department of the Treasury, U.S. Department of State, and U.S. Office of the Director of National Intelligence.

# Informes del NFLIS – Citados por informes de UNODC



# Servicios públicos del sistema NFLIS - Acciones de control de apoyo



## FEDERAL REGISTER

The Daily Journal of the United States Government

Document Search

Documents Public Inspection 0

"NFLIS" 153 documents

Show Advanced Search Learn More

TYPE	AGENCY	TOPIC	DATE	ACTIONS
Proposed Rule	Justice Department	Agency Information Collection Activities: New Collection; Comment Request	06/16/1997	
Rule	Drug Enforcement Administration	laboratories also known as National Forensic Laboratory Information System (NFLIS); 3. Agency form number: None; Applicable component of the Department	03/31/2004	
Notice	Health and Human Services Department	Registration and Reregistration Application Fees	08/09/2002	
	Substance Abuse and Mental Health Services Administration	collected by the NFLIS is necessary to conduct a complete and thorough scheduling review of a substance. The analyzed drug evidence reported to NFLIS will include ... be occasions when DEA provides NFLIS data for non-related regulatory and law enforcement activities...		
	Food and Drug Administration	Schedules of Controlled Substances: Placement of alpha-methyltryptamine and 5-methoxy-N,N-diisopropyltryptamine Into Schedule I of the Controlled Substances Act	03/31/2004	
	Administrative practice and procedure	powder. From 2001 to 2003, National Forensic Laboratory Information System (NFLIS) registered 10 and 12 cases of AMT and 5-MeO-DIPT, respectively. AMT drug		
	Drug traffic control			

**21556 Federal Register / Vol. 87, No. 70 / Tuesday, April 12, 2022 / Rules and Regulations**

**DEPARTMENT OF JUSTICE**  
**Drug Enforcement Administration**  
**21 CFR Part 1308**  
**[Docket No. DEA-900]**

**Schedules of Controlled Substances: Temporary Placement of Butonitazene, Etonitazene, Flunitazene, Metodesnitazene, Metonitazene, N-Pyrrolidino etonitazene, and Protonitazene in Schedule I**

**AGENCY:** Drug Enforcement Administration, Department of Justice.  
**ACTION:** Temporary amendment; temporary scheduling order.

**SUMMARY:** The Administrator of the Drug Enforcement Administration is issuing this temporary order to schedule seven synthetic benzimidazole-opioid substances, as identified in this order, in schedule I of the Controlled Substances Act. This action is based on a finding by the Administrator that the placement of these seven substances in schedule I is necessary to avoid imminent hazard to the public safety. As a result of this order, the regulatory controls and administrative, civil, and criminal sanctions applicable to schedule I controlled substances will be imposed on persons who handle (manufacture, distribute, reverse distribute, import, export, engage in research, conduct instructional activities or chemical analysis with, or possess) or propose to handle these seven specified controlled substances.

**DATES:** This temporary scheduling order is effective April 12, 2022, until April 12, 2024. If this order is extended or made permanent, DEA will publish a document in the Federal Register.

**FOR FURTHER INFORMATION CONTACT:** Terrence L. Boos, Ph.D., Drug and Chemical Evaluation Section, Diversion Control Division, Drug Enforcement Administration; Mailing Address: 8701 Morrisette Drive, Springfield, Virginia 22152; Telephone: (571) 362-3249.

**SUPPLEMENTARY INFORMATION:** The Drug Enforcement Administration (DEA) issues a temporary scheduling order<sup>1</sup>

<sup>1</sup> Though DEA has used the term "final order" with respect to temporary scheduling orders in the past, this order adheres to the statutory language of 21 U.S.C. 811(b), which refers to a "temporary scheduling order." No substantive change is intended.

(in the form of a temporary amendment) to add the following seven substances, including their isomers, esters, ethers, salts, and salts of isomers, esters, and ethers whenever the existence of such isomers, esters, ethers, and salts is possible, to schedule I under the Controlled Substances Act (CSA):

- 2-(2-(4-butoxybenzyl)-5-nitro-1H-benzimidazol-1-yl)-N,N-diethylethan-1-amine (butonitazene),
- 2-(2-(4-ethoxybenzyl)-1H-benzimidazol-1-yl)-N,N-diethylethan-1-amine (etodensitazene; etazene),
- N,N-diethyl-2-(2-(4-fluorobenzyl)-5-nitro-1H-benzimidazol-1-yl)ethan-1-amine (flunitazene),
- N,N-diethyl-2-(2-(4-methoxybenzyl)-1H-benzimidazol-1-yl)ethan-1-amine (metodesnitazene; etonitazene),
- N,N-diethyl-2-(2-(4-methoxybenzyl)-5-nitro-1H-benzimidazol-1-yl)ethan-1-amine (metonitazene),
- 2-(4-(ethoxybenzyl)-5-nitro-1-(2-pyrrolidin-1-yl)ethyl)-1H-benzimidazole (N-pyrrolidino etonitazene; etonitazepyne), and
- N,N-diethyl-2-(5-nitro-2-(4-propoxybenzyl)-1H-benzimidazol-1-yl)ethan-1-amine (protonitazene).

**Legal Authority**

The CSA provides the Attorney General (as delegated to the Administrator of DEA (Administrator) pursuant to 28 CFR 0.100) with the authority to temporarily place a substance in schedule I of the CSA for two years without regard to the requirements of 21 U.S.C. 811(b), if the Administrator finds that such action is necessary to avoid an imminent hazard to the public safety. 21 U.S.C. 811(h)(1). In addition, if proceedings to control a substance are initiated under 21 U.S.C. 811(a)(1) while the substance is temporarily controlled under section 811(b), the Administrator may extend the temporary scheduling for up to one year. 21 U.S.C. 811(h)(2).

Where the necessary findings are made, a substance may be temporarily scheduled if it is not listed in any other schedule under 21 U.S.C. 812, and if there is no exemption or approval in effect for the substance under section 505 of the Federal Food, Drug, and Cosmetic Act, 21 U.S.C. 355, 21 U.S.C. 811(h)(1); 21 CFR part 1308.

**Background**

The CSA requires the Administrator to notify the Secretary of the Department of Health and Human Services (HHS) of an intent to place a substance in schedule I of the CSA temporarily (i.e., to issue a temporary scheduling order). 21 U.S.C. 811(h)(4).

The then-Acting Administrator transmitted the required notice to the Assistant Secretary for Health of HHS (Assistant Secretary),<sup>2</sup> by letter dated June 16, 2021, regarding butonitazene, etodensitazene, flunitazene, metodesnitazene, metonitazene, and protonitazene. In a subsequent letter dated August 25, 2021, the Administrator transmitted the required notice to the Assistant Secretary regarding N-pyrrolidino etonitazene. The Assistant Secretary responded to these notices by letters dated July 7 and September 10, 2021, and advised that, based on a review by the Food and Drug Administration (FDA), there are currently no investigational new drug applications (INDs) or approved new drug applications (NDAs) for butonitazene, etodensitazene, flunitazene, metodesnitazene, metonitazene, N-pyrrolidino etonitazene, and protonitazene. The Assistant Secretary also stated that HHS had no objection to the temporary placement of these substances in schedule I of the CSA.

DEA has taken into consideration the Assistant Secretary's comments as required by subsection 811(h)(4). Butonitazene, etodensitazene, flunitazene, metodesnitazene, metonitazene, N-pyrrolidino etonitazene, and protonitazene currently are not listed in any schedule under the CSA, and no exemptions or approvals under 21 U.S.C. 355 are in effect for these seven benzimidazole-opioids. DEA has found that the control of these seven benzimidazole-opioids in schedule I on a temporary basis is necessary to avoid an imminent hazard to the public safety.

As required by 21 U.S.C. 811(h)(1)(A), DEA published a notice of intent (NoI) to temporarily schedule butonitazene, etodensitazene, flunitazene, metodesnitazene, metonitazene, N-pyrrolidino etonitazene, and protonitazene on December 7, 2021. 86 FR 69182. That NoI discussed findings from DEA's three-factor analysis dated November 2021, which DEA made available on [www.regulations.gov](http://www.regulations.gov).

To find that temporarily placing a substance in schedule I of the CSA is necessary to avoid an imminent hazard to the public safety, the Administrator must consider three of the eight factors set forth in 21 U.S.C. 811(c): the substance's history and current pattern of abuse; the scope, duration and significance of abuse; and what, if any,

<sup>2</sup> The Secretary of HHS has delegated to the Assistant Secretary for Health of HHS the authority to make domestic drug scheduling recommendations. 56 FR 35460, July 1, 1991.

**48112 Federal Register / Vol. 88, No. 142 / Wednesday, July 26, 2023 / Rules and Regulations**

**DEPARTMENT OF JUSTICE**  
**Drug Enforcement Administration**  
**21 CFR Part 1308**  
**[Docket No. DEA-999]**

**Schedules of Controlled Substances: Temporary Placement of Etizolam, Flualprazolam, Clonazepam, Flubronzepam, and Diclazepam in Schedule I**

**AGENCY:** Drug Enforcement Administration, Department of Justice.  
**ACTION:** Temporary amendment; temporary scheduling order.

**SUMMARY:** The Administrator of the Drug Enforcement Administration is issuing this temporary order to schedule five synthetic benzodiazepine substances: etizolam, flualprazolam, clonazepam, flubronzepam, and diclazepam, in schedule I of the Controlled Substances Act. This action is based on a finding by the Administrator that the placement of these five substances in schedule I is necessary to avoid imminent hazard to the public safety. As a result of this order, the regulatory controls and administrative, civil, and criminal sanctions applicable to schedule I controlled substances will be imposed on persons who handle (manufacture, distribute, reverse distribute, import, export, engage in research, conduct instructional activities or chemical

various projects. A tool manufacturer used the influencer an expensive full-size lathe in the hope that the influencer would post about it. The woodworker uses the lathe for several products and comments favorably about it in videos. If a significant minority of viewers are likely unaware that the influencer received the lathe free of charge, the woodworker should clearly and conspicuously disclose receiving it for free, a fact that could affect the credibility that viewers attach to the endorsements. The manufacturer should advise the woodworker at the time it provides the lathe that this connection should be disclosed, and it should have reasonable procedures in place to monitor the influencer's postings for compliance and follow those procedures. (See § 255.1(d).)

(8) *Example 8.* An online community has a section dedicated to discussions of robotic products. Community members ask and answer questions and otherwise exchange information and opinions about robotic products and developments. Unbeknownst to this community, an employee of a leading home robot manufacturer has been posting messages on the discussion board promoting the manufacturer's new product. Knowledge of this poster's employment likely would affect the weight or credibility of the endorsements. Therefore, the poster should clearly and conspicuously disclose their relationship to the manufacturer. To limit its own liability for such posts, the employer should engage in appropriate training of employees. To the extent that the employer has directed such endorsements or otherwise has reason to know about them, it should also be monitoring them and taking other steps to ensure compliance. (See § 255.1(d).)

The disclosure requirements in this example would apply equally to employees posting their own reviews of the product on retail websites or online platforms.

(9) *Example 9.* A college student signs up to be part of a program in which points are awarded each time a participant posts on social media about a particular advertiser's products. Participants can then exchange their points for prizes, such as concert tickets or electronics. These incentives would materially affect the weight or credibility of the college student's endorsements. They should be clearly and conspicuously disclosed, and the advertiser should take steps to ensure that these disclosures are being provided in an adequate manner.

(10) *Example 10.* Great Paper Company sells photocopy paper with packaging that has a seal of approval from the No Chlorine Products Association, a non-profit third-party association. Great Paper Company paid the No Chlorine Products Association a reasonable fee for the evaluation of its product and its manufacturing process. Consumers would reasonably expect that marketers have to pay for this kind of certification. Therefore, there is no unexpected material connection between the company and the association, and the use of the seal without disclosure of the fee paid to the association would not be deceptive.

(11) *Example 11.* A coffee lover creates a blog that reviews coffee makers. The blogger writes the content independently of the marketers of the coffee makers but includes affiliate links to websites on which consumers can buy these products from their marketers. Whenever a consumer clicks on such a link and buys the product, the blogger receives a portion of the sale. Because a disclosure of this compensation could affect the weight or credibility of the reviews given to the blogger's reviews, the reviews should clearly and conspicuously disclose the compensation.

(12) *Example 12.* (i) Near the beginning of a podcast, the host reads what is obviously a commercial for a product. Even without a statement identifying the advertiser as a sponsor, listeners would likely still expect that the podcaster was compensated, so there is no need for a disclosure of payment for the commercial. Depending upon the language of the commercial, however, the audience may believe that the host is expressing their own views in the commercial, in which case the host would need to hold their views expressed. (See § 255.0(b).)

(ii) Assume that the host also mentions the product in a social media post. The fact that the host did not have to make a disclosure in the podcast has no bearing on whether there is to be a disclosure in the social media post.

(13) *Example 13.* An app developer gives a consumer a game app to review. The consumer clearly and conspicuously discloses in the review that they were given the app, which normally costs 99 cents, for free. That disclosure suggests that the consumer did not receive anything else for the review. If the app developer also gave the consumer \$50 for the review, the mere disclosure that the app was free would be inadequate.

(14) *Example 14.* Speed Ways, an internet Service Provider, advertises that it has the "Fastest ISP Services" as determined by the "Data Speed Testing Company." If Speed Ways

commissioned and paid for the analysis of its and competing services, it should clearly and conspicuously disclose its relationship to the testing company because the relationship would likely be material to consumers in evaluating the claim. If the "Data Speed Testing Company" is not a bona fide independent testing organization with expertise in judging ISP speeds or it did not conduct valid tests that supported the endorsement message, the endorsement would also be deceptive. (See § 255.3(c)(3).)

**§ 255.6 Endorsements directed to children.**

Endorsements in advertisements addressed to children may be of special concern because of the character of the audience. Practices that would not ordinarily be questioned in advertisements addressed to adults might be questioned in such cases.

By direction of the Commission.  
 April 1, 2023.  
 Tabery,  
 Secretary.  
 [FR Doc. 2023-14796 Filed 7-25-23; 8:45 am]  
 BILLING CODE 4910-6P

# Repercusiones del sistema NFLIS en el sector privado



Log In | Recently Purchased | Favorites | My COAs | Cart (0)

**Cerilliant**  
Analytical Reference Standards

science, smarter.

about us | quality | capabilities | products | news/events | contact | my account |  **SEARCH CATALOG**

search results

Search within Results

Search Results for Analytical Reference Standards Catalog > NFLIS Top 25

Item	Description	US List Price	Qty	Qty in Cart	Add to Cart
A-007	(±)-Amphetamine, 1.0 mg/mL	\$27.70	1		ADD TO CART
A-008	S(+)-Amphetamine (dextro-Amphetamine), 1.0 mg/mL	\$34.20	1		ADD TO CART
A-049	R(-)-Amphetamine, 1.0 mg/mL	\$36.60	1		ADD TO CART
A-903	Alprazolam, 1.0 mg/mL	\$27.70	1		ADD TO CART
B-044	Buprenorphine, 1.0 mg/mL	\$151.00	1		ADD TO CART
B-902	Buprenorphine, 100 µg/mL	\$27.70	1		ADD TO CART
C-006	Codeine, 1.0 mg/mL	\$27.70	1		ADD TO CART
C-008	Cocaine, 1.0 mg/mL	\$27.70	1		ADD TO CART
C-015	Codeine, 100 µg/mL	\$32.50	1		ADD TO CART
C-045	Cannabidiol, 1.0 mg/mL	\$36.60	1		ADD TO CART
C-045S-1ML	Cannabidiol, 1.0 mg/mL	\$36.60	1		ADD TO CART
C-046	Cannabinol, 1.0 mg/mL	\$36.60	1		ADD TO CART
C-046S-1ML	Cannabinol, 1.0 mg/mL	\$36.60	1		ADD TO CART
C-077	Carisoprodol, 1.0 mg/mL	\$38.10	1		ADD TO CART
C-088	Cocaine Multi-Component Mixture-4, 250 µg/mL of each component	\$202.00	1		ADD TO CART
C-115	Cannabinol-O <sub>2</sub> , 100 µg/mL	\$133.00	1		ADD TO CART
C-907	Clonazepam, 1.0 mg/mL	\$27.70	1		ADD TO CART
D-907	Diazepam, 1.0 mg/mL	\$27.70	1		ADD TO CART
H-003	Hydrocodone, 1.0 mg/mL	\$27.70	1		ADD TO CART
H-004	Hydromorphone, 1.0 mg/mL	\$27.70	1		ADD TO CART
H-038	Heroin, 1.0 mg/mL	\$32.90	1		ADD TO CART
K-002	Ketamine HCl, 1.0 mg/mL (as free base)	\$27.70	1		ADD TO CART
L-901	Lorazepam, 1.0 mg/mL	\$27.70	1		ADD TO CART
M-005	Morphine, 1.0 mg/mL	\$27.70	1		ADD TO CART
M-007	(±)-Methadone, 1.0 mg/mL	\$27.70	1		ADD TO CART

Clinical Update: August 2023



## SYNTHETIC CANNABINOIDS

Novel Psychoactive Substances (NPS) are a diverse group of synthetic substances created to mimic the effects of prescription or illicit drugs that are often abused.<sup>1</sup> There are various classes of NPS including synthetic cannabinoids, synthetic stimulants, designer opioids, designer benzodiazepines, hallucinogens/dissociatives, and others. NPS may change frequently as legislation to control specific chemical structures or classes of NPS is introduced. Once an NPS has been deemed a controlled substance, often new, modified, non-regulated NPS appear. This remains a challenge for regulatory and enforcement agencies, monitoring institutions, clinical and toxicology laboratories, as well as healthcare providers.

Synthetic cannabinoids and synthetic stimulants were among the first classes of NPS available in the United States. However, reports of detection of these two classes of NPS have been declining in recent years (Figure 1). This is likely due to legislation that targets specific chemical structures and entire classes of substances. In 2021, China, often a source of synthetic drugs, issued a class-wide ban of synthetic cannabinoid receptor agonists.

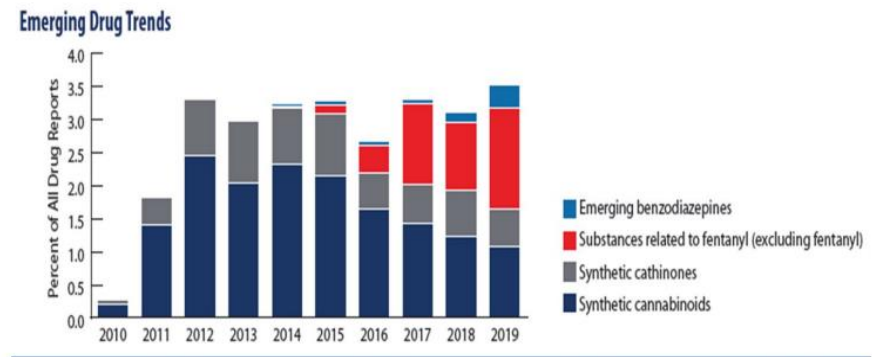


Figure 1. National Forensic Laboratory Information System (NFLIS)-Drug



# Repercusiones del NFLIS - Política estatal en materia de drogas



LOUISIANA OPIOID SURVEILLANCE INITIATIVE  
Bureau of Health Informatics



**NATIONAL FORENSIC LABORATORY INFORMATION SYSTEM (NFLIS)**  
March 2019

The National Forensic Laboratory Information System (NFLIS) is a program that systematically collects drug chemistry analysis results from cases where drugs have been seized in law enforcement operations and analyzed by state, local, and federal forensic laboratories.<sup>1</sup> NFLIS data provide valuable information related to the types of substances found in illegal markets and changes in substances over time, but the NFLIS system is not a reliable source for tracking trends in volume or quantity of drugs in the state. Laboratories can only analyze samples that are sent to them, meaning there may be an undercount of identified drugs if all law enforcement agencies do not send all samples to the lab. Different labs may also have varying procedures for handling drug evidence; some labs analyze all evidence submitted, whereas others only analyze selected drugs.



## STATE OF OHIO BOARD OF PHARMACY

Search

CONTACT

ABOUT

VERIFY LICENSE

PUBLICATIONS

LICENSING / CE

LAWS & RULES

COMPLIANCE / ENFORCEMENT

### This is an official CDC HEALTH UPDATE

Distributed via the CDC Health Alert Network  
August 25, 2016, 15:15 ET (3:15 PM ET)  
CDC/HAN-00395

#### Influx of Fentanyl-laced Counterfeit Pills and Toxic Fentanyl-related Compounds Further Increases Risk of Fentanyl-related Overdose and Fatalities

##### Summary

On October 26, 2015, CDC issued HAN 384 (<http://emergency.cdc.gov/han/han00384.asp>) that alerted (1) public health departments, health care professionals, first responders, and medical examiners and coroners of the increase in fentanyl-related unintentional overdose fatalities in multiple states primarily driven by illicitly manufactured fentanyl (IMF) (i.e., non-pharmaceutical fentanyl); (2) provided recommendations for improving detection of fentanyl-related overdose outbreaks; and (3) encouraged states to expand access to naloxone and training for administering naloxone to reduce opioid overdose deaths.

The purpose of this HAN update is to alert public health departments, health care professionals, first responders, and medical examiners and coroners to new developments that have placed more people at risk for fentanyl-involved overdoses from IMF and may increase the risk of non-fatal and fatal overdoses. These developments include the following: (1) a sharp increase in the availability of counterfeit pills containing varying amounts of fentanyl and fentanyl-related compounds (e.g., labeled as Oxycodone, Xanax, and Norco); (2) the potential for counterfeit pills containing fentanyl and fentanyl-related compounds to be broadly distributed across the United States which could impact states not previously impacted by IMF and persons using diverted prescription pills (i.e., licit drugs diverted for illicit purposes and involves the diversion of drugs from legal and medically necessary uses towards uses that are illegal and typically not medically authorized or necessary); (3) the widening array of toxic fentanyl-related compounds being mixed with heroin or sold as heroin, including extremely toxic analogs such as carfentanyl, and (4) continued increases in the supply and distribution of IMF (<http://www.cdc.gov/drugoverdose/data/fentanyl-cs-reports.html>).

##### Background

In July 2016, the Drug Enforcement Administration (DEA) issued a nationwide report indicating that hundreds of thousands of counterfeit pills have been entering the U.S. drug market since 2014, some containing deadly amounts of fentanyl and fentanyl analogs [2]. Traditionally, fentanyl and fentanyl analogs in the illicit market have been mixed into heroin or sold as heroin, often without the knowledge of the consumer, and have primarily impacted areas where white powder heroin is prevalent, including the Northeast, Midwest, and Southeast regions of the United States. The influx of counterfeit pills, which closely resemble oxycodone [2,3], Xanax [3], and Norco [4,5], has increased the chance of fentanyl-involved overdoses among persons misusing prescription opioids or benzodiazepines who seek diverted medications on the illicit market [2]. In addition, persons who inject, sniff, or snort drugs; Persons who misuse prescription pills are geographically widespread; thus, the potential risk for fentanyl overdose has spread beyond those regions previously known to be impacted by IMF, and could intensify the impact in regions already affected by IMF.

The supply, distribution, and potency of illicitly manufactured fentanyl and fentanyl-related compounds in the U.S. drug market is evolving. Carfentanyl, an extremely potent fentanyl analog, has been detected in at least one state [6,7] and is currently being investigated as a possibility in a few other locations [8]. Designed in 1974, carfentanyl was previously used exclusively for veterinary use with large animals and is not approved for use in humans, as it has been shown to be 100 times more potent than fentanyl in animal studies. Other fentanyl-related compounds have been reported by the DEA National Forensic Laboratory Information System (NFLIS), which systematically collects drug identification results from drug cases submitted for analysis to forensic laboratories (referred to as drug submissions). From 2014 to 2015 the number of drug submissions testing positive for acetyl fentanyl increased substantially, rising from 463 in 2014 to 1,870 in 2015 [9,10,11], and in 2016, NFLIS reported increasing drug submissions testing positive for furanyl fentanyl (244 drug submissions from January to July 2016) [9]. States should be vigilant about the possibility of highly toxic fentanyl-related compounds becoming available in the illicit drug market, as well as other highly toxic synthetic opioid derivatives, such as U47700 [2,12].

## OHIO DRUG LAB STATISTICS

The National Forensic Laboratory Information System (NFLIS) is a Drug Enforcement Administration (DEA) program that systematically collects drug chemistry analysis results, as well as other related information, from cases analyzed by state, local and federal forensic laboratories. These laboratories analyze substances secured in law enforcement operations across the country. NFLIS offers a valuable resource for monitoring illegal drug abuse and trafficking, including the diversion of legally manufactured pharmaceutical drugs into illegal markets.

To assist law enforcement and public health in monitoring illegal drug abuse and trafficking, the State of Ohio Board of Pharmacy created an online search tool of NFLIS data collected by forensic laboratories in Ohio.

> Ohio Drug Lab Statistics

# Disponibilidad/accesibilidad del sistema NFLIS



DATA

REPORTS

OPEN GOVERNMENT

CONTACT

DATA CATALOG

Home / Datasets

Organizations

Home / Department of Justice / Drug Enforcement...

Contact Data.gov



## Department of Justice

There is no description for this organization

Publisher

## National Forensic Laboratory Information System (NFLIS) Public Data Sets

Metadata Updated: November 28, 2023

NFLIS data provides the community with midyear and annual reports highlighting trends in seized drug data submitted to and analyzed in laboratories. The tables report results by frequently reported substances, by geography, and by year. The tables are publicly posted to provide easy access to the most frequently requested NFLIS data.

NFLIS began in September 1997 as a single data collection effort of drug chemistry analysis results from by local, State, and Federal forensic laboratories (now called NFLIS-Drug). These laboratories analyze substances secured in law enforcement operations across the country. NFLIS-Drug includes voluntary participation from 50 State systems and 111 local or municipal laboratories/laboratory systems. The NFLIS-Drug Snapshots highlight new and emerging drugs, and the public data tables show drug reports by state from 2007 through present.

# Sitio web del Sistema NFLIS – Panel de información y herramientas de análisis



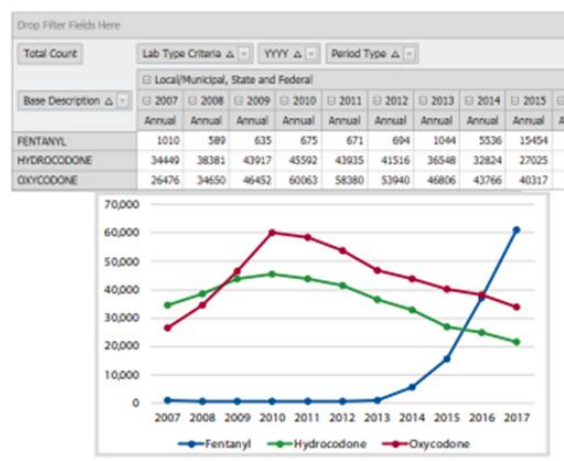
## NFLIS-Drug DQS Queries

The NFLIS-Drug DQS can generate useful data sets aggregated and filtered across multiple variables of the NFLIS-Drug data. Data can either be analyzed ad hoc or use predefined analysis queries and reports.

Analysis types include the following:

- All drugs selected individually or by drug group(s)
- Top 25 drugs reported to NFLIS-Drug
- Individual base drugs
- Drug categories (e.g., synthetic cannabinoids)

Query results are rendered in a separate browser window in a customizable Microsoft Excel-like grid format. Users can hide unneeded columns or move other columns, such as “time period being reported,” to create a cross-tab of the original data set. Once the data are shaped to the user’s preferences, they can then be exported and downloaded in either Excel or text formats and used to support the user’s objectives.



## The analysis of NFLIS-Drug DQS data can have a number of benefits, including

- In-depth analysis of data for your own laboratory
- Comparisons with national, regional, and State numbers
- Identification and tracking of emerging drugs, including those in adjacent jurisdictions and States



## NFLIS-DRUG FORENSIC LABORATORIES WITH DRUG CHEMISTRY SECTIONS



### DISTINCT DRUG CASES SUBMITTED TO STATE AND LOCAL LABORATORIES FROM JANUARY 1, 2022, THROUGH DECEMBER 31, 2022

**648,738**

Drug cases from January 1, 2022, through December 31, 2022, identified an estimated 1,181,750 drug reports.

Methamphetamine was the most frequently identified drug (29%). Fentanyl was the most frequently identified narcotic analgesic, alprazolam was the most frequently identified tranquilizer/depressant, and MDMA-en-PINACA was the most frequently identified synthetic cannabinoid.

[Link to annual report](#)

### 9 NEW NFLIS-DRUG REPORTS

The following 9 drugs were reported for the first time between July 1, 2023 and September 30, 2023:

- 3'-4'-Methylenedioxy-alpha-dimethylamino-isovalerophenone
- 3'-4'-Methylenedioxy-alpha-ethylamino-isovalerophenone
- Cannabidibutol
- CHO-4'Me-5'Br-FUBOXYPYRA
- Delta-9-THCP
- Ethyleneoxyritazene
- N-Desethyl etonitazene
- NMDMSB
- ortho-Methyl-1-boc-4-AP

[NFLIS-Drug Snapshot \(September 2023\)](#)

### NFLIS-DRUG 2022 ANNUAL REPORT FINDINGS:

#### Top 25

Most Frequently Identified Drugs Submitted to laboratories from January 1, 2022, through December 31, 2022, and analyzed by March 31, 2023.

Methamphetamine:	341,049
Cocaine:	169,972
Fentanyl:	163,201
Cannabis/THC:	146,631
Heroin:	41,227

NFLIS began in September 1997 as a single data collection effort of drug chemistry analysis results from local, State, and Federal forensic laboratories (now called NFLIS-Drug). These laboratories analyze substances secured in law enforcement operations across the country. Since its inception, NFLIS-Drug has become an operational information system that includes data from forensic laboratories that conduct analyses of about 98 percent of the Nation's approximate 1.2 million annual drug cases. As of July 31, 2023, NFLIS-Drug includes voluntary participation from 50 State systems and 111 local or municipal laboratories/laboratory systems, representing a total of 284 individual laboratories. The NFLIS program is expanding the scope of data collection to include public and private toxicology laboratory data on toxicological findings from antemortem and postmortem drug testing (NFLIS-Tox) and medical examiner and coroner office data regarding deaths in which drugs were identified (NFLIS-MEC). NFLIS-Tox recruitment is currently underway with close to 100 laboratories signing on to participate. NFLIS-MEC recruitment began in January 2022.

NFLIS-Drug provides the community with midyear and annual reports highlighting trends in seized drug data submitted to and analyzed by laboratories. Special reports and briefs respond to national drug crises such as fentanyl and fentanyl-related compounds, and synthetic cannabinoids and synthetic cathinones. The NFLIS-Drug Snapshots highlight new and emerging drugs, and the [public data tables](#) show drug reports by state from 2007-2022.

If your laboratory would like to participate in NFLIS, review DEA's [FAQs document](#) to determine your entity's eligibility to participate in NFLIS and to review other information about each NFLIS component and the next steps for participation. You may also contact [DEA at DEANFLIS@doj.gov](mailto:DEA.DEANFLIS@doj.gov).

#### Participating Laboratories, by U.S. Census Region

Map Table

# Visión general del sistema NFLIS-Drug



- 1997 Inició la contratación de laboratorios forenses
- 2000 Publicó el primer Informe
- 2001 Funcionalidad completa
- 2018 Expansión a Tox y MEC
- 2022 Sistema público de consulta de datos

# Participación en el sistema NFLIS-Drug



✓ **50** sistemas estatales  
y **111** laboratorios  
locales



✓ **98.4%** de tasa de  
participación / casos  
de drogas

✓ **284** laboratorios  
individuales

# NFLIS-Drogas en cifras



**38,558,598**

- Casos relacionados con drogas tramitados desde la creación del NFLIS-Drug

**1,412,947**

- Promedio anual de casos de consumo de drogas procesados (2005-2021)

**3,289**

- Drogas base detectadas en el sistema NFLIS-Drug (por ejemplo, cocaína, heroína)

**35**

- Categorías de drogas (por ejemplo, analgésicos narcóticos, benzodiazepinas)

**91**

- Informes publicados

**31**

- Conjuntos de datos públicos y mapotecas

# Recursos del sistema NFLIS



## Publicaciones

- Artículos revisados por expertos
- Actas de conferencias

## Informes del NFLIS

- Informes anuales
- Informes semestrales
- Informes trimestrales
- Informes especiales

## Sistema de consulta de datos

- Panel de información
- Consultas preestablecidas
- Consultas personalizadas
- Visualización de datos
- Exportación de conjuntos de datos

## Red de comunicación en tiempo real

# Informes NFLIS - Anuales, semestrales, trimestrales







# Informes NFLIS - Informes de sondeos



NFLIS  
NATIONAL FORENSIC LABORATORY INFORMATION SYSTEM



MEC

## Informe de 2022 de médicos forenses

### Highlights

The National Forensic Laboratory Information System (NFLIS) Medical Examiner and Coroner Survey was administered from September 2022 through March 2023. The survey collected information on medical examiner and coroner office (MEC) caseloads, policies, and practices for calendar year 2021. Overall, a total of 1,606 out of 2,071 MECs completed the survey, for an overall response rate of 77.5%. Of the MECs that completed the survey, 78.6% completed the full survey, and the remaining MECs provided responses to identified critical items.

In 2021, 1,440,580 human death cases were referred to responding MECs. Of these, 70% were accepted by MECs. On average, 453 cases were referred to MECs, and an average of 453 cases were accepted.

Of the 1,606 MECs that completed the survey, 79% reported having an electronic records management system (solely or in combination with manual recordkeeping), and 40% of those with an electronic records management system had a networked system. Of all responding MECs, 20% reported exclusively using a manual records management system.

More than half of MECs (62%) reported that they request toxicology testing for specific drugs based on the type of case.

The average turnaround time among responding MECs to complete a case when an autopsy was performed was 58 days.

Of MECs, 76% or more reported "routinely" requesting toxicology testing for the following drugs or drug classes: alcohol, amphetamines/methamphetamines, cocaine, fentanyl, heroin, marijuana/THC, and opiates or opioids other than heroin and fentanyl. Amphetamines/methamphetamines was the only drug or drug class for which 76% or more of MECs reported requesting quantitative testing.

Of responding MECs, 79% reported having an electronic records management system (solely or in combination with manual recordkeeping), and 40% of those with an electronic records management system had a networked system. Of all responding MECs, 20% reported exclusively using a manual records management system.



NFLIS  
NATIONAL FORENSIC LABORATORY INFORMATION SYSTEM



TOX

## Informe 2021 del laboratorio de toxicología

### Highlights

The National Forensic Laboratory Information System (NFLIS) Survey of Toxicology Laboratories (NFLIS-Tox Survey) was administered from March through August 2021. The survey collected information on toxicology caseloads, policies, and practices for calendar year 2019. A total of 196 toxicology laboratories (TLs) completed the full survey, and an additional 8 TLs responded to the critical items related to caseload information and types of toxicology testing services offered. Overall, 204 out of 281 TLs provided the required data, yielding an overall response rate of 73%.

During calendar year 2019, slightly more than 28 million toxicology cases were submitted to responding TLs. On average, public TLs accepted a small fraction of the submitted cases that private TLs accepted (16,068 vs. 298,204).

Of responding TLs, 56% conducted human performance testing, 45% performed postmortem testing, and 45% performed clinical drug testing. The most commonly reported testing types offered by public TLs were performance and postmortem testing, whereas the most commonly reported testing types offered by private TLs were clinical drug and workplace drug testing.

Immunoassay was used by 88% of responding TLs to conduct presumptive drug screening.

The average turnaround time to complete a toxicology case was 33.3 days. The average for private TLs was fewer than five days.

TLs reported "routinely" conducting qualitative toxicology testing for the following drugs or drug classes more than 50% of the time: amphetamines, antidepressants, barbiturates, benzodiazepines, buprenorphine, carisoprodol, cocaine, ethanol, fentanyl, heroin, marijuana/THC, muscle relaxants, opiates and opioids (other than heroin and fentanyl), phencyclidine (PCP), and Z-drugs (e.g., zolpidem).

Of responding TLs, 56% reported that they send samples to a reference laboratory for testing for amphetamine, methamphetamine, methamphetamine, piperazine, synthetic cannabinoids, and synthetic cathinone testing than for other drug classes.



NFLIS  
NATIONAL FORENSIC LABORATORY INFORMATION SYSTEM



DRUG

## Informe NFLIS-Drug 2019 sobre el estudio de las secciones de química de drogas de los laboratorios de análisis criminalístico

### Highlights

The NFLIS-Drug 2019 Survey of Crime Laboratory Drug Chemistry Sections was implemented from April through August 2019. The survey collected information on laboratory caseloads, policies, and practices for calendar year 2018. Overall, 94% of publicly funded State systems and local laboratories in the United States participated in the survey.

About 59% of responding laboratories reported loss of staff or full-time employees as a major contributor to their backlogs, and 53% of responding laboratories reported an influx of emerging drugs as a major contributor to their backlogs.

More than half (58%) of responding laboratories reported that their drug chemistry caseloads had increased compared with one year ago, whereas only 28% reported that their drug chemistry caseloads had decreased.

Not all the cases involving drug seizures or drugs for which the agencies served were submitted to laboratories for analysis. The most frequently reported reasons for not submitting cases to laboratories were if the drug classes for which responding laboratories were not equipped to analyze (61%) or if the case was dismissed before submission (61%).

Only 19% of responding laboratories reported that they analyzed all drug cases submitted to them. The most common reasons cited for not analyzing a case included if the case was dismissed or there was no defendant (52%), if a guilty plea or plea bargain was reached (51%), and if the case was adjudicated without forensic evidence testing (44%).

Approximately 82% of responding laboratories reported identifying noncontrolled drugs. The most common reasons these laboratories reported for identifying noncontrolled drugs included that it was a drug of interest (62%) or it was a special request made by a local official or other entity (47%).

The most critical issues moving forward concerning the testing of emerging drugs were reported to be available reference spectra for initial identification (91% rated as "very important"), procurement of standards (89% rated as "very important"), and validation of the procedures (56% rated as "important").

Of responding laboratories, 28% reported that they always conduct quantitative analyses. The most frequently reported reasons for not conducting quantitative analyses included that the drug classes for which responding laboratories were not equipped to analyze (61%) or if the case was dismissed before submission (61%).



# Imágenes instantáneas del sistema NFLIS - Alerta temprana



## NFLIS DRUG snapshot

September 2023

Newly Reported Substances: The following substances were reported to NFLIS-Drug for the first time between July 1, 2023, and September 30, 2023.

**West**

Cannabidiol

3',4'-Methylenedioxy-alpha-ethylamino-isovalerophenone

3',4'-Methylenedioxy-alpha-dimethylamino-isovalerophenone

ortho-Methyl-1-boc-4-AP

**Midwest**

N-Desethyl etonitazene

**South**

NMDMSB

**Northeast**

Delta-9-THCP

**South and Northeast**

Ethyleneoxyntazene

CHO-4'-Me-5'-Br-FUBOXYPYRA

**Snapshot of Drug Reports Received by NFLIS-Drug**

The tables on the right present the top drug reports in each category received by NFLIS-Drug between July 1, 2023, and September 30, 2023.

Top 5 Reported Drugs	187,502	Selected Benzimidazole Opioids	355	Fentanyl-Related Compounds	9,150
Methamphetamine	77,345	Metonitazene	213	4-ANPP	4,643
Fentanyl	38,078	Protionitazene	118	Fluorofentanyl	3,267
Cocaine	37,766	Isotonitazene	9	Fluorofentanyl (unspecified)	1,975
Cannabis/THC	27,473	N-Pyrrolidino etonitazene	6	para-Fluorofentanyl	1,289
Heroin	6,840	Ethyleneoxyntazene	6	meta-Fluorofentanyl	3
				Acetyl fentanyl	817
				Phenethyl 4-ANPP	337
				Ethyl 4-ANPP	86

Psychedelics	3,481	Steroids	278
Psilocin	1,849	Testosterone	166
Psilocin/psilocybin	760	Trenbolone	42
Lysergic acid diethylamide (LSD)	462	Oxandrolone	25
Psilocybin	410	Methandrostenedione	23
		Nandrolone	22



**Data Disclaimer:** Substances identified by Federal, State, and local laboratories are included in the raw counts of drug reports received by NFLIS-Drug. Raw counts have not undergone any adjustments to account for laboratory nonresponse. Data for this publication were exported from the NFLIS-Drug database in October 2023. Data in the Newly Reported Substances and Snapshot of Drug Reports sections include only drugs submitted to laboratories on or after July 1, 2022. Because of the time it takes for a laboratory to analyze seized material and transfer the data to the NFLIS database, the data in this publication—unlike those reported in an Annual or Midyear Report—are not comprehensive and do not reflect total counts of drugs analyzed over the period. More information on NFLIS data limitations can be found in the NFLIS Questions and Answers guide: <https://www.nflis.dea/division.usdoj.gov/inflisdata/docs/2417811508.pdf>. NFLIS reports are available at <https://www.nflis.dea/division.usdoj.gov/publications/ndrdesign.shtml>. Send questions and comments to [NFLIS@dea.gov](mailto:NFLIS@dea.gov).

DEA PRB 2023-25

## NFLIS DRUG snapshot

June 2023

Newly Reported Substances: The following substances were reported to NFLIS-Drug for the first time between April 1, 2023, and June 30, 2023.

**West**

N-Ethyl norfentanyl

ADB-5Br-4en-PINACA

**Midwest**

N-Pyrrolidino metonitazene

Methylmethaqualone

Paynantheine

ADB-INACA

**South**

4F-alpha-PHP

**Northeast**

**South and Northeast**

N-Piperidiny etonitazene

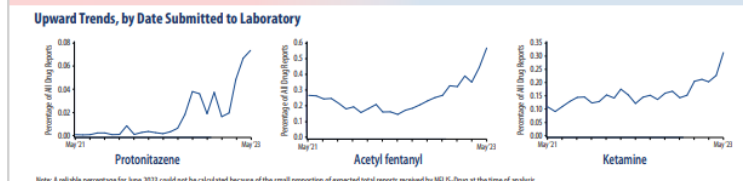
N-Pyrrolidino protonitazene

**Snapshot of Drug Reports Received by NFLIS-Drug**

The tables on the right present the top five drug reports in each category received by NFLIS-Drug between April 1, 2023, and June 30, 2023.

Benzodiazepines	7,347	Synthetic Cannabinoids	1,241	Depressants and Tranquilizers	5,301
Alprazolam	3,310	MDMB-en-PINACA <sup>1</sup>	629	Xylazine	3,417
Clonazepam	1,168	ADB-BUTINACA	241	Ketamine	638
Bromazolam	1,165	AB-CHMINACA	39	Phencyclidine (PCP)	617
Clonazepam	514	ADB-en-PINACA <sup>1</sup>	23	Cyclobenzaprine	114
Diazepam	363	MDMB-BINACA	21	Carisoprodol	106

<sup>1</sup> Includes all positional and unspecified isomers as reported by participating laboratories.



**Data Disclaimer:** Substances identified by Federal, State, and local laboratories are included in the raw counts of drug reports received by NFLIS-Drug. Raw counts have not undergone any adjustments to account for laboratory nonresponse. Data for this publication were exported from the NFLIS-Drug database in July 2023. Data in the Newly Reported Substances and Snapshot of Drug Reports sections include only drugs submitted to laboratories on or after April 1, 2022. Because of the time it takes for a laboratory to analyze seized material and transfer the data to the NFLIS database, the data in this publication—unlike those reported in an Annual or Midyear Report—are not comprehensive and do not reflect total counts of drugs analyzed over the period. More information on NFLIS data limitations can be found in the NFLIS Questions and Answers guide: <https://www.nflis.dea/division.usdoj.gov/inflisdata/docs/2417811508.pdf>. NFLIS reports are available at <https://www.nflis.dea/division.usdoj.gov/publications/ndrdesign.shtml>. Questions and comments: [NFLIS@dea.gov](mailto:NFLIS@dea.gov).

DEA DC 2023

## NFLIS DRUG snapshot

March 2023

Newly Reported Substances: The following substances were reported to NFLIS-Drug for the first time between January 1, 2023, and March 31, 2023.

**South**

AFUBIATA

Hydroxetamine

**Midwest**

Methoxisopropamine

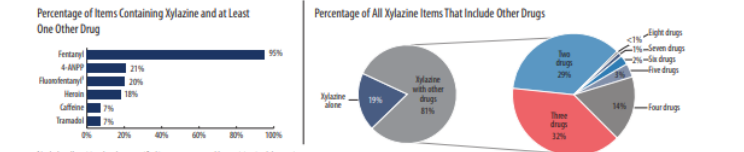
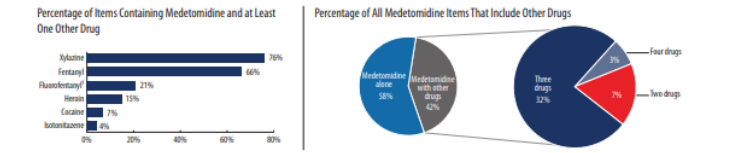
**Snapshot of Drug Reports Received by NFLIS-Drug**

The tables on the right present the top five drug reports in each category received by NFLIS-Drug between January 1, 2023, and March 31, 2023.

Synthetic Cathinones	2,954	Steroids	378	Selected Benzimidazole Opioids	282
Dipertylene	1,972	Testosterone	174	Metonitazene	147
alpha-PHP	267	Trenbolone	41	Protionitazene	91
N-Cyclohexylmethylone	257	Nandrolone	33	Isotonitazene	19
Etanilone	244	Methandrostenedione	26	Flunitrazepam	8
alpha-PHP	47	Oxandrolone	26		

**Medetomidine and Xylazine Combinations**

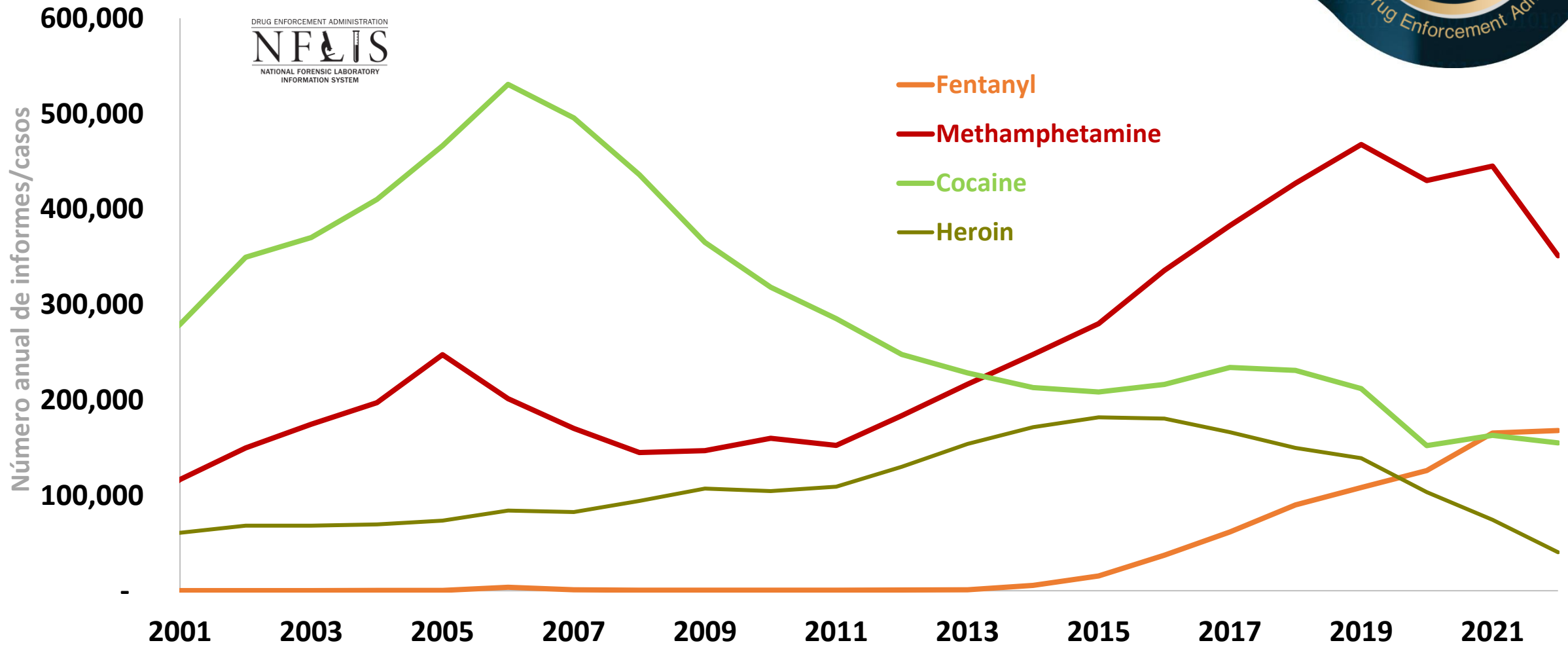
The following figures show substances that were reported to NFLIS-Drug in combination with medetomidine or xylazine between January 1, 2022, and December 31, 2022. The data presented in this section are not necessarily counts of true combinations (e.g., powders mixed together), but also include counts of separate drugs reported together in the same item.



**Data Disclaimer:** Substances identified by Federal, State, and local laboratories are included in the raw counts of drug reports received by NFLIS-Drug. Raw counts have not undergone any adjustments to account for laboratory nonresponse. Data for this publication were exported from the NFLIS-Drug database in April 2023. Data in the Newly Reported Substances and Snapshot of Drug Reports sections include only drugs submitted to laboratories on or after January 1, 2022. Because of the time it takes for a laboratory to analyze seized material and transfer the data to the NFLIS database, the data in this publication—unlike those reported in an Annual or Midyear Report—are not comprehensive and do not reflect total counts of drugs analyzed over the period. More information on NFLIS data limitations can be found in the NFLIS Questions and Answers guide: <https://www.nflis.dea/division.usdoj.gov/inflisdata/docs/2417811508.pdf>. NFLIS reports are available at <https://www.nflis.dea/division.usdoj.gov/publications/ndrdesign.shtml>. Questions and comments: [NFLIS@dea.gov](mailto:NFLIS@dea.gov).

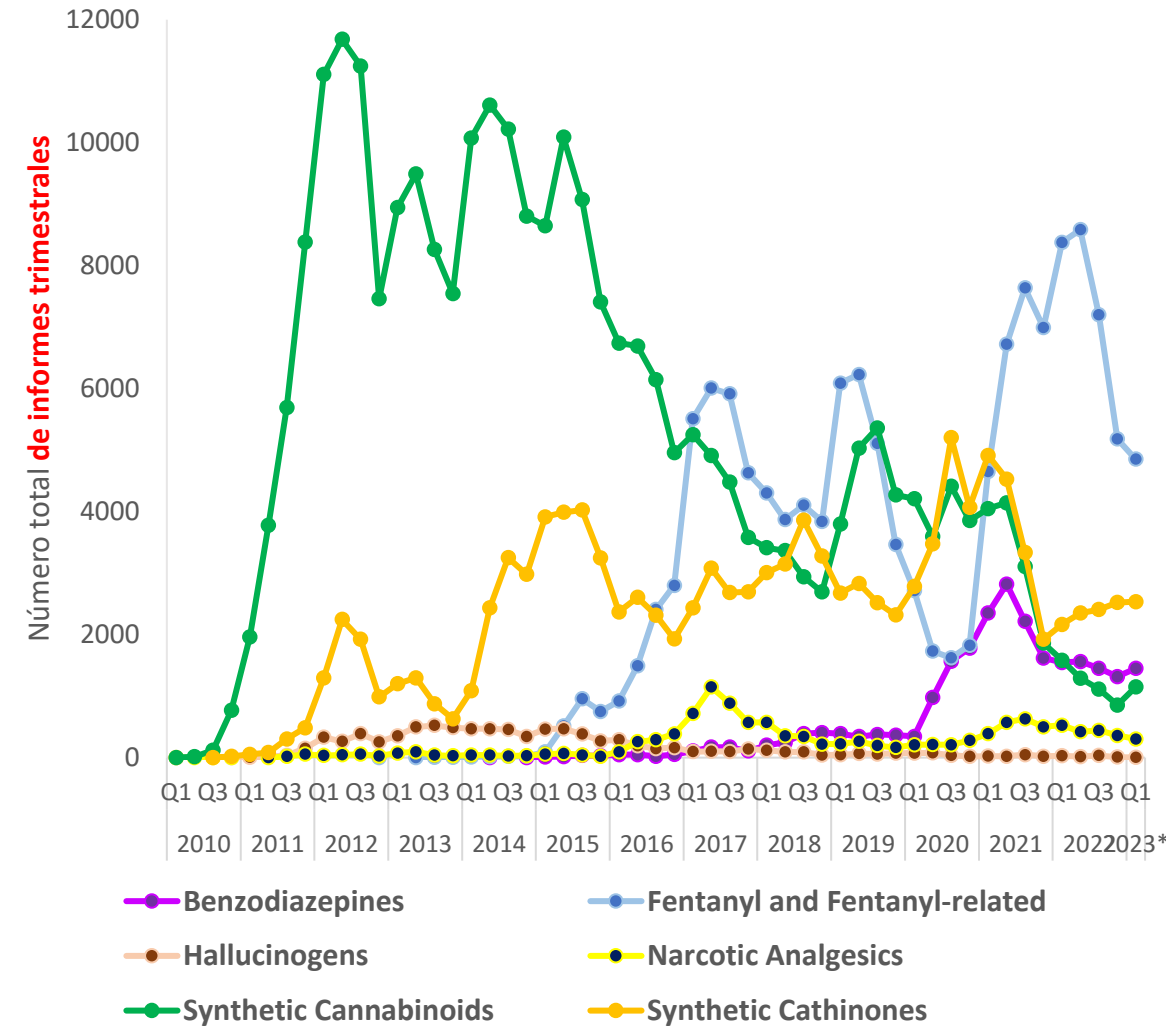
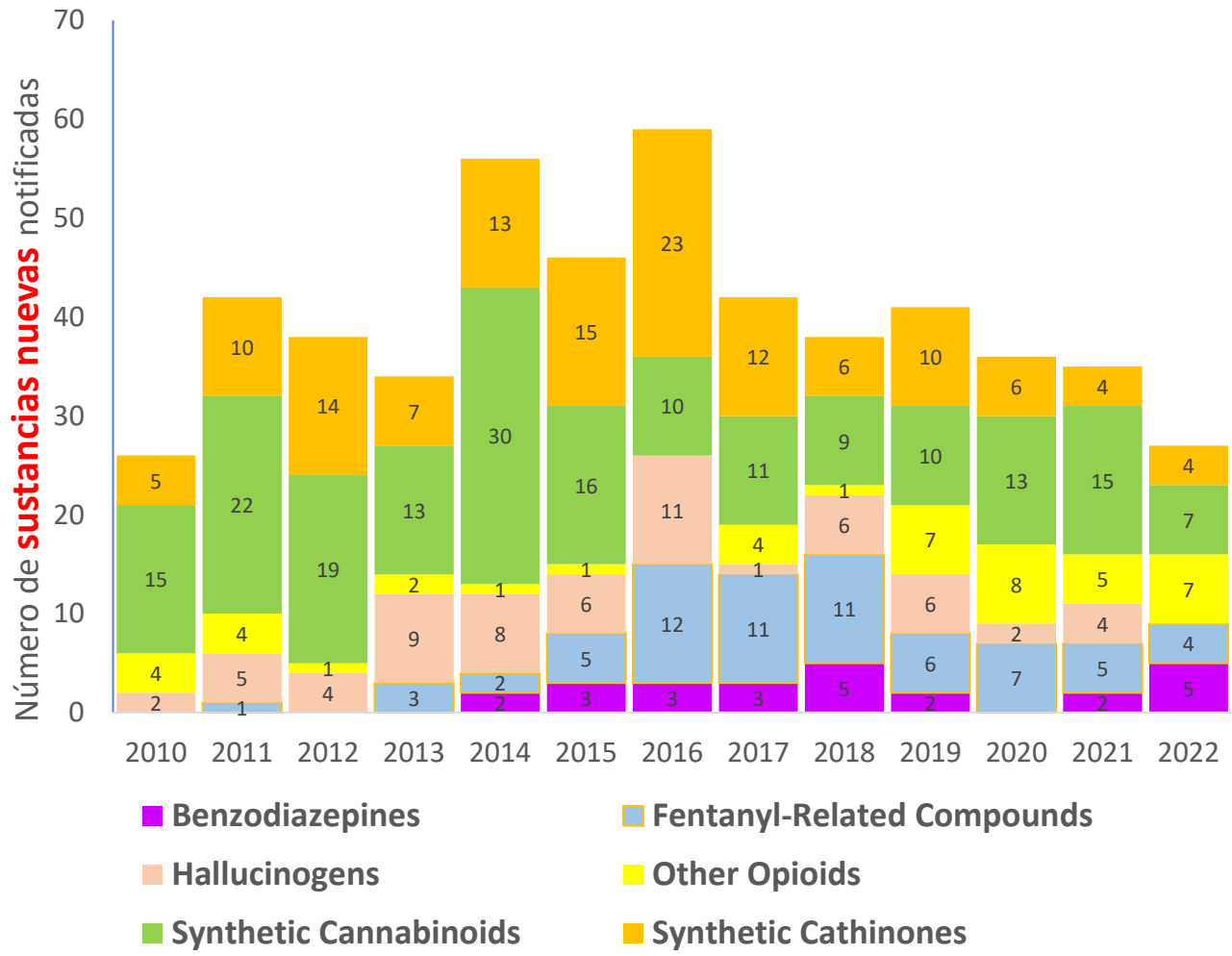
DEA DC 2023

# Análisis de tendencias en el sistema NFLIS – Drogas sintéticas en comparación con drogas de origen vegetal

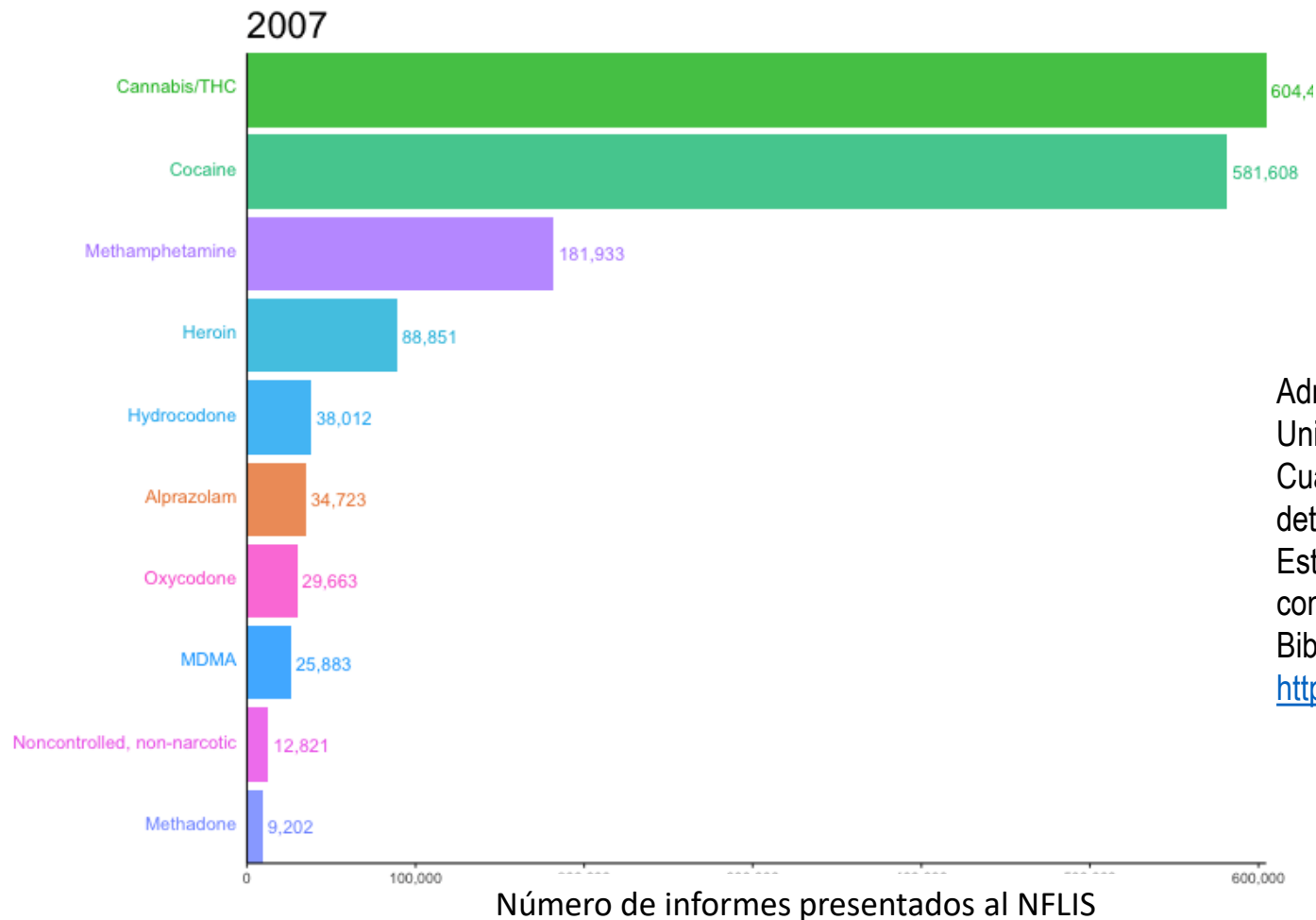


Source: DEA, National Forensic Laboratory Information System (NFLIS-Drug), queried on 12 October 2023.

# NFLIS - Seguimiento de las nuevas sustancias psicoactivas (NSP)



# NFLIS - Tendencias a largo plazo



Administración de Control de Drogas de Estados Unidos, División de control de desvíos. (2022). Cuadro 1. Estimaciones nacionales de las drogas detectadas con más frecuencia: 2007-2021. Estimaciones nacionales de las drogas detectadas con más frecuencia: 2007-2021. Obtenido de la Biblioteca de Recursos Públicos del NFLIS en: <https://www.nflis.deadiversion.usdoj.gov/>

# Acceso al sistema NFLIS



GO

Logout

liqun\_wong@yahoo.com

## NFLIS PUBLIC DQS DATA QUERY SYSTEM

Home / Public DQS

[Public DQS User Guide](#)

**Drug**

**Saved Queries**

**Analysis Type**  
Base Drugs List ▾

**Aggregation**  
Annual ▾

**Date Type \***  
 Submission Date

**Date Range**

**Year From**  
2022 ▾

**Year To**

Show Synonyms

**Drug Category**

Analgesics \* ▾

**Available Drugs**

>>	>
(2,6-Dimethylphenoxy)acetic acid	
(2-Bromoethyl)benzene	
(6aR,9S)-Delta-10-Tetrahydrocannabinol	
(9R)-delta 6a(10a)-Tetrahydrocannabinol	
(9S)-Delta-6a(10a)-Tetrahydrocannabinol	
(Fluorophenyl)propylamine	
(S)-N-Methyl-1-(1-(1,4Cyclohexadienyl))-2-Propanamine	
1,1,1,2-Tetrafluoroethane	
1,1,1-Trichloroethane (Methyl Chloroform)	
1,1-Difluoroethane	
1,2,3,4-Tetrahydroharminine	
1,2,3,4-Tetrahydronaphthalene	
1,2-Benzenedicarboxamide	
1,2-Cyclopentanedione	

**Selected Drugs**

<	<<
---	----

# NFLIS DQS Públicos - Análisis de datos, visualización...



## RESULTADOS DEL SISTEMA DE CONSULTA DE DATOS DEL SISTEMA NFLIS-DRUG

Pivot

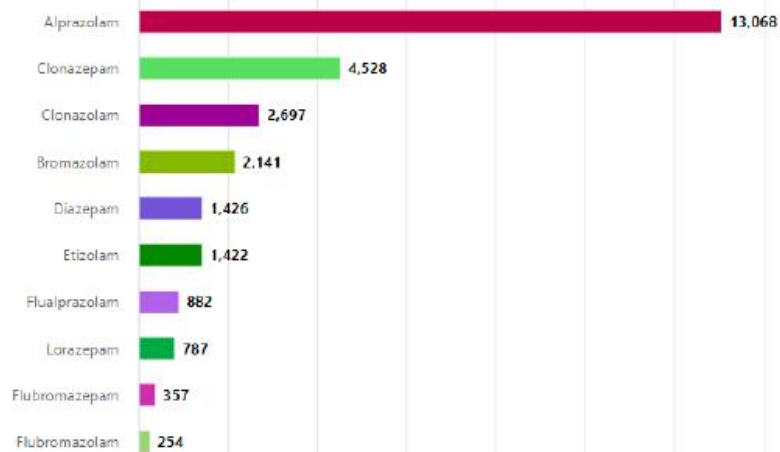
Visualization

NFLIS DQS Dashboard

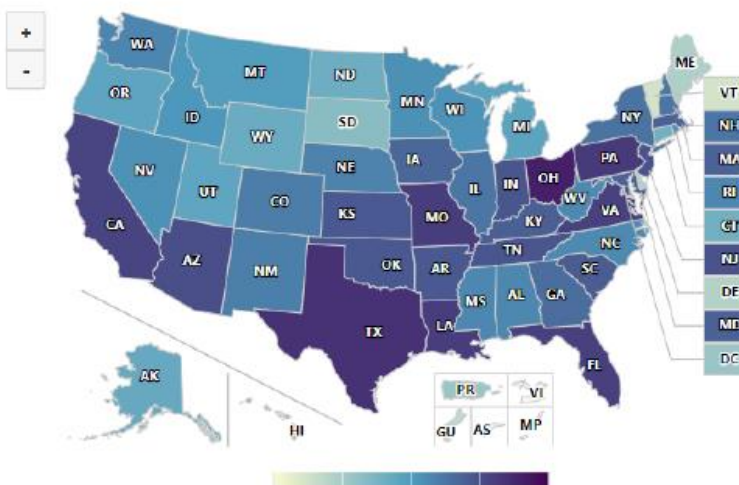
Region Comparison

Filters

Top 10 Queried Drugs  
Selected States, All Years

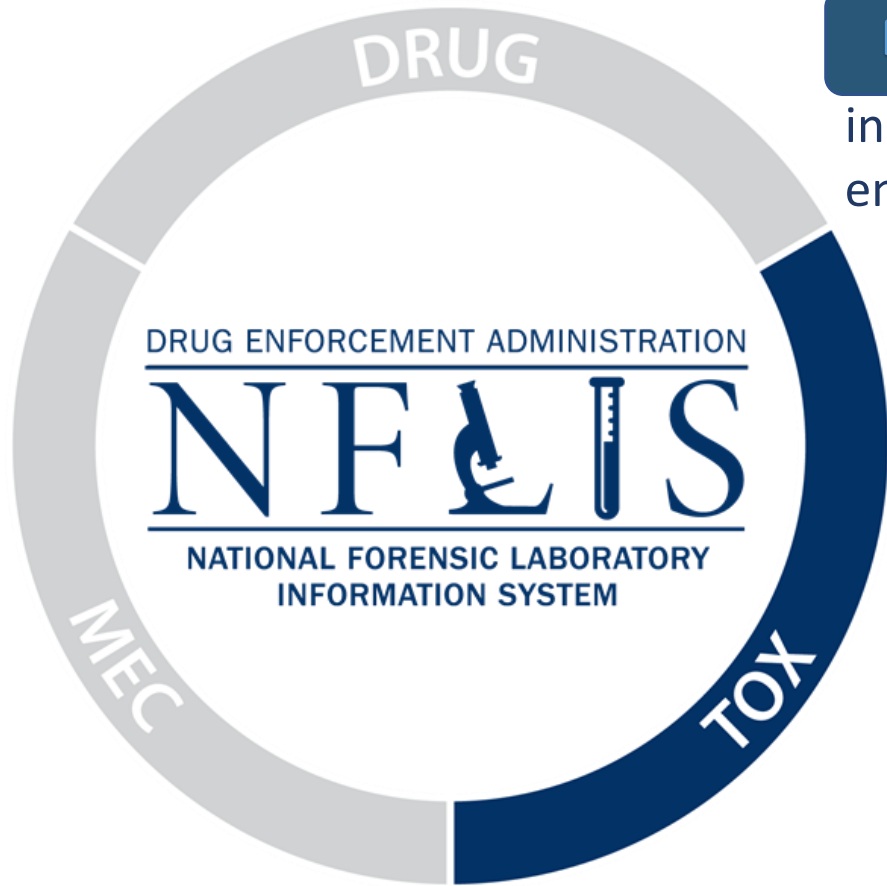


Queried Drugs Map  
Selected States, All Years





# Toxicología



**NFLIS-Tox** informa sobre iniciativas de salud pública y políticas en materia de drogas

**NFLIS-Tox** mejora la capacidad de vigilancia en materia de drogas, proporciona una alerta rápida a los organismos de salud pública y a las fuerzas del orden

**NFLIS-Tox** evidencias para la mejora de las prioridades de tratamiento, prevención y aplicación de la ley

# NFLIS-Tox



## LABORATORIOS DE TOXICOLOGÍA NFLIS-TOX



DURING CALENDAR YEAR 2019,  
SLIGHTLY MORE THAN

**28 million**

toxicology requests were referred to  
responding Toxicology Laboratories (TLs).

56% responding laboratories performed  
human performance testing, 45% performed  
postmortem testing, and 41% performed  
clinical drug testing.

IN 2019, TLs REPORTED  
"ROUTINELY" CONDUCTING  
QUALITATIVE TOXICOLOGY  
TESTING FOR THE FOLLOWING  
DRUGS OR DRUG CLASSES 50% OR  
MORE OF THE TIME:

- Amphetamines
- Antidepressants
- Barbiturates
- Benzodiazepines
- Buprenorphine
- Carisoprodol
- Cocaine
- Ethanol
- Fentanyl
- Heroin
- Marijuana/THC
- Muscle
- relaxants
- Opiates and opioids (other than heroin)

**90**

Total participants (9/27/2023)

**70**

Public toxicology laboratories  
(9/27/2023)

**20**

Private toxicology laboratories  
(9/27/2023)

**204** Toxicology Laboratories  
participated in the most recent  
[2021 NFLIS-Tox Survey](#).

Quantitative Analysis Frequency  
Reported as "Routinely" by  
Toxicology Laboratories, 2021  
NFLIS-Tox Survey

# Oficinas del Médico Forense



## NFLIS-MEC

mejora la capacidad de la DEA para detectar sustancias nuevas y de reciente aparición que constituyen una amenaza para la salud y la seguridad públicas.

## NFLIS-MEC

Los datos facilitarán la información directa a la DEA sobre las acciones de clasificación de drogas.



# NFLIS-MEC



## OFICINAS DE MÉDICOS FORENSES DEL NFLIS-MEC



DURING CALENDAR YEAR 2021,

**1,440,580**

death cases were referred to responding MECs. Of these, 703,049 were accepted by MECs. Overall, 101,582 overdose cases were accepted by responding MECs.

[2022 Medical Examiner and Coroner Survey Report](#)

IN 2021, MECs REPORTED "ROUTINELY" REQUESTING TOXICOLOGY TESTING FOR THE FOLLOWING DRUGS OR DRUG CLASSES MORE THAN 75% OF THE TIME:

- Alcohol
- Amphetamines/methamphetamines
- Cocaine
- Fentanyl
- Heroin
- Marijuana/THC
- Opiates or opioids other than heroin or fentanyl

1,606 medical examiner and coroner offices participated in the most recent 2022 NFLIS-MEC Survey, including full surveys and those completing only critical items.

Qualitative Analysis Frequency reported as "routinely" requested from toxicology laboratories by MECs, 2022 NFLIS-MEC survey

In 2018, DEA expanded the NFLIS program to include two additional continuous drug surveillance components that collect drug-related mortality data from medical examiner and coroner offices (NFLIS-MEC) and drug testing results from toxicology laboratories (NFLIS-Tox) to supplement and complement the current NFLIS-Drug data from drug cases submitted to and analyzed by the Nation's forensic laboratories.

If your office would like to participate in NFLIS-MEC, please review [DEA's FAQs document](#) to determine your entity's eligibility to participate in NFLIS and to review other information about each NFLIS component and the next steps for participation. If you have any questions or would like to participate in NFLIS-MEC, please contact the NFLIS team at [DEANFLIS@rti.org](mailto:DEANFLIS@rti.org).

**Your Data Can Make a Difference in National Drug Control Efforts**

As a medical examiner or coroner (MEC) office, you provide valuable information about the impacts that drugs and substance use have on public health.

By participating in NFLIS-MEC, your office will be contributing to an important national data collection that supports DEA drug scheduling and informs drug policy.

As a NFLIS-MEC participant, you can influence a greater national understanding of the following:

Drug mortality

Drug frequency trends

Novel psychoactive substances

Levels of drugs involved in cause of death

Toxicology testing practices of MEC offices

Receive assistance from DEA to easily extract approximately 15 NFLIS-MEC data items:

Information Management System Support

Computer hardware and software

Date entry support

Enable DEA to compile national drug trend data on the following:

Case ID/unique identifier

Cause of death

Manner of death

Age

Sex

Date of death

Drugs (and metabolites) confirmed

Contribute to national statistics and gain access to aggregated data.

Have any ideas to share with DEA regarding the NFLIS-MEC surveillance systems?  
Contact  
DeMia Presley  
Drug Enforcement Administration  
202-307-7183



**What are the next steps to participate?**  
**1-888-966-3547 or [DEANFLIS@rti.org](mailto:DEANFLIS@rti.org)**

More information may be found on the NFLIS website: <https://www.nflis.dea.dhs.gov/>.

# Opioides sintéticos - NFLIS DEA - Participantes



Únete a la conversación con más de 500 miembros de synth opioids, y sigue aumentando...

Join the conversation

with over

**500**

**Synth-Opioids**  
members

*and growing...*



- química forense,
- toxicología,
- patología,
- jurisprudencia,
- investigación,
- salud pública,
- aplicación de la ley

NFLIS



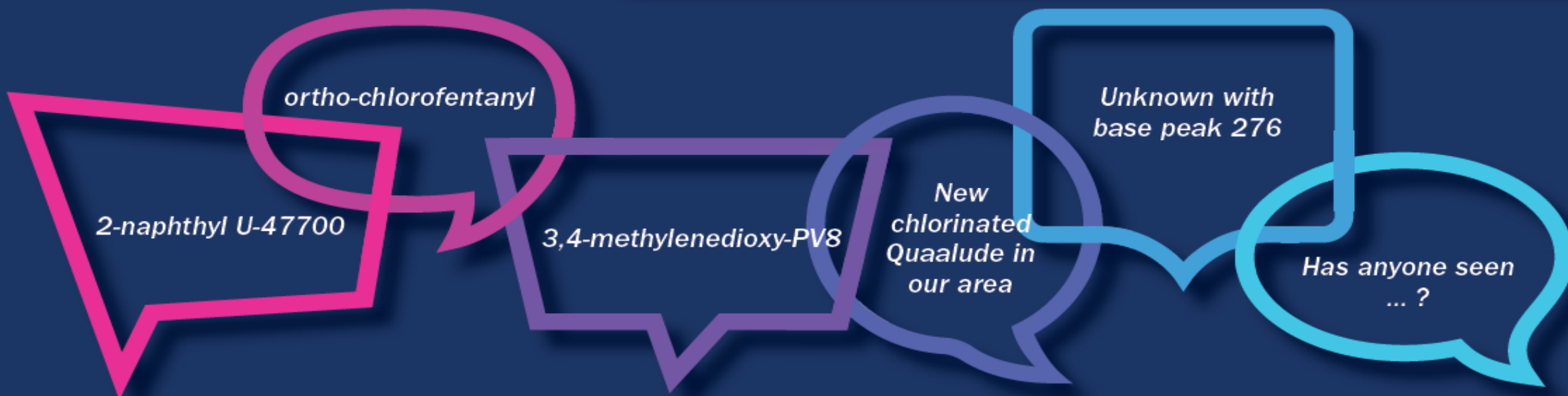
U.S. DEPARTMENT OF JUSTICE  
DRUG ENFORCEMENT ADMINISTRATION  
DIVERSION CONTROL DIVISION

NATIONAL FORENSIC LABORATORY INFORMATION SYSTEM

## DEA Opioides sintéticos

### Red de comunicación en tiempo real

Comunicación en tiempo real sobre nuevas drogas a cargo de profesionales sanitarios



# join the conversation

Dirigirse a:

<https://synthopioids.nflis.deadiversion.usdoj.gov/>

# National Forensic Laboratory Information System (NFLIS)



**Para ponerse en contacto con nosotros:**

Drug Enforcement Administration

<https://www.nflis.dea.gov/>

Email: [NFLIS@dea.gov](mailto:NFLIS@dea.gov)

DRUG ENFORCEMENT ADMINISTRATION

**NFLIS**

NATIONAL FORENSIC LABORATORY  
INFORMATION SYSTEM