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CDL MANUAL

For employees with a commercial driver's license (CDL)

Revised January 1, 2019

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UnityPoint Clinic

Occupational Medicine

Program Structure

***A Consortium of Local Government Employers
Iowa Association of Municipal Utilities
Iowa League of Cities
Iowa State Association of Counties***

This program has been implemented through a consortium of local government entities including members from the Iowa Association of Municipal Utilities (IAMU), the Iowa League of Cities (ILC), and the Iowa State Association of Counties (ISAC). UnityPoint is instrumental in assisting member employers in meeting the DOT's drug and alcohol testing requirements.

UnityPoint Clinic provides a complete line of testing services including:

- Random drug testing selection
- Certified testing laboratory services
- Medical Review Officer (MRO) services
- Random alcohol testing selection (saliva and breath)
- Record keeping, statistical reports, and billing
- Assist with identifying training web sites and in-house training, as requested

Actions the employer (city/county/utility) must take:

- Identify a DER (Designated Employer Representative) to receive testing notices and results
- Arrange for site collection with a local hospital or clinic
- Adopt a substance abuse prevention plan and personnel policy
- Provide a copy of the plan to each employee subject to testing
- Ensure supervisors undergo required training on detecting drug and alcohol use
- Ensure all employees are tested for drugs/alcohol when required. All random tests are conducted within the quarter they were selected.

Purpose and Construction

Federal Department of Transportation (DOT) regulations require most employers to establish drug and alcohol testing programs for certain employees using a commercial driver's license (CDL) during work. The purpose of these programs is to help prevent accidents and injuries resulting from the misuse of alcohol or use of drugs by drivers of commercial motor vehicles.

The purpose of that program is to establish procedures for the administration of the DOT substance abuse prevention requirements pursuant to the Commercial Driver's License Regulations, Code of Federal Regulations, Title (49 CFR), Parts 40 and 382. Parts 40 and 382 require employers to implement substance abuse prevention programs if they employ employee personnel who operate commercial motor vehicles and are required to have a CDL.

Regulatory Overview

The critical program element will be to test drivers in positions that require the driver to operate a CMV and perform attendant safety-sensitive functions. It is in this context that you must formulate controlled substances and alcohol policies, communicate them to your drivers, and conduct testing. The goals of these activities are to enhance worker productivity and safety and ensure positive acceptance of the program. You are encouraged to make your controlled substance use and alcohol misuse program an integral part of your overall safety program.

WHAT THE REGULATION REQUIRES:

The FMCSA regulations require that the following program elements be implemented or updated:

- A policy statement on controlled substance use and alcohol misuse in the workplace.
- Supervisor and employee education and training.
- A controlled substances and alcohol testing program for persons used in duties requiring the driving of CMVs.

The following designated pages are to be included in your employer's Substance Abuse Prevention Program.

- ❖ ***The Drug and Alcohol Education Guide must be distributed to all covered employees***

Policy Development and Communications

The FMCSA regulations require that you develop a written policy on controlled substances and alcohol misuse in the workplace and that the policy be provided to every driver. A final review of your draft policy should be conducted by your legal representative. The purpose of the legal review is to ensure that there is no conflict between the provisions of the policy and the requirements of the FMCSA.

Policy Statement

The controlled substances and alcohol regulations require that you have a policy statement that incorporates your position and information of your controlled substances use and alcohol misuse.

The policy statement must describe the objective or purpose of the policy.

Who Must Participate

Your policy must indicate that the participation in the employer's controlled substances and alcohol testing program is a requirement of each driver/employee, and therefore, is a condition of employment or use.

These regulations apply to both employers and drivers of CMVs. An employer is any person who owns or leases a CMV or assigns persons to operate such a vehicle. A driver means anyone who operates a CMV, whether full-time, part-time, casual, intermittent, occasional, volunteer, leased or independent. Other employees who may not have the title of driver, but who sometimes operate a CMV, also must be included in your program. These may include maintenance workers and supervisors. Safety-sensitive functions are tasks performed by CMV drivers that are applicable to prohibited conduct, testing and consequences under these alcohol and drug testing regulations. No other employees may be included.

FMCSA regulations do not apply to employers and their drivers who are required to comply with the Federal Transit Administration's (FTA) alcohol and controlled substance testing requirements, active duty military personnel, full and part-time National Guard Reserves, operators of a farm vehicle that is controlled and operated by a farmer and used to transport agricultural products, farm machinery, farm supplies. The regulations also do not apply to firefighters or other persons who operate CMVs that are necessary for the preservation of life or property or the execution of emergency governmental functions, are equipped with audible and visual signals and are not subject to normal traffic regulations.

Some drivers are covered by more than one DOT agency. In most cases, the driver is tested based on the tasks they perform the majority of the time.

Required Hours of Compliance and Prohibited Behavior

The policy must clearly identify the time periods during which drivers must be in compliance with the alcohol rule. A driver must not consume alcohol while on duty, four hours prior to on duty time, and up to eight hours following an accident or until the employee undergoes a post-accident test, whichever occurs first.

Employers must describe driver behavior that is prohibited by the FMCSA rules. A driver shall not report for duty or remain on duty that requires performing safety-sensitive

functions when the driver uses any controlled substance, except when the use is at the instruction of a physician who has advised the driver that the substance does not adversely affect the ability to safely operate a CMV.

Circumstances for Testing

The FMCSA requires that controlled substances and alcohol test be given to drivers in specific circumstances: pre-employment (for controlled substance only), reasonable suspicion, post-accident (fatality, driver is ticketed **and** someone involved in the accident is treated away from the scene *or* driver is ticketed **and** a vehicle is towed from the scene), random, return-to-duty and follow-up. Your policy must define these circumstances in sufficient detail to inform the drivers what circumstances will trigger these tests.

Behavior That Constitutes a Refusal to Submit to a Test

The policy must describe the kinds of behavior that constitutes a refusal to submit to a test. Such behavior includes refusal to take the test, inability to provide sufficient quantities of breath, saliva, or urine to be tested without a valid medical explanation; tampering with or attempting to adulterate the specimen; interfering with the collection procedure; not immediately reporting to the collection site; failing to remain at the collection site until the collection process is complete; having a test result reported by an MRO as adulterated or substituted; or leaving the scene of an accident without a valid reason before the tests have been conducted.

Testing Procedures

The policy must describe the procedures for how controlled substances tests will be performed, including split specimen collection and analysis for controlled substances. Policy must include how alcohol tests will be performed, including whether breath or saliva screening tests will be performed, the privacy of the employee will be protected, integrity of the test process will be maintained, test results will be attributed to the correct driver and post-accident testing will be conducted including instructions to the driver.

The policy must indicate that the employer will strictly adhere to all standards of confidentiality and assure all drivers that testing records and results will be released only to those authorized by the FMCSA rules to receive such information.

Consequences for Drivers with an Alcohol Concentration of 0.02 or Greater but Less Than 0.04

The policy must state that any driver who has an alcohol concentration of 0.02 or greater but less than 0.04 shall not perform or continue to perform safety-sensitive functions until 24 hours following the administration of the test. No other action can be taken under FMCSA or DOT authority against the driver based solely on test results showing an alcohol concentration of less than 0.04. No action shall be taken under FMCSA or DOT authority against the driver based solely on test results showing an alcohol concentration of less than 0.02. Test results of less than 0.02 are considered negative for the purposes of this employer testing program.

Consequences of the Use of Controlled Substances and the Misuse of Alcohol

The policy must contain the consequences of a driver who refuses to submit to a test, has a verified positive controlled substance test result or has an alcohol concentration of 0.04 or greater. This includes the mandatory requirement that a driver be removed immediately from his/her safety sensitive function. The policy must also state that any driver who has a verified positive controlled substance test result, has an alcohol concentration of 0.04 or greater or refuses to submit to a test also must be evaluated by a substance abuse professional (SAP) even if your policy requires the driver to be terminated. Any further action (e.g., termination) taken against the driver is up to the employer, but must be described in detail in the policy. It should also be mentioned in the policy that these actions are employer-mandated, not FMCSA-mandated.

Identify a Contact Person

You must designate an employee to answer questions about your controlled substances use and alcohol misuse program. This person will be known as the Designated Employer Representative (DER).

Effects of Alcohol and Controlled Substances

The policy must state where information can be obtained on the effects of alcohol misuse and controlled substances use on an individual's health, work and personal life; signs and symptoms of an alcohol problem; and available methods of intervening when an alcohol and/or controlled substance problem is suspected.

Required Training

Employers must provide training to all persons who supervise drivers subject to all the regulations. The purpose of this training is to enable supervisors to determine whether reasonable suspicion exists to require a driver to undergo testing. The training must include 60 minutes on alcohol misuse and 60 minutes on controlled substances use. The content of the training must include the physical, behavioral, speech and performance indicators of probable alcohol misuse and controlled substances use.

Individuals who perform certain professional and technical functions in DOT testing programs are required by 49 CFR Part 40 to have specific qualifications and completed the required training. These requirements apply whether the individuals are your in-house employees or external service agents. Before you use these types of professional and technical personnel you should make sure they have had the required DOT training and are aware of the suggested importance for periodic refresher training.

Additional Employer Provisions

If you wish to exceed the requirements of the Federal Regulations, these provisions should be included in the policy. It must be made clear that these provisions are those of the employer and are not required by the FMCSA.

Policy Communication

Once you have developed and adopted a policy on controlled substances use and alcohol misuse, you must make sure that your drivers are aware of the policy and the effect it will have on them. You must provide materials that explain the regulations policy and corresponding procedures to all drivers. You must require drivers to sign a certificate of receipt in accordance with §382.601 (d).

The requirement to notify drivers about your policy should not be confused with the requirement to formally train supervisors in selected aspects of your controlled substances use and alcohol misuse program.

Drug and Alcohol Education Guide

For employees covered under the
Federal Motor Carrier Safety Administration (FMCSA)



UnityPoint Clinic

Occupational Medicine

Revised January 1, 2017

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Terms and Definitions

Accident	<p>An accident is defined as an occurrence involving a CMV operating on a public road which results in (1) a fatality; or (2) a bodily injury to a person who, as a result of the injury, immediately received a medical treatment away from the scene of the accident; or (3) if one or more motor vehicles incurs disabling damage as a result of the accident requiring the vehicle to be transported away from the scene by a tow truck or other vehicle.</p> <p>Unless an occurrence involving a CMV meets this definition of an accident, the accident is not considered to be an accident for purposes of Federal post-accident alcohol and controlled substances testing by employers of CMV drivers.</p>
Air Blank	<p>In evidential breath testing devices (EBT's) using gas chromatography technology, a reading of the device's internal standard. In all other EBT's, a reading of ambient air containing alcohol.</p>
Alcohol	<p>The intoxicating agent in beverage alcohol, ethyl-alcohol, or other low molecular weight alcohols, including methyl and isopropyl alcohol.</p>
Alcohol Concentration	<p>The alcohol in a volume of breath expressed in terms of grams of alcohol per 210 liters of breath, as indicated by an evidential breath test. In law enforcement, this is referred to as a blood alcohol concentration (BAC).</p>
Alcohol Confirmation Test	<p>A subsequent test using an EBT, following a screening test with a result of 0.02 or greater, that provides quantitative data about the alcohol concentration.</p>
Alcohol Screening Device (ASD)	<p>An analytical procedure to determine whether a driver may have a prohibited concentration of alcohol in his or her saliva or breath specimen.</p>
Alcohol Use	<p>The drinking or swallowing of any beverage, liquid mixture, or preparation, including any medication, containing alcohol.</p>
Aliquote	<p>A portion of a specimen used for testing.</p>

Blind Sample, Blind Performance, or Proficiency Test Specimen	A test submitted to a laboratory for quality control testing purposes, with a fictitious identifier, so that the laboratory cannot distinguish it from driver specimens, and which is spiked with known quantities of specific controlled substances.
Breath Alcohol Technician (BAT)	An individual who instructs and assists individuals in the alcohol testing process and operates an EBT.
Cancelled or Invalid Alcohol Test	An alcohol test that has a problem identified that cannot be or has not been corrected, or which the regulation otherwise requires to be cancelled. A cancelled test is neither positive nor negative.
Cancelled or Invalid Controlled Substance Test	A controlled substance test that has been declared invalid by a Medical Review Officer. A cancelled test is neither positive nor negative. A sample that has been rejected for testing by a laboratory is treated the same as a cancelled test.
Chain of Custody	Procedures to account for the integrity of each urine specimen by tracking its handling and storage from point of collection to final disposition. With respect to controlled substances testing, these procedures require that a Federal Drug Testing Custody and Control Form (COC), consisting of five pages, be used from time of collection to receipt by the laboratory. An appropriate COC form(s) account(s) for the sample aliquots within the laboratory.
Collection Container	A container into which the employee urinates to provide the urine sample used for a controlled substance test.
Collection Site Person	A person who is certified to instruct and assist individuals who present themselves for the purpose of providing a specimen of their urine to be analyzed for presence of controlled substances.
Commercial Driver License	A license issued by a State of other jurisdiction, in accordance with the standards contained in 49 CFR part 382, authorizing an individual to operate a class of Commercial Motor Vehicles (CMV). The individuals required to have a CDL under 49 CFR part 383 are subject to controlled substances and alcohol testing. Individuals who are required to possess CDLs by virtue of State or local law or by employer policy, but not by Federal regulation, are not subject to the provisions of 49 CFR parts 382 and 383.

Consortium/Third Party Administrators (C/TPA)	A service agent that provides or coordinates one or more drug and/or alcohol testing services to DOT-regulated employers. C/TPAs typically provide or coordinate the provision of a number of such services and perform administrative tasks concerning the operation of the employers' drug and alcohol testing programs. This term includes, but not limited to, groups of employers that join together to administer, as a single entity, the DOT drug and alcohol testing programs of its members (e.g. having a combined random testing pool). C/TPAs are not employers under the rules.
Controlled Substances	For the purposes of these guidelines, the terms "drugs" and "controlled substances" are interchangeable and have the same meaning. The DOT is testing only for the following five (5) controlled substances: marijuana (THC), cocaine, opioids-including natural occurring opiates, synthetic opioids, including heroine, phencyclidine (PCP) and amphetamines (including methamphetamine and ecstasy)
Controlled Substance Confirmation Test	A second analytical procedure to identify the presence of a specific controlled substance or metabolite which is independent of the screening test and which uses a different technique and chemical principle from that of the screening test in order to ensure reliability and accuracy.
Controlled Substance Metabolite	The specific substance produced when the human body metabolizes a given prohibited controlled substance as it passes through the body and is excreted in urine.
Controlled Substance Screening Test	An immunoassay screen to eliminate "negative" urine specimens from further consideration.
Creatinine	A chemical normally produced when the human body metabolizes creatinine as it passes through the body and is excreted in urine. Creatinine is an anhydride of creatinine.
Designated Employer Representative (DER)	An individual identified by the employer as able to receive communications and test results from service agents and who is authorized to take immediate actions to remove employees from safety-sensitive duties and to make required decisions in the testing and evaluation processes. The individual must be an employee of the company. Service agents cannot serve as DERs.

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Disabling Damage	<p>Damage that precludes departure of a motor vehicle from the scene of the accident in its usual manner in daylight after simple repairs.</p> <p>(1) <i>Inclusions.</i> Damage to motor vehicles that could have been driven, but would have been further damaged if so driven.</p> <p>(2) <i>Exclusions.</i> (i) Damage which can be remedied temporarily at the scene of the accident without special tools or parts. (ii) Tire disablement without other damage, even if no spare tire is available. (iii) Headlamp or tail-lamp damage. (iv) Damage to turn signals, horn, or windshield wipers that make them inoperative.</p>
Driver	<p>Any person (volunteer or paid) who operates a CMV and is required to have a CDL. This includes, but is not limited to, Full-time, regularly employed drivers, leased drivers, independent owner-operator contractors (employed directly or leased) casual, intermittent, or occasional drivers.</p>
Drug	<p>See Controlled Substances</p>
Employee	<p>See Driver</p>
Employer (or Motor Carrier)	<p>Any person engaged in a business affecting interstate commerce who owns or leases a commercial motor vehicle in connection with that business, or assigns employees to operate it, but such term does not include the United States, any State, any political subdivision of a State, or an agency established under a compact between States approved by the Congress of the United States.</p>
Evidential Breath Testing Device (EBT)	<p>A device approved by NHTSA for the evidential testing of breath at the 0.02 and 0.04 alcohol concentration, placed on NHTSA's Conforming Products List (CPL) for "Evidential Breath Measurement Devices" and identified on the CPL as conforming with the model specification available from NHTSA's Traffic Safety Program.</p>
FMCSA	<p>Federal Motor Carrier Safety Administration</p>

Follow-up Test	Unannounced alcohol and/or controlled substance testing given to drivers who previously tested positive for a controlled substances or alcohol and have returned to duty. All follow-up tests are required to be conducted under DOT Observed Collection Protocol
FRA	Federal Railroad Administration
Gross Combination Weight Rating	The total value specified by the manufacturer(s) of the vehicle as the loaded weight of two or more vehicles. In the absence of a value specified by the manufacturer, it will be determined by adding the gross vehicle weight rating and any load there on.
Gross Vehicle Weight Rating	The value specified by the manufacturer of the vehicle the loaded weight of a single vehicle.
Medical Review Officer	A licensed and certified physician (Doctor of Medicine or Osteopathy) responsible for receiving laboratory results generated by an employer's controlled substances testing program, who has knowledge of substance abuse disorders and has appropriate medical training to interpret and evaluate an individual's confirmed positive test results together with his or her medical history and any other relevant biomedical information,
Post-accident Test	<p>A test administered to a driver in certain CMV accidents. Drivers subject to post-accident testing are those who meet the following criteria:</p> <p>While performing safety-sensitive functions are Involved in an <i>accident</i> resulting in the loss of Human life, OR</p> <p>While performing safety-sensitive functions are involved in a nonfatal <i>accident</i> resulting in a CMV receiving a citation under State or local law for a moving traffic violation arising from the accident</p> <p><u>AND</u></p> <p>(1) There is bodily injury to a person who, as a result of the injury, immediately received medical treatment away from the scene of the accident; OR</p> <p>(2) One or more motor vehicles incur <i>disabling damage</i> as a result of the accident, requiring the vehicle to be transported away from the scene by tow truck or other vehicle.</p>

Pre-employment Test	A test given to an applicant who is being considered for a safety-sensitive position.
Random Test	A test administered to a pre-determined percentage of drivers who perform safety-sensitive functions and who are selected on a scientifically defensible random and unannounced basis.
Reasonable Suspicion Test	A test given to a driver who performs a safety-sensitive function and who is reasonably suspected by a trained supervisor of using/or being under the influence of a controlled substance or misusing alcohol.
Refusal to Submit to an Alcohol Test	The driver fails to provide an adequate amount of saliva or breath for testing without a valid medical explanation after he or she has received notice of the requirement for alcohol testing in accordance with these regulations or engages in conduct that clearly obstructs the testing process.
Refusal to Submit to a Controlled Substances Test	The driver fails to appear for any test within a reasonable time, after being directed to do so by the employer; fails to remain at the testing site until the testing process is complete; fails to provide a urine specimen for any drug test required; in the case of direct observation or monitored collection driver fails to permit the observation or monitoring; refuses to follow the DOT observed collection protocol of raising his/her shirt to waste level and lowering their garments to mid-thigh and turning around so the observer may rule out any third party equipment has been used to bring urine in for the purpose to circumvent the testing process; fails or declines to take a second test the employer or collector has directed the driver to take; fails to undergo a medical examination or evaluation, as directed by the MRO as part of the verification process or as directed by the DER; fails to cooperate with any part of the testing process; and finally, or is reported by the MRO as having a verified adulterated or substituted test result.
Return to Duty Test	A controlled substances and/or alcohol test prior to returning to duty after having a verified positive drug and/or alcohol test and after completing any SAP required treatments or programs.
Screening Test Technician (STT)	A person who instructs and assists drivers in the alcohol testing process using an ASD. (Alcohol Screening Device)

Seating Capacity or Designed to Transport	The value specified by the manufacturer of the vehicles as the maximum number of persons that may sit in a single vehicle. A commercial motor vehicle that is altered by removing seats continues to be a commercial motor vehicle until the vehicle's seating capacity certification plate is replaced by a manufacturer.
Service Agent	Any person or entity, other than an employee of the employer, that provides services specified under the regulations to employers and/or employees in connection with DOT drug and alcohol testing requirement.
Shipping Container	A container capable of being secure with a tamper evident seal that is used for transfer of one or more urine specimen bottle(s) and associated documentation from the collection site to the laboratory.
Specimen Bottle or Specimen Containment System	The bottle, that after been labeled and sealed, is used to transmit a urine sample to the laboratory.
Stand-down	The practice of temporarily removing an employee from the performance of safety-sensitive functions based only on a report from a laboratory to the medical review officer (MRO) of a confirmed positive test, adulterated test, or a substituted test, before the MRO has completed verification of the test results.
Substance Abuse Professional (SAP)	A licensed physician (Doctor of Medicine or Osteopathy), or a licensed or certified psychologist, social worker, or employee assistance professional, or a drug and alcohol counselor (certified by the National Association of Alcoholism and Drug Abuse Counselors Certification Commission (NAADAC); or by the International Certification Reciprocity Consortium/Alcohol and Other Drug Abuse (ICRC); or by the National Board of Certified Counselors, Inc. and Affiliates/Masters Addictions Counselor (NBBC).

Applicability

This Substance Abuse Prevention Program applies to all employees who drive a commercial motor vehicle and are required to have a CDL.

Effect of use, refusal or failure

Any job applicant who refuses or fails a pre-employment drug test will not be hired. No employee covered by this Substance Abuse Prevention Program who has engaged in prohibited drug or alcohol use will continue to perform safety-sensitive functions. Any employee covered by the Substance Abuse Prevention Program that refuses or fails an alcohol or drug test will be immediately removed from performing safety-sensitive functions by the employer.

Any employee covered by this Substance Abuse Prevention Program that refuses or fails an alcohol or drug test may receive disciplinary action, up to and including termination, in accordance with the existing substance abuse policy of the employer. Furthermore, an employee who violates these requirements may be subject to civil and criminal penalties under federal regulations.

Safety-sensitive functions

An employee is considered to be performing a safety-sensitive function during any period the employee is actually performing, ready to perform, or immediately available to perform any safety-sensitive function. Safety-sensitive functions include:

- All time waiting to be dispatched, unless the employer has relieved the employee from duty;
- All time inspecting, servicing, or conditioning any commercial motor vehicle at any time;
- All driving time;
- All time in or on any commercial motor vehicle;
- All time supervising, assisting, or attending the loading or unloading of a vehicle, or remaining in readiness to operate the vehicle, or in giving or receiving receipts for shipments loaded or unloaded;
- All time repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle.

Prohibited employee conduct

Employees must not engage in the following conduct:

Alcohol concentration - Report for duty or remain on duty requiring the performance of safety-sensitive functions while having an alcohol concentration of 0.02 or greater.

Alcohol possession - Be on duty or operate a commercial motor vehicle while possessing alcohol, unless the alcohol is manifested and transported as part of a shipment.

On-duty alcohol use - Use alcohol while performing safety-sensitive functions.

Pre-duty alcohol Use - Perform safety-sensitive functions within 4 hours after using alcohol.

On-call use - Use alcohol during specified on-call hours.

Post-accident alcohol use - Use alcohol for 8 hours following an accident or until undergoing a post-accident test.

Refusal to test - Refuse to submit to a post-accident, random, reasonable suspicion, or follow-up alcohol or drug test. Refusal to test has the same consequences as a positive test result.

An employee is considered to have refused to submit to a drug test when the employee does any of the following:

- Fails to appear for any test within a reasonable time, as determined by the employer, after being directed to do so by the employer;
- Fails to remain at the testing site until the testing process is complete;
- Fails to provide a urine specimen for any DOT-required drug test;
- Fails to permit or follow required protocol of a required directly observed or monitored drug test;

- Fails to provide a sufficient amount of urine when directed, and it has been determined that there was no medical explanation for the failure;
- Fails to take a second test when directed;
- Fails to undergo a medical examination as part of the “shy bladder” procedures;
- Fails to remain at the testing site until the testing process is complete;
- Fails to cooperate with **any** part of the testing process.

An employee is considered to have refused to submit to an alcohol test when the employee does any of the following:

- Fails to appear for any test within a reasonable time, as determined by the employer, after being directed to do so by the employer;
- Fails to remain at the testing site until the testing process is complete;
- Fails to attempt to provide a saliva or breath specimen for any required test;
- Fails to provide a sufficient breath specimen and a physician has determined that there is no adequate medical explanation for the failure;
- Fails to undergo a medical examination as directed by the employer;
- Fails to sign the Alcohol Testing Form (ATF) when required to do so; or
- Fails to cooperate with **any** part of the testing process.

Drug Use - Report for duty or remain on duty requiring the performance of safety-sensitive functions when the employee uses drugs, unless the use is due to a physician’s instruction who has advised the employee that the substance does not adversely affect the employee’s ability to perform safety-sensitive functions. *The employee must inform the employer of any such therapeutic drug use.*

Positive Drug Test - An employee may not report for duty, remain on duty, or perform a safety-sensitive function if the employee has a confirmed positive drug test.

For purposes of this Substance Abuse Prevention Program,

“Alcohol” means the intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohols including methyl and isopropyl alcohol.

“Alcohol Use” means the consumption of any beverage, mixture, or preparation, including any medication, containing alcohol.

“Drugs” means marijuana (THC), cocaine, opioids (including heroin, synthetic opioids and natural occurring), amphetamines (including methamphetamine and ecstasy) and phencyclidine (PCP).

Other alcohol conduct

Other regulated conduct related to an employee’s use of alcohol includes the following:

- An employee whose test results indicate an alcohol concentration of 0.02 or greater, but less than 0.04, will not be allowed to perform safety-sensitive functions until the start of the employee’s next regularly scheduled duty period, but not less than 24 hours following the alcohol test.
- The employer will not take action against an employee based solely on alcohol test results of less than 0.04. However, the employer may take any lawful action against the employee so long as it has independent authority to do so.

Types of testing

Covered employees are subject to six types of testing under the Substance Abuse Prevention Program.

Pre-employment Testing - Prior to the first time an employee performs safety-sensitive functions, a pre-employment drug test will be conducted. A pre-employment alcohol test is not mandated but is optional.

A pre-employment drug test will be conducted when an individual is hired to perform safety-sensitive functions. The offer of employment is conditioned on the results of the drug test. A pre-employment drug test will also be conducted when a current employee becomes subject to this program as a result of a change in job description or work assignment. Such test shall be administered prior to the first time the employee performs a safety-sensitive function. **The employer will not allow an employee subject to a pre-employment test to perform safety-sensitive functions without a verified negative test result.** *There are exceptions to this rule - please refer to the Federal Regulations, section 382.301 on pre-employment testing.*

Post-accident Testing - When an accident involving a commercial motor vehicle operating on a public road in-state or out-of-state occurs, an alcohol test will be performed on each surviving employee who was performing safety sensitive functions with respect to the vehicle if the accident involved the loss of human life; or if the employee received a ticket within eight hours of the accident for a moving traffic violation arising from the accident. In the case of a citation, one of the following criteria must also be met: 1)the accident involved bodily injury to any person who, as a result of the accident receives medical treatment away from the scene of the accident; **or** 2)one or more motor vehicles incurring disabling damage as a result of the accident, requiring a motor vehicle to be transported away from the scene by a tow truck or other motor vehicle.

When an accident involving a commercial motor vehicle operating on a public road in-state or out-of-state occurs, a drug test will be performed on each surviving employee who was performing safety sensitive functions with respect to the vehicle if the accident involved the loss of human life; or if the employee received a ticket within 32 hours of the accident for a moving traffic violation arising from the accident. In the case of a citation, one of the following criteria must also be met: 1)the accident involved bodily injury to any person who, as a result of the accident receives medical treatment away from the scene of the accident; **or** 2)one or more motor vehicles incurring disabling damage as a result of the accident, requiring a motor vehicle to be transported away from the scene by a tow truck or other motor vehicle.

An employee who is subject to post-accident drug and alcohol testing will remain readily available for such testing or may be deemed to have refused to submit to testing. However, the employee is allowed to get necessary emergency medical attention for injured people, or, if necessary, to leave the scene of an accident for the period necessary to obtain assistance in responding to the accident.

Drug tests will be administered as soon as practicable, but no later than 32 hours after the accident. Alcohol tests will be administered as soon as practicable, but no later than eight hours after the accident.

Random Testing - All employees covered by this Substance Abuse Prevention Program are subject to unannounced drug and alcohol testing based on random selection. The employer will ensure that random drug and alcohol tests are unannounced and spread reasonably throughout the calendar year. UnityPoint will calculate the number of employees subject to random drug and alcohol tests using a scientifically valid method of random selection. All employees will be subject to random testing on each random testing date and will have an equal chance of being tested each time selections are made. As a result of the random selection process, an employee may be tested more than once or not at all during the calendar year.

Reasonable Suspicion Testing - When the employer has reasonable suspicion to believe that an employee covered by this Substance Abuse Prevention Program is using a prohibited drug, or is using

alcohol in a prohibited manner, the employer will require that the employee take a drug and/or alcohol test (whichever is appropriate).

A decision to test must be based on specific, contemporaneous, articulable observations concerning the appearance, behavior, speech or body odors of the employee. The required observations for reasonable suspicion drug or alcohol testing must be made by a trained supervisor. The observations must be made during, just before, or just after the period of the workday that the employee is performing safety-sensitive functions.

The employee may be directed to undergo testing during, just before, or just after the period of the workday that he or she is performing safety-sensitive functions.

If the reasonable suspicion alcohol test is not administered within two hours following the reasonable suspicion determination, the employer shall prepare and maintain on file a record stating the reasons the test was not promptly administered. If the test is not administered within eight hours, the employer shall cease attempts to administer the test and shall state in the record the reason for not administering the test.

Once behavioral, speech, and performance indicators show an employee is under the influence of or impaired by alcohol, the employee will not report for, or remain on duty requiring the performance of safety-sensitive functions. The employer will not permit an employee to perform or continue to perform safety-sensitive functions if the employer has a reasonable suspicion the employee is under the influence of alcohol until an alcohol test shows the employee's alcohol concentration as less than .02; or 24 hours have elapsed following the determination of reasonable suspicion.

Regarding drugs, the supervisor who made the reasonable suspicion observations shall make a written record of his or her observations which led to the test within 24 hours of the observed behavior or before the results of the drug test are released, whichever is earlier.

Return to Duty Testing - Any employee who has engaged in prohibited drug or alcohol use must undergo a drug or alcohol test before returning to duty requiring the performance of safety-sensitive functions. The return to duty drug test must be **OBSERVED** using the DOT mandated observed collection protocol. It is the employer's responsibility to inform the collection site of the **observed** requirement. The drug test must indicate a verified negative result for drug use. The alcohol test must indicate an alcohol concentration of less than 0.02.

Follow-up Testing - Any employee returned to duty after engaging in prohibited drug or alcohol use is subject to follow-up testing following a determination by a SAP that an employee needs help in resolving drug or alcohol abuse problems. Follow-up testing shall be conducted only when the employee is performing safety-sensitive functions, just before the employee is to perform safety-sensitive functions, or just after the employee has ceased performing safety-sensitive functions. ALL follow-up tests must be **OBSERVED** using the DOT mandated observed collection protocol. It is the employer's responsibility to inform the collection site of the **observed** requirement.

Records and confidentiality: The employer must maintain the following records for five years:

- all reports from SAPs;
- records of employee alcohol test results indicating an alcohol concentration of 0.02 or greater;
- copies of annual MIS reports submitted to FMCSA;
- records of verified positive drug test results;
- documentation of refusals to take required tests; and
- all follow-up tests and schedules for follow-up tests.

An employer must keep for three years all information obtained from previous employers concerning drug and alcohol test results.

An employer must keep for two years all records concerning the inspection and maintenance of evidential breath testing devices (EBTs) and records related to the collection process and employee training. An employer must keep records concerning negative drug tests and alcohol tests with a result of less than 0.02 for one year.

All records must be maintained in a secure location with controlled access.

The employer will not release individual test results or medical information about an employee to third parties without the employee's specific written consent. Blanket releases, in which the employee agrees to a release of a category of information or to a release of information to a category of parties, are prohibited.

An employer may release information pertaining to an employee's drug or alcohol test without the employee's consent in certain legal proceedings, including those brought by the employee and those where a court of competent jurisdiction issues an order directing the employer to produce the information. An employer must immediately notify the employee in writing of any information released.

An MRO must report drug test results and medical information gathered as part of the verification process to third parties without the employee's consent if the MRO determines, in his or her reasonable medical judgment, the information is likely to result in the employee being determined to be medically unqualified under an applicable DOT regulation; or the information indicates that the continued performance by the employee of safety-sensitive functions is likely to pose a significant safety risk.

An MRO must provide, within ten business days of receiving a written request from an employee, copies of any records pertaining to the employee's use of alcohol and/or drugs. The MRO may charge no more than the cost of preparation and reproduction for copies of these records.

A laboratory must provide, within ten business days of receiving a written request from an employee, copies of any records pertaining to the employee's use of alcohol and/or drugs. The laboratory may charge no more than the cost of preparation and reproduction for copies of these records.

Each employer shall annually prepare and maintain a summary of the results of its anti-drug and alcohol misuse testing programs performed during the previous calendar year.

Records shall be made available to a subsequent employer upon receipt of a written request from the covered employee.

Previous employers

Pursuant to the new employee's consent, the new employer will obtain from previous employers of the new employee information on the new employee's verified positive drug test results, alcohol test results of 0.04 or greater and refusals to be tested for drugs or alcohol, and documentation of successful completion of return-to-duty requirements within the preceding two years. If the new employee refuses to provide this written consent, the employer shall not permit the new employee to perform safety-sensitive functions.

The employer, if feasible, must obtain and review this information before the new employee first performs safety-sensitive functions. If this is not feasible, it must be reviewed as soon as possible. The new employee is not permitted to continue to perform safety-sensitive functions after 30 days unless the information has been obtained or the employer has made and documented a good faith effort to obtain this information.

The employer must also ask the new employee whether he or she has tested positive, or refused to test,

on any pre-employment DOT drug test during the past two years. If the new employee admits that he or she had a positive test or a refusal to test, the employer must not use the employee to perform safety-sensitive functions until the new employee documents successful completion of the return-to-duty process.

The employer must maintain a written, confidential record of the information obtained or the good faith efforts to obtain the information. The information must be retained for three years from the date of the new employee's first performing safety-sensitive functions for the employer.

Drug testing procedures

General Guidelines - Drug testing will be performed utilizing urine samples. A split sample method of collection will be used. Tests for marijuana (THC), cocaine, opioids (including heroin, synthetic opioids and natural occurring opiates), amphetamines (including methamphetamine and ecstasy) and phencyclidine (PCP) will be performed. Upon notification that a drug test is required, an employee will report immediately to a drug collection site and provide a urine specimen. Since delay in reporting to a site after notification can adversely affect the outcome of a test result, the time allowed for employees to report for drug testing after receiving notice will be travel time plus thirty minutes.

Collection Sites For Urine Specimens - In order to provide maximum convenience to employees, the program will utilize the services of numerous collection sites throughout the state. Each collection site will comply with all methods and procedures of 49 CFR Part 40.

Each employer shall provide to the collection site, the name and telephone number of the appropriate Designated Employer Representative (DER) to contact about any problems or issues that may arise during the testing program. The **employer** will notify the collection site which Federal agency the test is being conducted. (e.g. DOT-FMCSA)

If the collection site consists of a single-toilet room with a full-length privacy door, no one but the employee may be present in the room during the collection, except for the observer in the event of a directly observed collection. The collection site must have a source of water for washing hands that, if practicable, should be external to the closed room used for urination. If an external source is not available, the collection site may secure all sources of water and other substances that could be used for adulteration or substitution and provide moist towelettes outside the closed room.

If the collection site consists of a multi-stall restroom, the site must provide substantial visual privacy (e.g., a toilet stall with a partial-length door). The collection site must either secure all sources of water and other substances that could be used for adulteration or substitution and place bluing agents in all toilets or secure the toilets to prevent access, or conduct all collections as monitored collections. No one but the employee may be present in the multi-stall restroom during the collection, except for the monitor in the event of a monitored collection or the observer in the event of a directly observed collection.

Security - If the collection site uses a facility normally used for other purposes, like a public restroom or hospital examining room, the collection site person must ensure that the portion of the facility used for testing shall be secured during drug testing. Limited access signs must be posted in order to avoid embarrassment to the employee or distraction of the collection site person.

No unauthorized personnel will be permitted in any part of the designated collection site when urine specimens are collected or stored.

Procedures - When a specific time for an employee's test has been scheduled and the employee does not appear at the collection site at the scheduled time, the collection site person will contact the DER to

determine the appropriate interval within which the employee is authorized to arrive. If the employee does not arrive within that interval, the collection site person will notify the DER.

If an employee is going to take both a drug test and an alcohol test, to the greatest extent practicable, the collection site person will wait until the alcohol test is completed before beginning the urine collection process.

When the employee enters the collection site, the drug testing process will begin without undue delay. When the employee arrives at the collection site, the collection site person will require the employee to provide positive identification (e.g., a driver's license). If the employee requests, the collection site person will show identification to the employee, including the collection site person's name, but the identification does not have to include the collection site person's picture, address or telephone number.

The collection site person will explain the basic collection procedure to the employee, including showing the employee the instructions on the back of the Federal Drug Testing Custody and Control Form (CCF) or have the instructions clearly posted in the collection room.

The collection site person will ask the employee to remove outer clothes such as a coat or jacket that might conceal items that could be used to tamper with the urine sample. The collection site person will direct the employee to leave these garments and any briefcase, purse, or other personal belongings in a mutually agreeable location. **Failure to comply constitutes a refusal to test.** The employee may keep the employee's wallet after allowing the collection site person an opportunity to review the contents. The collection site person will provide the employee with a receipt for any personal belongings upon request by the employee.

The collection site person will not ask the employee to remove other clothing or to change into a hospital or examining gown.

The collection site person will direct the employee to empty the employee's pockets and display the items in them to ensure no items are present which could be used to adulterate the specimen. If nothing is there that can be used to adulterate a specimen, the employee will be allowed to place the items back in the employee's pockets. If the collection site person finds any material that could be used to tamper with a specimen, the collection site employee must determine if the material appears to be brought to the collection site with the intent to alter the specimen. If it is, the collection site employee will conduct a directly observed collection. If it appears that the material was inadvertently brought to the collection site, the collection site employee will secure the material until the collection process is complete and conduct an unobserved collection. **Failure to comply constitutes a refusal to test.**

The collection site person will instruct the employee to wash and dry his or her hands prior to urination. After washing hands, the employee will not be allowed to wash his or her hands until after delivering the specimen to the collection site person. The employee will not have any further access to water or other materials that could be used to adulterate or dilute a specimen until delivering the specimen to the collection site person. **Failure to comply constitutes a refusal to test.**

The collection site person will provide the employee with an individually wrapped or sealed collection container. The collection site person will unwrap or break the seal of the collection container immediately before giving it to the employee and in the presence of the employee.

The collection site person will instruct the employee to go into the room used for urination and provide at least 45 mL of urine. The employee will also be instructed not to flush the toilet after completing the void. The collection site employee may set a reasonable time limit for voiding.

If the collection site employee detects any conduct that clearly indicates an attempt to tamper with the specimen, the collection site employee will require that the collection take place immediately under direct

observation and inform the DER that the collection took place under direct observation and the reason for doing so. Upon receiving the specimen from the employee, the collection site person will determine if it contains at least 45 mL of urine.

The collection site person will also check the temperature of the specimen no later than four minutes after receiving the specimen. If the specimen temperature is outside the acceptable range, the collection site person must immediately conduct a new collection using direct observation procedures.

The collection site person will also inspect the specimen for signs of tampering. If there are signs of tampering, the collection site employee must immediately conduct a new collection using direct observation procedures.

The collection site person will have only one donor under his or her supervision at any time, except that during the time one employee is drinking fluids in a “shy bladder” situation a person may conduct a collection for another employee.

To the greatest extent possible, a collection site person will keep an employee’s collection container within view of the collection site person and the employee between the time the employee has urinated and the time the specimen is sealed.

The collection site person must be the only person who handles the specimen besides the employee before it is poured into the bottles and sealed with tamper-evident seals.

When the employee brings the urine specimen to the collection site person, the collection site person must take the following steps in the presence of the employee: 1) pour at least 30 mL of the urine from the collection container into one specimen bottle to be used for the primary specimen; 2) pour at least 15 mL of urine from the collection container into the second specimen bottle to be used for the split specimen; 3) place and secure the lids/caps on the bottles; 4) seal the bottles with tamper-evident seals; 5) write the date on the seals; 6) have the employee initial the seals to certify that the bottles contain the specimen the employee provided.

The collection process is then completed when the collection site person takes the following steps in the presence of the employee: 1) require that the employee read and sign the certification statement on the CCF and provide date of birth, printed name, and day and evening contact telephone numbers on Step 5 of the MRO (Copy 2); 2) the collector must complete Step 4 on the Testing Facility (Copy 1) with their printed name, signature, date, time of collection and shipper identified 3) place the specimen bottles and Copy 1 (laboratory copy) of the CCF in the pouches of the plastic Lab bag; 4) secure the pouches of the plastic Lab bag; 5) give Donor Copy of the CCF (Copy 5) to the employee; advise the employee that they may leave the collection site.

The collection site employee will then 1) place the sealed plastic Lab bag in a shipping container; 2) ensure the specimen is shipped to a laboratory as quickly as possible, but in any case within 24 hours or during the next business day; and 3) send copy 2 of the CCF to the MRO within 24 hours or during the next business day; the Employer Copy (Copy 4) will be forwarded to the DER.

Directly Observed Collection Procedures - Directly observed collection procedures shall be used, with no advance notice to the employee, when: 1) the laboratory reports to the MRO that specimen is invalid, and the MRO reports to the employer that there is not an adequate medical explanation for the result; 2) the MRO reports to the employer that the original positive, adulterated, or substituted test had to be cancelled because the test of the split specimen could not be performed; 3) the collection site person observes material brought to the collection site or the employee’s conduct clearly indicates an attempt to tamper with a specimen; 4) the temperature on the original specimen is out of range; 5) the original specimen appears to have been tampered with; or 6.) the employee is required to submit a return-to-duty or follow-up drug test. The reason for the directly observed collection will be explained to the employee.

Directly observed collection procedures require that the observer be the same gender as the employee.

The **employer** must inform the employee of the observed requirement. The collector must inform the employee of the observed collection protocol.

“The donor will be required to raise their shirt/blouse or skirt/dress to mid-torso (approximately belly-button level); lower their pants, including under garments, to mid-thigh and turn around so the observer may see that the donor does not have a device that could circumvent the collection process. Once the observer affirms there is no such device the donor may return clothing to their normal position and continue with the observed collection.”

The observer must watch the employee urinate into the collection container. Specifically, the observer must watch the urine go from the employee’s body into the collection container. The observer who is not the collection site person must not take the collection container from the employee, but must observe the specimen as the employee takes it to the collection site person. Refusing to allow a required directly observed collection to occur or refusing to follow the observed collection protocol is a refusal to test.

Monitored Collections - Monitored collection procedures require that the collection site person secure the room being used for the collection so that no one except the employee and the monitor can enter it until after the collection has been completed. The monitor must be the same gender as the employee, unless the monitor is a licensed medical professional. The monitor must not watch the employee urinate. The monitor must ensure that the employee takes the collection container directly to the collection site person as soon as the employee has exited the enclosure.

If the monitor hears sounds or makes other observations indicating an attempt to tamper with a specimen, there must be a new collection under direct observation procedures. A refusal to allow a required monitored collection is a refusal to test.

Insufficient Sample - If the employee is unable to provide enough urine to permit a drug test, the collection site person will urge the employee to drink up to 40 ounces of fluids, distributed reasonably through a period of up to three hours, or until the employee has provided a sufficient urine specimen. It is not a refusal to test if the employee refuses to drink. If the employee refuses to make the attempt to provide a new urine specimen, this is a refusal to test. The employee must follow all instructions given by the collector. The employee is NOT allowed to leave the collection site prior to completing the drug test collection or 3 hours has passed. Leaving the collection site without permission or leaving the collection site without completing the collection **constitutes a refusal to test.**

The original insufficient specimen will be discarded, except where it is out of temperature range or shows evidence of adulteration or tampering.

If the employee has not provided a sufficient specimen within three hours of the first unsuccessful attempt to provide the specimen, the collection site person will discontinue testing and will notify the DER. The DER will direct the employee to obtain, within five working days, an evaluation from a licensed physician acceptable to the MRO regarding the medical issues raised by the employee’s failure to provide a sufficient specimen.

The MRO will consider the referral physician’s recommendations in making a written report to the DER about whether the employee has a medical condition that has, or with a high degree of probability could have, precluded the employee from providing a sufficient amount of urine.

Urine Collection Personnel - Collectors meeting the requirements of 49 CFR Part 40 are the only people eligible to collect urine specimens for DOT drug testing. An employer shall not permit an employee with direct or immediate supervisory responsibility or authority over another employee to serve as the urine collection person for a drug test of that employee.

Alcohol testing procedures

Upon notification that an alcohol test is required, an employee will report for alcohol testing. Since delay in reporting after notification can adversely affect the outcome of a test result, the time allowed for employees to report for alcohol testing after receiving notice will be travel time plus thirty minutes.

When a specific time for an employee's test has been scheduled and the employee does not appear at the collection site at the scheduled time, the breath alcohol technician (BAT) or screening test technician (STT) will contact the DER to determine the appropriate interval within which the employee is authorized to arrive. If the employee does not arrive within that interval, the BAT or STT will notify the DER.

If an employee is going to take both a drug test and an alcohol test, to the greatest extent practicable the collection site person will wait until the alcohol test is completed before beginning the urine collection process.

When the employee enters the alcohol-testing site, the alcohol testing process will begin without undue delay.

Alcohol testing will be performed using breath or saliva samples for screening tests, and breath samples for confirmation tests. All tests will be conducted using DOT-approved devices. No other types of alcohol tests (e.g., blood or urine) are authorized.

Screening Tests - The screening test may be conducted using non-evidential alcohol screening devices (ASDs), either breath or saliva, or evidential breath testing devices (EBTs). The BAT or STT will require that the employee provide positive identification (e.g., a driver's license). The employee may ask to see some identification from the BAT or STT, including their name and their employer's name, but the identification need not include picture, address or telephone number.

The BAT or STT will explain the testing procedure, including showing the employee the instructions on the back of the ATF (Alcohol Testing Form). The BAT or STT will then complete Step 1 of the ATF and direct the employee to complete Step 2 on the ATF and sign the certification. **If the employee refuses to sign the certification, constitutes a refusal to test.**

Breath Testing - An individually wrapped or sealed mouthpiece will be opened in front of the employee and the BAT or STT will insert it into the device in accordance with the manufacturer's instructions. The BAT or STT will tell the employee to blow steadily and forcefully into the mouthpiece for at least six seconds or until the device indicates that an adequate amount of breath has been obtained. The BAT or STT will show the employee the results.

Saliva Testing - Only certified screening devices may be used. The test will be conducted by a STT who has completed a course of instruction and demonstrated a proficiency in using the device. The location for the test will meet the same privacy requirements as for an EBT. The STT will supervise only one employee at a time and will remain with the employee during the test.

The STT will check the expiration date on the device and show it to the employee. An expired device will not be used. The STT will open the individually sealed package containing the device in the presence of the employee. The STT will offer the employee the opportunity to use the device. If the employee uses it, the STT will instruct the employee to insert the device into the employee's mouth and use it in the manner described by the device's manufacturer. If the employee chooses not to use the device, the STT will insert the device into the employee's mouth and use the device in the manner described by the device's manufacturer. The STT will wear surgical gloves. If the employee refuses to follow the STT's instructions or will not complete the saliva gathering process will be considered a refusal to test.

If the STT is unable to successfully follow the saliva testing procedure, the STT must discard the device and conduct a new test using a new device. If the STT is unable to successfully conduct the new test, the STT must end the collection, and use an EBT for the screening test. Refusal to complete these tests will be considered a refusal to test.

The STT must read the result displayed on the device no sooner than the device's manufacturer instructs, but in all cases within 15 minutes of the test. The STT must show the device and its reading to the employee, and enter the result on the Alcohol Testing Form (ATF).

When an EBT screening test on an employee indicates an alcohol concentration of 0.02 or higher, and the same EBT will be used for the confirmation test, BATs and STTs are not allowed to use the EBT for a test on another employee before completing confirmation test on the first employee. BATs and STTs are not allowed to leave the alcohol testing site while the testing process for a given employee is in progress, except to notify a supervisor or contact a DER for assistance in the case of an employee or other person who obstructs, interferes with, or unnecessarily delays the testing process.

If the result of the test is an alcohol concentration of less than 0.02, the BAT or STT will date and sign Step 3 of the ATF and transmit the result to the DER in a confidential manner. If the result of the initial test is an alcohol concentration of 0.02 or greater, a confirmation test will be performed.

If the confirmation test is conducted at a different site, the employee will be observed during transit by the BAT or other designated person. The employee will not be allowed to drive a motor vehicle to the confirmation testing site.

Waiting Period - The Breath Alcohol Technician (BAT) will wait at least 15 minutes, but no longer than 30 minutes, after the completion of the initial test before administering the confirmation test. If the confirmation test is not done within 30 minutes, reasoning must be documented, but the test will still be valid. The employee is not to eat, drink, put any object or substance in his or her mouth, and not to belch during the waiting period before the confirmation test. The reason for the waiting period and the restrictions on the employee's activities during that time is for the employee's benefit to prevent any accumulation of mouth alcohol leading to an artificially high reading. The test will be conducted at the end of the waiting period, even if the employee has disregarded the instruction regarding the limitation of activities during the waiting period. A BAT or STT, or an employer representative, will observe the employee during the waiting period.

Confirmation Test - In the presence of the employee, a BAT will conduct an air blank on the EBT before beginning the confirmation test and show the reading to the employee. If the reading is 0.00, the test may proceed. If the reading is greater than 0.00, the BAT must conduct another air blank. If the reading on the second air blank is 0.00, the test may proceed. If the reading is greater than 0.00, the BAT must take the EBT out of service and proceed with the test of the employee using another EBT.

The BAT will open a new individually wrapped or sealed mouthpiece in view of the employee and insert it into the device in accordance with the manufacturer's instructions. The BAT and the employee must read the sequential test number displayed on the EBT. The BAT will instruct the employee to blow steadily and forcefully into the mouthpiece for at least six seconds or until the device indicates that an adequate amount of breath has been obtained. The BAT must show the employee the results displayed on the EBT. The BAT will show the employee the result and unique test number that the EBT prints out.

If the initial and confirmatory test results are different, the confirmation test is deemed to be the final result. After the confirmation test result, the BAT must sign and date Step 3 of the ATF. If the confirmation test result is lower than 0.02, nothing further is required of the employee. If the confirmation test result is 0.02 or higher, the BAT will direct the employee to sign and date Step 4 of the ATF. If the employee does not do so, this is not a refusal to test. The BAT will immediately transmit the result to the DER in a

confidential manner. The BAT will immediately notify the DER of any result of 0.02 or greater by any means that ensures the result is immediately received by the DER (e.g., telephone or secure fax machine).

An employer receiving alcohol test result information that is not in writing must establish a mechanism to establish the identity of the BAT sending the test result information. The employer must store all test result information in a way that protects confidentiality.

‘Shy Lung’ Procedures - If an employee does not provide an amount of breath sufficient to complete a breath test, the BAT or STT must instruct the employee to attempt again to provide a sufficient amount of breath. If the employee refuses to make the attempt, the BAT or STT will discontinue the test and immediately inform the DER. This is a refusal to test.

If the employee attempts and fails to provide an adequate amount of breath, the BAT or STT may provide another opportunity if the BAT or STT believes there is a strong likelihood that it could result in providing a sufficient amount of breath. When the employee’s attempts fail to produce a sufficient amount of breath, the BAT or STT will immediately notify the DER.

The DER will direct the employee to obtain, within five days after the attempted provision of breath, an evaluation from a licensed physician acceptable to the employer concerning the employee’s medical ability to provide an adequate amount of breath. The physician must provide the DER with a signed statement of his or her conclusions. The physician in his or her reasonable medical judgment, must base those conclusions on one of the following determinations: a) a medical condition has, or with a high degree of probability could have, precluded the employee from providing a sufficient amount of breath; or b) there is not an adequate basis for determining a medical condition has, or with a high degree of probability could have, precluded the employee from providing a sufficient amount of breath. Upon receipt of the report from the physician, the DER must immediately inform the employee and take appropriation action based upon the DOT regulations.

Invalid Tests - A breath alcohol test will be cancelled and must be treated as if the test never occurred under the following circumstances:

In the case of a saliva screening test:

- the STT reads the result either sooner or later than the time allotted by the manufacturer;
- the device does not activate; or
- the device is used after the expiration date on the package.

In the case of a screening or confirmation test conducted on an EBT:

- the sequential test number or alcohol concentration displayed on the EBT is not the same as the sequential test number or alcohol concentration on the printed result.

In the case of a confirmation test:

- the BAT conducts the confirmation test before the end of the minimum 15–minute waiting period;
- the BAT does not conduct an air blank before the confirmation test;
- there is not a 0.00 result on the air blank conducted before the confirmation test;
- the EBT does not print the result; or
- the next external calibration check of the EBT produces a result that differs by more than the tolerance stated in the QAP from the known value of the test standard.

An alcohol test must be cancelled if any of the following problems occur, unless they are corrected:

- the BAT or STT does not sign the ATF;
- the BAT or STF fails to note on the remarks line of the ATF that the employee has not signed the ATF after the result is obtained; or

- the BAT or STT uses a non–DOT form for the test.

The BAT or STT has the responsibility of trying to complete successfully an alcohol test for each employee. The STT or BAT must try to correct any testing problems promptly. The STT or BAT may repeat the testing process as part of this effort. If repeating the testing process is necessary, the STT or BAT must begin the new test as soon as possible, and must use a new ATF, a new sequential test number, and if needed a new ASD and/or new EBT.

No person may declare a test cancelled based on a mistake in the process that does not have a significant adverse effect on the right of the employee to a fair and accurate test. A cancelled alcohol test is neither positive nor negative. An employer may not attach to the cancelled test the consequences of a test result that is 0.02 or greater. When a test must be cancelled, the BAT or STT must inform the DER within 48 hours of the cancellation.

Testing Sites - The testing location must provide the employee being tested with privacy sufficient to prevent unauthorized people from seeing or hearing test results. Reasonable suspicion and post–accident tests may be conducted at a site that partially meets these requirements. In such cases, the site must afford visual and aural privacy to the employee to the greatest extent practicable. Collection site persons must prevent unauthorized persons from entering the test site. Collection site persons must ensure that when an EBT or ASD is not being used for testing, it is stored in a secure place.

To avoid distraction, BATs and STTs are limited to conducting an alcohol test for only one employee at a time.

Alcohol Testing Personnel - Screening test technicians (STTs) and breath alcohol technicians (BATs) meeting the requirements of 49 CFR Part 40 are the only people eligible to conduct DOT alcohol tests. An STT can only conduct alcohol screening tests, but a BAT can conduct alcohol screening and confirmation tests. An employer shall not permit an employee with direct or immediate supervisory responsibility or authority over another employee to serve as the BAT or STT for an alcohol test of that employee.

Medical Review Officers (MROs)

An essential part of the drug testing program is the final review of confirmed positive results from the laboratory. A positive test result does not automatically identify an employee or applicant as having used drugs. The test result must be reviewed by an individual with a detailed knowledge of possible alternate medical explanations for the positive test result. This review is performed by the MRO prior to giving the test result to the employer. The MRO is a licensed and certified physician with knowledge of substance abuse disorders.

The MRO will review the drug test results before they are reported to the employer. The MRO will review and interpret each confirmed positive test result to determine if there is a legitimate medical explanation for the confirmed positive result. If the MRO determines that there is a legitimate medical explanation for a confirmed positive test result other than the use of a prohibited drug, the MRO will verify the test result as negative. Otherwise, the MRO will verify the test result as positive.

MROs are not permitted to inform employers about the existence of a confirmed laboratory test pending verification. Employers are not allowed to take any action concerning an employee until they receive the MRO's notification of a verified positive test.

Before the MRO verifies a confirmed positive result for opiates, the MRO will determine there is clinical evidence, in addition to the urine test, of unauthorized use of any opium, opiate, or opium derivative.

Prior to making a final decision to verify a positive test result, the MRO will contact the employee directly, on a confidential basis, to determine if the employee wishes to discuss the test result. If, after making all reasonable efforts and documenting them, the MRO is unable to reach the employee directly, the MRO will contact the designated employer representative (DER) who will direct the employee to contact the MRO as soon as possible. The DER will, to the maximum extent possible, keep the contact confidential. Before obtaining medical information from the employee as part of the verification process, the MRO will inform the employee that information may be disclosed to third parties.

The MRO may verify a test as positive without direct communication with the employee in three circumstances:

- if the employee expressly declines the opportunity to discuss the test;
- if the DER has made and documented a contact with the employee and more than 72 hours have passed without the MRO receiving any communication from the employee; or
- if neither the MRO nor the DER, after making and documenting reasonable efforts, has been able to contact the employee within ten days of the MRO receiving the confirmed test result from the laboratory.

If such a verification occurs, the employee may present the MRO information documenting unavoidable circumstances that prevented the employee from timely contacting the MRO. Based on this information, the MRO may reopen the verification.

The MRO will notify each employee who has a confirmed positive test that the employee has 72 hours in which to request a test of the secondary specimen. If the employee makes such a request, the MRO will order, in writing, the analysis by another SAMSHA certified lab. If the result of the second test fails to confirm the presence of the drug found in the primary specimen, or the second specimen is un-testable, the MRO shall cancel the test and report the cancellation to the DOT, the employer, and the employee. If an employee fails to contact the MRO in 72 hours requesting a second analysis, the MRO may still allow a second analysis based on a legitimate explanation provided by the employee.

The laboratory will conduct testing on all specimens to detect tampering, such as adulteration of the specimen or substituting a specimen. If the MRO informs the employer that a negative pre-employment drug test is dilute, the employer shall direct the applicant to take another test immediately. The result of the second test will be the test of record. If the second test is also negative and dilute, the employer will treat the test as a verified negative test. If the employer directs the applicant to take a second test and the applicant declines to do so, that constitutes a refusal to test.

With respect to the use of split specimens in validity testing, the process will parallel the existing split specimen procedure in the case of drug positives. Within 72 hours of being notified by the MRO that the employee's test has been verified adulterated or substituted, the employee may request a test of the split specimen. The employee is not required to pay for the test from the employee's own funds before the test takes place. The employer may seek to have the employee ultimately pay part or all of the cost of the split specimen. A second laboratory will test the split specimen.

The MRO will review and verify adulterated or substituted test results. With respect to the MRO review, the process will also parallel the existing procedures for drug positives. The employee will have the opportunity to present a legitimate medical explanation. The employee, as is the case for all drugs except opiates, has the burden of proof to demonstrate to the MRO that a legitimate medical explanation exists.

If the MRO determines that the employee's explanation does not present a reasonable basis for concluding that there may be a legitimate medical explanation, the MRO will report the test to the DER as a verified refusal to test because of adulteration or substitution, as applicable.

“Stand down” refers to an employer practice of temporarily removing an employee from performance of safety-sensitive duties upon learning that the employee had a confirmed laboratory positive drug test, but before the MRO has completed the verification process. The employer is prohibited from standing employees down in the absence of a waiver from a DOT agency.

Testing Laboratories - All laboratories will use the testing criteria set forth in HHS rules or guidance. Each testing laboratory used by UnityPoint will comply with all methods and procedures of 49 CFR Part 40. The laboratory will maintain employee test records in confidence. The laboratory will be secure at all times and will restrict access to specifically authorized individuals whose authorization is documented. The laboratory will retain a specimen of a positive, adulterated, substituted or invalid result for a minimum of one year. The laboratory will retain all records pertaining to each employee urine specimen for a minimum of two years. The laboratory will have quality assurance and control procedures to monitor each step of the drug testing process.

Individual Access to Test and Laboratory Certification Results - Any employee who has undergone a drug test will, upon making a written request, have access to any records relating to his or her drug test and any records relating to the results of any relevant certification, review, or revocation of certification proceedings.

Verified test results

An employer who receives a verified positive drug test result must immediately remove the employee involved from performing safety-sensitive functions.

An employer who receives a verified adulterated or substituted drug test result must consider this a refusal to test and immediately remove the employee involved from performing safety sensitive functions.

An employer who receives an alcohol test of 0.04 or higher must immediately remove the employee involved from performing safety-sensitive functions.

An employer who receives an alcohol test of 0.02 to 0.039 must temporarily remove the employee involved from performing safety-sensitive functions.

When an employee has a verified positive adulterated or substituted test result, the employer must not return the employee to the performance of safety-sensitive functions until or unless the employee successfully completes the return-to-duty process.

Employee referral, evaluation and treatment

An employee who has engaged in prohibited conduct will be immediately removed from the performance of safety-sensitive functions. Employees who have engaged in prohibited conduct cannot again perform safety-sensitive duties for any employer until they have completed the Substance Abuse Professional (SAP) evaluation, referral and education process. The first step in the process is a SAP evaluation. The employer must provide to each employee who has engaged in prohibited conduct a free listing of SAPs readily available to the employee and acceptable to the employer, with names, addresses and telephone numbers.

The employer is not required to provide a SAP evaluation or any subsequent recommended education or treatment. However, if the employer offers the employee an opportunity to return to safety-sensitive duty following a violation, the employer must, before the employee returns to that duty, ensure that the employee receives an evaluation by a SAP and successfully complies with the SAP's recommendations.

An employer who receives the SAP's written notice that the employee has not successfully complied with the SAP's recommendations shall not return the employee to the performance of safety-sensitive duties.

Following a SAP report that the employee has not demonstrated successful compliance, the employer may take personnel action consistent with the employer's policy and/or labor management agreements. The employee must pay for the SAP evaluations and services unless the payment issue is governed by existing management labor agreements or included in existing health care benefits.

The SAP will:

- make a face-to-face clinical assessment and evaluation to determine what assistance is needed by the employee;
- refer the employee to an appropriate education and/or treatment program;
- conduct a face-to-face follow up evaluation;
- provide the DER with a follow-up drug/alcohol testing plan for the employee; and provide the employer and the employee with recommendations for continuing education and/or treatment.

An employee who has been evaluated by a SAP may not seek a second opinion from a second SAP, nor may an employer seek a second SAP's opinion. Neither the employer nor the employee may change the SAP's recommendation. The SAP is allowed to modify his or her initial recommendation based on new or additional information. An employer may, as part of the return-to-duty agreement with the employee, require that the employee participate in SAP-recommended services.

An employer who permits an employee to return to the performance of safety-sensitive functions following prohibited conduct must ensure that the employee takes a return-to-duty test. **The return-to-duty drug test must be OBSERVED.** For drugs, the employee must have a verified negative test result before being allowed to perform safety-sensitive functions. For alcohol, the employee must have a test result of less than 0.02 before being allowed to perform safety-sensitive functions.

The **return-to-duty test cannot occur until after the SAP has determined that the employee has successfully complied with the prescribed education and/or treatment.** An employer is not required to return an employee to a safety-sensitive position because the employee has complied with the prescribed education and/or treatment and passed a return-to-duty test. That is a personnel decision that the employer has the discretion to make, subject to collective bargaining agreements and other legal requirements.

The number and frequency of follow up tests will be determined by the SAP and will consist of at least six unannounced tests in the first 12 months of safety-sensitive duty following the employee's return to safety-sensitive functions. The SAP may also require follow-up tests during the 48 months of safety-sensitive duty following this first 12 month period. The SAP may modify his or her determinations concerning follow-up tests. ALL follow-up drug tests must be **OBSERVED**.

It is the employer, not the MRO or the SAP, who must decide whether to put the employee back to work in a safety-sensitive position. The employer must carry out the SAP's follow-up testing requirements, and shall not allow the employee to continue to perform safety-sensitive functions unless follow-up testing is conducted as directed by the SAP.

The Substance Abuse Prevention Program provisions governing the referral, evaluation and treatment of employees do not apply to applicants who refuse to submit to pre-employment tests or to applicants having a verified positive pre-employment drug test result.



Signs and Symptoms of Alcohol and Controlled Substances Use



UnityPoint Clinic
Occupational Medicine

For employees under regulations of the Federal Motor Carriers Safety Administrations (FMCSA)

Sign, symptoms and dangers of substance abuse

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The law requires that you, the covered employee, be made aware of the effects of substance abuse. All employees must report to work “fit for duty” and remain fit throughout the workday in order to perform in a safe, efficient, and productive manner.

In an effort to establish a work environment free from the adverse effects of substance abuse, the following information is provided to help you evaluate the risks of involvement with chemical substances.

The prohibited illegal drugs include marijuana, cocaine, opiates (including heroin), amphetamines (including MDMA (ecstasy)) and PCP.

The effects of each are listed below:

Marijuana (THC) (dope, weed, herb, grass, pot, reefer, mary jane)

The common name for a crude drug made from the chopped leaves, stems and flowering tops of a plant called Cannabis Sativa. The active ingredient in marijuana (THC) is stored in body fat and is retained for days to weeks after use.

Immediate effects: Reddened eyes; increased heart rate; dry mouth and throat, lethargy, slow reflexes, difficulty in performing job duties, difficulty in focusing on task.

Chronic and long term effects: Reduction in efficiency of the respiratory, cardiovascular, reproductive and immunological systems; impaired short-term memory; altered sense of time; slowed reaction time; reduced ability to concentrate; psychological dependence; impaired motor skills; addiction.

Effects on motor skills

A person driving, or operating aircraft, machinery, equipment, etc. while using marijuana is likely to experience:

Impaired reaction time - Reaction time is increased, and action time is slowed. Thinking and reflexes are slowed, making it difficult to respond to sudden, unexpected events.

Impaired short term memory - The learning process is slowed. Remembering a sequence of numbers or memorizing and following a series of directions becomes difficult.

Reduced concentration - Inability to display continuous attention or process complex information occurs. There is difficulty with complex decisions.

Impaired tracking - The act of following a moving stimulus is significantly and consistently diminished. Tracking can be affected up to ten hours after use.

Distorted time and distance sense - The ability to perceive accurately the passage of time is adversely affected. The user typically overestimates the time that has elapsed.

Lengthened glare recovery and blurred/double vision

Distorted visual and depth perception - Confusion is created about traffic movement and appropriate driver response.

Note: Consumption of Cannabidoil Oil (CBD) or hemp products, specifically Hemp Seed Oil which contains THC may cause a positive drug test result, and will not be accepted by the MRO as legitimate explanation of a positive test.

Marijuana use is NOT allowed for any Federal Safety-Sensitive positions.

Opioids (horse, smack, junk, H, morpho, dollies, heroin, opium, morphine, codeine, hydrocodone, hydromorphone, oxycodone, oxymorphone)

Sometimes referred to as narcotics, opiates are a group of drugs used medically to relieve pain. Some opiates come from a resin taken from the seed pod of the Asian Poppy, i.e. opium, morphine, heroin and codeine. Other opiates are synthesized or manufactured. The term "opioids" includes naturally occurring opiate drugs, as well as the synthetic narcotics.

Immediate effects: Relaxation and induced sleep; reduction of pain; decrease in size of pupils; cold, moist and bluish skin, lethargy, slow reflexes, difficulty in performing job duties, difficulty in focusing on task.

Chronic and long term effects: Restlessness, nausea and vomiting; breathing slows down, and death may occur; user may go "on the nod" going back and forth from feeling alert to drowsy; loss of appetite; addiction even with occasional use; infections of the heart lining and valves, skin abscesses, and congested lungs; infections from unsterile solutions, illness such as liver disease, tetanus, serum hepatitis and AIDS from use of needles.

Effects on Motor Skills

A person driving, or operating aircraft, machinery, equipment, etc. while using Opiates/Opioids is likely to experience:

Effects of intoxication - These effects are similar to those produced by alcohol abuse.

False sense of security - This state of mind will cause the user to take more chances and risks.

Euphoric high followed by a period of stuporous inactivity - The user daydreams while in this state of mind. Attention is not given to the piloting conditions and situations. This subsequently creates the probability of a collision.

Difficulty in focusing - The pupils are so constricted (pinpoint size) that vision is impaired.

Visual distortion - Blurred and/or double vision occurs as it does with any depressant drug.

Loss of consciousness - This is due to extreme fatigue and drowsiness.

Coma - This creates an obvious safety risk.

Cocaine (coke, crack, snow)

A powerful stimulant drug extracted from the leaves of the Erythroxylon coca plant. It is the most powerful central nervous system stimulant known to mankind. (Crack is a form of cocaine).

Immediate effects: Euphoria; dilated pupils; increase in blood pressure, heart rate, respiration rate, and body temperature.

Chronic and long term effects: Short attention span; irritability, anxiety and depression; seizure and heart attack; loss of appetite and sleeplessness; psychological problems and dependence; hallucinations of touch, sight, taste, and/or smell.

Effects on Motor Skills

A person operating machinery, equipment, etc. while using cocaine is likely to experience:

Lapses in attention and concentration - Awareness is adversely affected regardless of the amount used.

Aggressive behavior - The result manifestations are anger and hostility toward coworkers as well as impatience and inappropriate risk-taking. The user often overreacts to minor irritations.

Tendency to overreact & overcompensate - Acceleration, frequent braking, etc. are affected by over-stimulated reflexes.

Impaired motor coordination - A decrease in hand-steadiness and eye/hand coordination affects proper response.

Periods of loss of consciousness - This is the result of fatigue due to lack of sleep and food.

Impaired judgment

False sense of alertness and security - User becomes overly confident in judgment and skill.

This affects their ability to perceive impending danger.

Convulsions, seizures, cardiac arrest and/or stroke - These effects can obviously result in a dangerous situation.

Distorted vision and difficulty in seeing - The pupils are so dilated that sunlight or bright head lights cause pain and discomfort. Glare recovery is also affected.

Auditory and visual hallucinations as well as cocaine psychosis - Changes in perception are experienced. The user is out of touch with reality and loses sight of where he is going.

Profound depression, anxiety, irritability, and restlessness - Cocaine is a fast-acting drug. The euphoria ends in less than an hour. The user is more depressed after using cocaine than before use. The higher the "high" the lower the "low."

Amphetamines (speed, meth, hearts, pep pills, beanies, uppers, peaches, cartwheels, sky-rockets, ecstasy)

Drugs which are central nervous system stimulants used to increase alertness and physical activity. In pure form they are yellowish crystals that are manufactured into tablets or capsules. The three amphetamines include: Amphetamine, Dextroamphetamine, Methamphetamine (free-based methamphetamine is called ICE) and MDMA (Ecstasy).

Immediate effects: Increased heart rate and respiration; increased blood pressure; dilated pupils; dry mouth.

Chronic and long term effects: Sweating; headache; blurred vision and dizziness; decreased appetite; sleeplessness and anxiety; rapid or irregular heartbeat; tremors; loss of coordination; physical collapse; depression; addiction and brain damage; amphetamine psychosis (hallucinations, delusions, or paranoia).

Effects on Motor Skills

Very similar to the effects of Cocaine/Crack, except intensity decreases and duration increases. Stimulant drugs used to combat fatigue make the user edgy, less coordinated and more likely to be involved in accidents. A person driving, or operating aircraft, machinery, equipment, etc. while using amphetamines is likely to experience:

Overestimation of performance capabilities - User takes more risks

Likelihood of being more accident - prone

Anxiety, irritability and frequent over - reaction - Minor irritations affect inappropriate reactions

Extreme mental and physical fatigue - This occurs during the "down" period. During this time the user is unable to concentrate and make sound judgments.

Food and sleep deprivation - Amphetamine psychosis can result: the user is out of touch with reality and does not know where he/she is going.

Auditory and visual hallucinations

Impaired motor coordination - Responses necessary for hand/eye coordination are impaired.

Phencyclidine (PCP)

PCP was first developed as an anesthetic in the 1950's and was taken off the market because it sometimes caused hallucinations. Most often called "angel dust," it is available in various forms: a white crystal-like powder, a tablet or capsule.

Immediate effects: Increased heart rate and blood pressure; flushing, sweating, dizziness and

numbness.

Chronic and long term effects: Stimulation or speeding up of body functions (may also act as a depressant, pain killer, anesthetic, or hallucinogenic drug); change in user's perception of own body and other forms; changes in speech, muscle coordination and vision; slowing of body movements; dulled sense of touch and pain; "spacing out" of time; drowsiness, convulsions and coma (effects of large doses); death from repeated convulsions, heart and lung failure or ruptured blood vessels in the brain; signs of paranoia, fearfulness and anxiety; flashbacks or PCP psychosis.

Effects on Motor Skills

The person using this drug is extremely dangerous. Its effects are so varied and so bizarre that the dangers are unpredictable. A person driving, or operating aircraft, machinery, equipment, etc. while using PCP is likely to experience:

A feeling of superiority

Sense of invulnerability and power - This causes the user to take more risks.

Aggressive behavior - This drug creates a very aggressive, hostile and violent person with very little patience and no fear of death.

Auditory and visual hallucinations - This creates the likelihood of the user reacting to some thing not there, causing an accident.

Visual distortion - Blurred and/or double vision can occur.

Convulsions, coma and/or death - This creates the obvious possibility of an accident.

Loss of perception of time - Time appears to slow down.

Impaired coordination & dulled senses

Signs and symptoms of substance abuse

Substance abuse has a noticeable impact on the way people perform on the job. Whether the drug of choice is marijuana, cocaine, amphetamines, opiates, PCP, alcohol, or prescription drugs, drug use affects everyone's safety in the workplace and causes changes in "normal" work patterns and behaviors.

Even if you don't use drugs or alcohol, you can help keep your workplace drug free by learning to recognize the warning signs of drug abuse on the job.

You must remember, however, some of these same warning signs are indicative of other problems such as diabetes, thyroid disease, etc. It's not the job of co-workers or supervisors to diagnose or treat substance abuse. Your job is to know the facts and help protect your family, your co-workers, and the public from the effects of drug abuse.

Signs of marijuana use include:

- Rapid loud talking
- Excessive laughter or inappropriate happiness
- Forgetfulness in a conversation (i.e. "What was I saying?")
- Inflammation in whites of eyes; pupils unlikely to be dilated
- Appearance of intoxication, but has no smell of alcohol
- Appearance of sleepiness or stupor in the latter stages
- Distorted sense of time passage, tendency to overestimate time intervals
- Tendency to drive vehicles slowly, below speed limit
- Increase in appetite especially after smoking marijuana
- Odor similar to burnt rope on clothing or breath
- Presence of roach clips (e.g. paperclips, bobby pins, hemostats or tweezers) and bongs or water pipes

Signs of opiate use include:

- Pinpoint pupils that fail to respond to light

- Respiratory depression
- Drowsiness
- Nausea and vomiting
- Apathy and decreased physical activity
- Short-lived euphoria or feeling good effects
- Changes in state of mind, going back and forth from feeling alert to drowsy
- Coma or death (result of overdose)

Signs of cocaine use include:

- Dilated pupils
- Runny nose; reddened and sore nose, cold or chronic sinus/nasal problems, nosebleeds
- Respiratory problems
- Unexplained bursts of energy
- Restlessness or nervousness
- Repetitive and non-purposeful behavior
- Irritability and anxiety
- Long periods without sleeping or eating, likely to be emaciated
- White powder in container and/or around nose
- Use or possession of paraphernalia including spoons, razor blades, mirrors, little bottles of white powder, straws and currency rolled into tight tube-like formation.

Signs of amphetamine use include:

- Dilated pupils
- Dryness of mucous membranes (dry mouth and lips)
- Excessive sweating and shakiness
- Reduced or loss of appetite
- Lack of sleep, insomnia
- Talkativeness, but conversation often lacks continuity, changes subjects rapidly
- Unusual energy, accelerated movements and activities

Signs of phencyclidine (PCP) use include:

- Pupils may appear dilated
- Mask-like facial appearance
- Rigid muscles, strange gait
- Irrational speech or behavior
- Symptoms of intoxication
- Hallucinations/ Subject to flashbacks
- Violent or frightened reactions
- Exaggerated physical and mental reactions to situations
- Disorientation; agitation and violence if exposed to excessive sensory stimulation
- Deadened perception (may experience severe injuries while not appearing to notice)

Legal but dangerous

A drug is any chemical substance that produces physical, mental, emotional or behavioral change in the user. Many substances such as alcohol, depressants and inhalants are legal and enjoy wide public acceptance. This acceptance doesn't remove the threat of inappropriate use. In fact, because of their psychoactive (mind-altering) effects and accessibility, these substances are commonly abused and can cause dangers in the workplace. **Alcohol is part of the DOT testing program**, and while depressants and inhalants are not, they are often banned by employers. Be sure to check your organization's policy.

Alcohol

Immediate effects: Odor on breath; initial stimulation followed by depressed nervous system; flushed skin; glazed appearance of eyes; slowed reaction time; impaired motor skills.

Chronic and long term effects: Nutritional deficiencies and sleeping difficulty; impaired short term memory; inability to concentrate; physical and psychological dependence; brain and nervous system damage; liver damage; digestive problems (gastric ulcer); higher likelihood of stroke, coronary problems in general and several forms of cancer; disease of pancreas and kidneys; birth defects in children of women that drink heavily.

Effects on Motor Skills

A person operating aircraft, machinery, equipment, etc. while using alcohol is likely to experience the following under even minute amounts of alcohol. These reactions increase in intensity with blood alcohol level.

Impaired reaction time and motor coordination - Reaction time is increased, and action time is slowed. Thinking and reflexes are slowed, making accidents more likely in unexpected situations.

Reduced concentration - Memory is impaired and learning processes are slowed. Remembering sequences of numbers or directions can be difficult. Daydreaming can lead to accidents.

Tendency to take unnecessary risks - Impaired judgment and disinhibition make it more likely user will take unnecessary risks. May also occur due to false sense of security.

Possibility of reacting with anger toward others - As blood alcohol level decreases, agitation may cause outbursts of anger.

Euphoric high followed by a period of stuporous inactivity - Daydreaming occurs and attention is diverted. Possibility of accidents is increased due to sluggishness and inattention.

Visual distortion - Blurred and/or double vision occurs as with any depressant drug.

Depressants (barbiturates, ludes, tranquilizers, downers)

Effects: Slurred speech; staggered gait; symptoms of alcohol intoxication with no alcohol odor on breath; disorientation; slowing of mental processes and reflexes; lack of facial expression or animation, flaccid appearance; frequent visits to different physicians for prescriptions to treat nervousness, insomnia, stress or tension

Inhalants (glue, vapor producing solvents, propellants, typewriter correction fluid, nitrous oxide, amyl nitrite, butyl nitrite)

Effects: Nausea, sneezing, coughing, nosebleeds; bad breath or substance odor on breath and clothes; feeling and looking tired; drowsiness or unconsciousness; decreased heart and breathing rate; lack of coordination; loss of appetite; preference for group activity rather than being alone; presence of bags or rags containing solvent in locker, etc.; discarded whipped cream or similar charges (users of nitrous oxide); small bottles labeled "incense" (users of butyl nitrite)

Prescriptions

Certain medications and prescription drugs contain chemicals that are cross-reactive and can produce positive drug tests. The MRO cannot accept the use of a substance that is not prescribed to that employee as

legitimate explanation of a positive test.

Synthetic Marijuana

K2 or “Spice” is an illicit drug that is comprised of a mixture of herbs and spices, typically sprayed with a synthetic compound that is chemically similar to THC, the psychoactive ingredient in marijuana. K2 is often marketed in head shops, tobacco shops, or over the Internet as incense or “fake weed.” Unknown product origin and amount of chemical compound on the organic material are just two of the many risks associated with K2/Spice.

Danger signs of deteriorating job performance for reasonable suspicion: It is important to understand that deteriorating job performance can be due to emotional, medical, etc. conditions other than substance abuse. It is important to look at job performance as an indicator that someone may need help. Some common indicators associated with substance abuse are as follows:

Absenteeism and tardiness

- Unauthorized leave
- Excessive sick leave
- Monday and Friday absences
- Repeated absences of 2-4 days
- Repeated absences for 1-2 weeks (5-10 days)
- Excessive tardiness, especially returning from lunch or on Monday mornings
- Leaving work early
- Peculiar and improbable excuses for absences
- Higher absenteeism rate than other employees for colds, flu, gastritis, etc.
- Frequent unscheduled short-term absences

On-the-job absenteeism

- Continued absences from post
- Frequent trips to water fountain or bathroom
- Long coffee breaks
- Physical illness on the job

Accidents

- Accidents on the job
- Ignoring safety rules
- Using equipment recklessly
- Taking unreasonable risks

Work patterns

- Difficulty in concentrating - work requires great effort; jobs take more time; hand tremors
- Confusion - difficulty recalling instructions; difficulty with complex assignments; difficulty recalling own mistakes
- High and low periods of productivity
- Lowered job efficiency - missed deadlines; mistakes due to inattention; waste of material; bad decisions; subject of complaints from industry/public representatives; improbable excuses for poor performance

Employee relationships on the job

- Over-reaction to real or imagined criticism
- Withdrawal or inappropriately talkative



UnityPoint Clinic

List below, by title or description, all positions in your organization for which drug and alcohol testing is required under 49 CFR, Part 382.

Your Organization's Substance Abuse Policy

If your organization has already adopted a satisfactory substance abuse policy, replace the following pages with that policy. If not, adopt a policy as soon as possible and include a copy in this manual. The following sample policy can be used as a guide in creating a policy tailored to your organization. It does not take the place of your organization's substance abuse policy.

Your employees must know the specific consequences of a positive drug test result. Therefore, your substance abuse policy must answer the question, "What happens to an employee if his or her drug or alcohol test is positive?" The policy must be comprehensive enough that it can be applied to many different situations.

Sample Substance Abuse Policy for employees covered by the Federal Motor Carrier Safety Administration (FMCSA)

If the test of an employee, who is subject to the requirements of federal DOT drug and alcohol testing, results in an MRO verified positive test for the use of drugs, or an alcohol concentration of 0.04 or greater, the employee will be referred to an appropriate substance abuse professional for assessment and enrollment in a treatment and rehabilitation program, if recommended. Results of the positive drug or alcohol test and terms of the rehabilitation will remain confidential, except as provided by the Federal Regulations

Employees referred to the treatment and rehabilitation program as a result of an MRO verified positive test or breath testing showing an alcohol concentration above 0.04, must immediately cease any substance abuse, must be subject to testing before returning to safety-sensitive duty, must subject themselves to periodic unannounced testing for a period of not to exceed sixty months, and must comply with all other conditions of the treatment and counseling program recommended by the substance abuse professional.

All [A portion of/none of the] expenses of the substance abuse treatment and rehabilitation program shall be paid for by employer [in an amount equal to _____ percent]. [The remaining expenses for the rehabilitation program shall be paid for entirely by the employee with the employee health insurance provider funding a portion as provided in the benefit plan.]

An employee required to take time off in order to participate in a rehabilitation program will be permitted to use sick leave, vacation time, and/or unpaid leave [will continue to receive regular compensation for a period of up to ____ work days].

Participation in substance abuse treatment and rehabilitation will not result in disciplinary action; however, non-covered duties may be assigned until the MRO or substance abuse professional determines that the employee may return to duty. Successful completion of the prescribed program will be required for the employee to continue employment with the employer.

If an employee is undergoing substance abuse treatment and counseling or has returned to duty upon successfully completing such treatment and rehabilitation and a subsequent test is verified by the MRO as positive, or results in an alcohol concentration of 0.04 or greater, the employee will be terminated [will be provided a second opportunity for rehabilitation at the employee's expense. An employee shall be offered rehabilitation _____ times before employment shall be terminated].

Employees who undergo substance abuse treatment and counseling under this policy and who continue to work must meet all established standards of conduct and job performance.

Substance Abuse Professional List

Due to the continuous changes in the certified SAP list please access one of the links below to locate a Substance Abuse Professional in your area.

SAP Location Website:

https://saplist.com/find_a_sap/search.php

Or

<https://www.naadac.org/sap-directory>

Other hotlines that can help you reach a substance abuse professional include:

Iowa Drug & Alcohol Helpline (800) 559-9503
Substance Abuse Helpline (800) 967-5752
Alcohol & Drug Treatment Referral (800)662-4357
National Council on Alcoholism (800) 654-4673
Marijuana Anonymous (800) 766-6779
Methamphetamine Hotline (888) 268-9124
Al-Anon (for families of alcoholics) (888) 425-2666



UnityPoint Clinic
Occupational Medicine

Designated Employee Representative Designation Form (DER)

Your organization has a Designated Employer Representative (DER), who can answer questions about the organization's substance abuse policies and the DOT's drug and alcohol testing requirements. The DER is responsible for the removing of an employee from a safety-sensitive job duty who has failed a Federal drug or alcohol test.

The DER for your organization is:

Name: _____

Title: _____

Phone: () -



UnityPoint Clinic

Occupational Medicine

Employee Acknowledgement

This acknowledgment must be signed by each person covered under DOT requirements for drug and alcohol testing.

Name of organization (employer) _____

I, the undersigned employee of the employer named above, hereby acknowledge that I have been informed of my obligations under applicable federal Department of Transportation drug and alcohol testing regulations (49 CFR Parts 40 and 382).

I further acknowledge that I have received a copy of the Employee Education Guide manual and a copy of my employer's company drug testing policy.

Employee Signature

Date

Frequently Asked Questions Regarding the UnityPoint Drug Testing Program

Introduction

Q. Who administers the drug testing program?

A. UnityPoint Clinic administers the drug and alcohol testing services, including laboratory, selection of employees for random testing and recordkeeping.

Q. Who belongs to the UnityPoint program?

A. UnityPoint provides testing to over 400 local government employers, with over 4,000 employees. Counties, cities, and municipal utilities comprise most of the membership, but any political subdivision in Iowa is eligible to join.

Q. Why would a governmental entity want to join UnityPoint's drug testing program?

A. UnityPoint provides services that assist local government employers in complying with federally mandated drug and alcohol testing requirements. By pooling many local government employers under one program, cost savings and administrative efficiencies are achieved.

Q. Where can I get a copy of the official federal regulations?

A. The regulations are available on the web at: www.dot.gov/ost

Q. Could a local government comply with these regulations on its own?

A. Yes, but many entities find it is less cost effective to arrange for laboratory services as a single employer. UnityPoint, as the third party administrator, also provides many administrative functions that a local government employer would need to fulfill with its own personnel. It can be difficult to identify someone on staff with the time and expertise to administer drug and alcohol testing requirements.

Q. Does UnityPoint do everything for us?

A. No. The program is designed to alleviate as much of the administrative burden as possible on local government employers; however, it is ultimately the responsibility of the local government personnel to ensure the organization is compliant with the DOT requirements.

Q. Does our entity have to do this?

A. If your entity has employees in safety-sensitive positions, as defined by federal regulations, you must comply with these regulations. Some examples of safety-sensitive positions include those requiring a commercial drivers license (CDL), bus drivers and other positions in public transit agencies, and pipeline personnel. Many local governments have positions defined as safety-sensitive, and by federal regulation, they must comply with the testing requirements.

Q. What type of testing is required?

A. There are six required tests. Pre-employment, random, reasonable suspicion, return-to-duty, follow-up and post accident, when mandated. If an entity employs persons in safety sensitive positions, that employer must test employees for different substances at certain times.

Q. Are volunteers exempt from drug and alcohol testing?

A. The definition of a covered employee (655.4) clarifies that a volunteer is covered under the regulation if he or she is required to hold a commercial driver's license (CDL) to operate a vehicle, or if they receive remuneration in excess of his/her actual expenses incurred in the provision of the volunteer activity.

Q. Doesn't Iowa have a law making it illegal to test public employees for drugs?

A. Federal law supersedes state law. While it is unclear what rights public employers have to test employees in other positions, court cases have clearly upheld the federal testing requirements for employees in safety-sensitive positions.

Q. On average, how often are employees randomly tested?

A. Of the employees in UnityPoint's pool, 25 percent must be tested for drugs and 10 percent for alcohol annually in 2017. These percentages apply to the entire pool of CDL and transit employees UnityPoint covers, not each member. UnityPoint goes beyond these minimum requirements and randomly tests slightly higher percentages of employees. The testing percentages are set each year by the Department of Transportation.

Q. If an employee is required to undergo a drug test, what happens?

A. The employer directs the employee to immediately report to the designated collection site. At the site, the employee provides a urine sample. The collection site forwards the sample to the laboratory after following very specific procedures for labeling and processing the sample. The employee can return to work.

Q. If an employee is required to undergo an alcohol test, what happens?

A. The employer directs the employee to immediately report to the designated collection site. At the site, the employee will be required to blow into a testing machine. Once the test is completed, the employee will be released to return to work if the test results are below .02. If the test results are greater than .02, the employee will be required to undergo a confirmation test.

Q. Will the employer learn the results of the test?

A. Yes. Reports are provided for both negative and positive results.

Q. What happens if the test is positive for drugs or alcohol?

A. A very precise set of procedures must be followed. Explanation of the process begins on page 29 of the drug and alcohol education section of this manual.

UnityPoint Membership

Q. How can our entity join UnityPoint?

A. There are three forms to complete and an enrollment fee of \$100. The Participant Enrollment Form, Employees Subject to Random Testing Roster and the fee are sent to the League or the Third Party Administrator. The Collection Site Designation Form should be sent to UnityPoint Clinic. Addresses are provided on the forms.

Q. One of the forms asks us to designate a Designated Employer Representative (DER). What criteria should be used when making that designation?

A. The DER will receive confidential information on test results and related matters and must keep accurate files. He or she should be available for questions during the entity's regular hours of operation. The DER is responsible for the removal of an employee, who has failed a Federally mandated drug or alcohol test, from their safety-sensitive position.

Q. What is the Enrollment and Update Form used for?

A. The form is used during the year to add or drop employees from the drug testing program. This form is sent to UnityPoint Clinic. It is important that employers keep their rosters current to ensure the pool is in compliance.

Q. Are there any other costs?

A. In addition to the \$100 enrollment fee, each entity will be billed for each drug test conducted on its behalf. The current fee is \$37 for a drug test. Each entity will negotiate the collection fee with their local collection site. Since the testing is random, the cost will vary depending on the number of times your entity's employees are selected for testing or new employees are hired. There is also an annual administrative fee assessed each year of participation. The annual administrative fee ranges from \$30 to \$100 depending on the number of employees your entity has enrolled in the program.

UnityPoint Services

Q. What specific services are members entitled to?

A. UnityPoint members receive testing services at the program's special rate. They also receive this manual and have access to other educational materials and training opportunities.

Q. What is included in the UnityPoint manual?

A. The manual contains all the information that employers are required by federal regulation to provide to covered employees. This includes information on the effects of alcohol and other controlled substances, a description of the federal requirements and a sample substance abuse policy. There is also a section specifically for employers with information and forms.

Q. Are we required to adopt the substance abuse policy included in the manual?

A. The policy included in this manual is only an example for employers to start from. Each employer must adopt a substance abuse policy, but it doesn't need to be exactly like the one included in this manual. Your entity's substance abuse policy must be provided to all covered employees and retained in the employer's files. Each entity should have their substance abuse policy reviewed by their legal representative.

Q. Are our employees required to have training?

A. Supervisory personnel for CDL, transit and pipeline operations must have a one-time training session to determine reasonable suspicion. The two hour training session must cover physical, behavioral, speech and performance indicators.

Q. If an employee doesn't have a supervisor, who is authorized to make a reasonable suspicion determination?

A. Any person that has completed reasonable suspicion training may make reasonable suspicion determinations.

Q. Is there required training for non-supervisory employees?

A. Non-supervisory employees must be provided with all the information included in the employee section of this manual.

UnityPoint Clinic

Q. What services does UnityPoint Clinic provide?

A. UnityPoint Clinic, provides testing kits, helps identify which employees must be tested under the federal guidelines, secures a laboratory for testing samples, provides a medical review officer, makes required reports to the employer and maintains the appropriate records. Assists members with questions in regards to drug/alcohol testing compliance.

Employer's Responsibilities

Q. What do we have to do to meet federal compliance?

A. Employers must determine a contact or Designated Employer Representative (DER), adopt a Substance Abuse Policy, provide employees with information on the effects of drugs on health and safety and provide names of substance abuse professionals for referral. They must also select a certified collection site and make arrangements with that site. Employers must also report drug and alcohol testing activities to the federal government when requested.

Q. How often do we need to report our testing activities to the federal government?

A. Each year, the federal government randomly selects entities to gather information from. If your entity is chosen, UnityPoint will provide you a summary of your testing activities. This can be used for your federal reporting.

Q. How do we choose a collection site?

A. First, the facility must be certified. Second, it is important the collection site complies with federal regulations. Samples that are not collected properly will require additional tests, payable by the entity. The cost of collection services can be negotiated between the entity and the collection site. UnityPoint can assist with the locating and verifying a collection sites certifications.

Q. Why does each entity have to choose and pay for its own collection site?

A. Most members prefer to choose their own collection site and negotiate the costs of collection.

Q. What if our entity can't find a collection site?

A. UnityPoint Clinic can assist in locating certified collection site(s) in your region.

Q. Where do we get the testing kits?

A. UnityPoint Clinic will send testing kits directly to your entity's collection site or to the entity per the entity's instructions after they receive the Collection Site Designation Form. Additional testing kits will be provided by when needed. Contact UnityPoint Clinic to order more kits.

Q. What else do we have to do?

A. Upon joining each employer must provide confirmation to UnityPoint Clinic that each of their employees has been tested in the last two years by completing the Drug Test Confirmation Form. If not, the employees must have a pre-employment drug test before entering the pool.

Q. Do our drug and alcohol policies and procedures have to be approved?

A. Yes. Each entity's governing board must approve all policies and procedures. In the event the entity has no governing board or the governing board does not have approval authority, the highest-ranking official with authority to approve the policy must do so.

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Forms

Employees Subject to Random Drug Testing Form

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Drug & Alcohol Testing Schedule Form

Observed Behavior-Reasonable Suspicion Record Form

Post-Accident Drug & Alcohol Test Decision Form

Management Information System (MIS) Form

Drug and Alcohol Records Request Form

Enrollment and Update Form

Alternate Form

Mandatory Reportable Drugs with Restrictions



UnityPoint Clinic

Collection Site Designation (For new members)

The employer is required to designate a collection site, such as a local hospital, clinic, or physician's office. The collection site MUST have Certified DOT collectors in order to complete the drug test collections. These facilities typically charge a fee for serving as the collection site. It is the employer's responsibility to negotiate and pay this fee with the collection site.

It is necessary for the employer to complete this form for UnityPoint Clinic to ship collection kits directly to the collection site. This form must be completed in order for UnityPoint to finalize the setup process.

Employer: _____

Designated Employer Representative (DER): _____

Phone Number: _____ Fax Number: _____

E-mail address: _____

Collection Site Information

Name of Facility: _____

Address: _____

City, State, Zip: _____

Phone Number: _____ Fax Number: _____

Contact: _____

Alcohol Testing Available? _____ Yes _____ No

Please return this form to:
UnityPoint Clinic
FAX: 712-224-4303



New Hire Instructions

If you have an applicant for a position that requires a commercial drivers license (CDL) to drive a Commercial motor vehicle (CMV), you must contact your collection site and order a pre-employment drug test. The test results must be negative **before** the applicant is allowed to conduct safety-sensitive job functions.

There are three reasons a pre-employment drug test is required:

1. The purpose of pre-employment testing is to deter and detect controlled substance abuse by applicants and it required under the Drug and Alcohol Federal Compliance Regulations (49 CFR Part 40)
2. All applicants for employment of a permanent, temporary or on-call basis as CMV driver or current employees who transfer into a safety-sensitive position **MUST** be given a pre-employment test for controlled substances. An applicant shall not be allowed to perform in a safety sensitive position until the employer has a verified negative test result.
3. You are also required to conduct a pre-employment test each time a driver returns to work after a layoff period when the driver has not been subjected to random drug testing for more than 30 days or has been employed by another entity.

Exceptions for Pre-employment Drug Testing

Your CDL Manual addresses the exceptions under section *Previous Employers*:

- o Federal Motor Carrier Safety Administration Manual and Pipeline Manual-Page 17
- o Transit Manual – Page 18

If received confirmation from the previous employer, the new hire **MUST** be added to the Eligibility Employee Roster by using the *Employee Update Form*.

Order a pre-employment test if you are unable to obtain information from previous employers.

If you have any questions please feel free to contact UnityPoint Clinic at (877) 412-4290 or contact Lisa Hanus, Manager Drug/Mobile Testing at (712) 224-4307

PREVIOUS PRE-EMPLOYMENT EMPLOYEE ALCOHOL AND DRUG TEST STATEMENT

Sec. 40.25(j) As the employer, you must also ask the employee whether he or she has tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which the employee applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two years. If the employee admits that he or she had a positive test or a refusal to test, you must not use the employee to perform safety-sensitive functions for you, until and unless the employee documents successful completion of the return-to-duty process. (see Sec. 40.25(b)(5) and (e))

Company Name: _____

Street: _____

City: _____

State, ZIP: _____

Prospective Employee Name: _____ ID Number: _____
(print)

The prospective employee is required by Sec. 40.25(j) to respond to the following questions.

- 1) Have you tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two years?

Check one: Yes No

- 2) If you answered yes, can you provide/obtain proof that you've successfully completed the DOT return-to-duty requirements?

Check one: Yes No

Prospective Employee Signature: _____ Date: _____

Witnessed By: _____ Date: _____
(signature)

DRUG AND ALCOHOL TESTING ALLIANCE (DATA)

SCHEDULE TEST BY YEAR

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
JAN																															
FEB																															
MAR																															
APRIL																															
MAY																															
JUNE																															
JULY																															
AUG																															
SEP																															
OCT																															
NOV																															
DEC																															

SCHEDULE TEST BY HOUR

	AM											PM																			
	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11							
JANUARY																															
FEBRUARY																															
MARCH																															
APRIL																															
MAY																															
JUNE																															
JULY																															
AUGUST																															
SEPTEMBER																															
OCTOBER																															
NOVEMBER																															
DECEMBER																															

OBSERVED BEHAVIOR REASONABLE SUSPICION RECORD

PERSONNEL OFFICE USE ONLY

Employee Number _____

Location _____

Incident Number _____

DRIVER'S NAME _____

DATE OBSERVED _____

ADDRESS OF INCIDENT:
 Street _____ City _____ State _____ Zip Code _____

TIME OBSERVED
 FROM _____ a.m. p.m.
 TO _____ a.m. p.m.

Record employee observed behavior for reasonable suspicion for the use of alcohol or controlled substances. According to 49 CFR §382.307 *Reasonable Suspicion Testing*, the employer shall require the driver to submit to a controlled substance or alcohol test if a supervisor or company official who is trained in accordance with §382.603 determines that reasonable suspicion exists.

Reasonable suspicion determined for: Alcohol Drugs

Mark items that apply and describe specifics

- 1. WALKING/BALANCE:**
 Stumbling Staggering Falling Unable to stand
 Swaying Unsteady Holding on Rigid
 Sagging at knees Feet wide apart
- 2. SPEECH:**
 Shouting Whispering Slow Rambling
 Slurred Slobbering Incoherent
- 3. ACTIONS:**
 Resisting communications Insulting Hostile Drowsy
 Fighting/insubordinate Profanity Threatening Erratic
 Hyperactive Crying Indifferent
- 4. EYES:**
 Bloodshot Watery Dilated Glassy
 Droopy Closed Wearing sunglasses
- 5. FACE:**
 Flushed Pale Sweaty
- 6. APPEARANCE/CLOTHING:**
 Disheveled Messy Dirty Partially dressed
 Having odor Stains on clothing
- 7. BREATH:**
 Alcoholic odor Faint alcohol odor No alcohol odor Marijuana odor
- 8. MOVEMENTS:**
 Fumbling Jerky Slow Nervous
 Hyperactive
- 9. EATING/CHEWING:**
 Gum Candy Mints Tobacco
 Other

Other observations: _____

Did employee admit to using drugs or alcohol? Yes No
 When: _____ Substance: _____
 How much: _____ Where taken: _____

WITNESSED BY:

_____ Signature	_____ Title	_____ Preparation date	_____ Time
_____ Signature	_____ Title	_____ Preparation date	_____ Time

THE ALCOHOL TEST MUST BE ADMINISTERED WITHIN EIGHT HOURS FOLLOWING A
REASONABLE SUSPICION DETERMINATION.

Company _____
Contact: _____

Phone _____
Fax _____

Names To Be Added

<u>Name</u>	<u>Effective Date</u>	<u>Social Security Number</u>	<u>DOT Program (FTA/Pipeline/CDL)</u>
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____

Names To Be Deleted** ****If the person being deleted from the Eligibility List has also been drawn for random selection during this quarter, please also submit an *Alternate Form*.**

_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____
_____	_____	____-____-____	_____

***** Fax Update To (712) 224-4303 Attn: Drug Testing Dept. *****



**Alternate Form (Alternate to be picked by
UnityPoint Clinic - Occupational Medicine
through computer generated random selection
process.)**

Dear Client,

This form should be used anytime you have an employee selected for testing and you are not able to test the individual due to no longer being your employee or the employee is no longer performing safety sensitive work governed by the Department of Transportation. Failure to notify our office of anyone selected for testing and not tested could result in removal from our consortium. It will be your responsibility to fill out this form and fax back to **712-224-4303**. If you do not have a fax you can mail it to UnityPoint Clinic - Occupational Medicine Attn: Drug Testing 4230 War Eagle Dr. Sioux City, IA 51109. It must be filled out as soon as you are aware that the individual we picked cannot be tested. **An Enrollment and Update Form should also be submitted in order to remove the selected employee from the drug pool eligibility list.**

Individual Selected for testing _____

Company Name _____

Social Security Number _____

Test Individual was Selected for (Circle One) Drug Breath Alcohol Both

Date the Individual was Selected _____ (Random Pull Date)

Once this is filled out and reaches our office we will send you an alternate name(s) by the end of that quarter in proper time to get them tested. Remember- all 4th quarter testing must be performed by the end of December that testing year. Please make plenty of copies of this letter for future use.

Thank you,

UnityPoint Occupational Medicine, Drug Testing Department

Mandatory Reportable Drugs with Restrictions

There are prescription drugs which may require restrictions, with typical constraints, that you must report the use of that drug to your employer. Please note this is NOT a complete list.

- Constraint means the time between when you take the medication and perform your safety-sensitive job.

<u>Drug</u>	<u>Constraint Time</u>
• Antivert	24 hrs.
• Atarax	8 hrs.
• Benedryl	6 hrs.
• Codiene	6 hrs.
• Compazine	8 hrs.
• Darvocet	6 hrs.
• Darvon	6 hrs.
• Demerol	8 hrs.
• Empirin/codiene	6 hrs.
• Equagesic	8 hrs.
• Flexeril	8 hrs.
• Hydrocodone	8 hrs.
• Hyphen	8 hrs.
• Levsin	12 hrs.
• Lioresal	8 hrs.
• Lomotil	6 hrs.
• Lotab	8 hrs.
• Meperdine	8 hrs.
• Mepergan	8 hrs.
• Meproamate	8 hrs.
• Morphine	8 hrs.
• Naldecon	6 hrs.
• Norgesic	8 hrs.
• Percocet/Percodan	8 hrs.
• Phenergan	8 hrs.
• Pyridium	6 hrs.
• Reglan	12 hrs.
• Skelaxin	6 hrs.
• Talwin	8 hrs.
• Tylenol/codeine	8 hrs.
• Valium	48 hrs.
• Vicodin	8 hrs.

For additional information in regards to disqualifying drugs-see the DOT Website:

<http://www.dot.gov/odapc>