Document History



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Drug/Alcohol Testing Policy

Policy Statement

As part of the University's employment procedures, applicants for safety and security sensitive positions or for positions in which the essential duties of the position require certain physical abilities may be required to undergo a post-offer, pre-employment medical examination which may include alcohol and drug screening by a physician designated by the University.

Purpose of Policy

Southeastern Louisiana University is committed to providing a safe, productive, healthy and wholesome environment for the students, employees, and the public. Southeastern is committed to creating and maintaining a drug-free workplace pursuant to the federal Drug-Free Workplace Act of 1988, the Omnibus Transportation Employee Testing Act of 1991, the Louisiana Drug Testing Act of 1990, the Drug-Free Public Housing Act of 1988, Executive Order No. MJF 98-38, the Drug-Free Schools and Communities Act of 1986, Federal Motor Carrier Safety Administration procedures, Title 49DRF (40 and 382 etal.), LA Revised Statute 49:1001-1021, and all other applicable federal and state laws.

Applicability

Drug testing shall be performed on three categories of employees/applicants for employment:

Positions covered by federal law:

A. This policy applies specifically to all current W-2 employees of Southeastern Louisiana University whose job requires them to drive Commercial Motor Vehicles. (See the Drug-Free Workplace Policy, Section II, Definitions, incorporated as an addendum to this document). Additionally, this policy applies to all persons (external and internal) who have made written applications for positions which will require them to drive Commercial Motor Vehicles. This group of employees and applicants is subject to Drug/Alcohol Testing - 2 drug-testing pursuant to federal law (Department of Transportation/Federal Motor Carrier Safety Administration Alcohol and Drug Testing Regulations (CFR 49). Positions that require DOT drug testing are listed in Appendix D of this document.

Positions covered by state law: LA Drug Testing Act of 1990, Executive Order No. MJF 98-38, R.S. 49:1001, et. seq.

- A. This policy applies to all current W-2 employees of Southeastern Louisiana University including unclassified, classified, and student employees. Additionally, this policy applies to all persons (external and internal) who have made application for positions at Southeastern Louisiana University. Pre-employment testing will be done post-job offer and prior to starting to work.
- B. Nursing students and faculty will be tested in accordance with the School of Nursing Employee and Student Drug Testing Protocol.

Policy Procedure

Effective July 1, 1997, drug testing at Southeastern Louisiana University will be conducted under authority of the Department of Transportation/Federal Motor Carrier Safety Administration Alcohol and Drug Testing Regulations (CFR 49) and any other applicable federal laws for employees, and applicants for employment, who will drive vehicles defined by federal law as Commercial Motor Vehicles.

To assure maintenance of a drug-free workforce, it shall be the policy of Southeastern Louisiana University to implement drug testing, in accordance with Louisiana Drug Testing Act of 1990, Executive Order No. MJF 98-38, R.S. 49:1001, et. seq., and all other applicable federal and state laws. Employees are prohibited from reporting to work or performing work for Southeastern with the presence in their bodies of illegal drugs, controlled substances, or designer (synthetic) drugs at or above initial testing levels and confirmatory testing levels as established in the contract between Southeastern Louisiana University and the official provider of drug testing services. Employees are further prohibited from the illegal use, possession, dispensation, distribution, manufacture, or sale of controlled substances, designer (synthetic) drugs, and illegal drugs at the work site and while on official state business, on duty or on call for duty.

Certain employees could be subjected to testing under both federal and state laws.

The University will provide literature and in-service training concerning the dangers of these substances, counseling and referrals, and conduct testing for drugs and alcohol.

Prohibitions:

Alcohol: No employee shall report for duty or remain on duty in any position requiring the performance of safety-sensitive or security-sensitive functions while having an alcohol concentration of .04 or greater.

On-duty use of alcohol: No employee shall use alcohol while performing safety sensitive or security-sensitive functions.

Pre-duty use of alcohol: No employee shall perform safety-sensitive or security sensitive functions within four hours after using alcohol.

Use of alcohol following an accident: No employee required to take a post-accident alcohol test shall use alcohol for eight hours following the accident, or until he/she undergoes a post-accident alcohol test, whichever occurs first.

Controlled substances use: No employee shall report for duty or remain on duty requiring the performance of safety-sensitive or security-sensitive functions when the employee uses any controlled substance, except when the use is pursuant to the instructions of a licensed medical practitioner, who has advised the employee that the substance will not adversely affect the employee's ability to safely perform his/her duties.

Controlled substances testing: No employee shall report for duty, remain on duty or perform a safety-sensitive or security-sensitive function, if the employee tests positive for controlled substances.

Refusal to submit to a required alcohol or controlled substance test: No employee shall refuse to submit to a post-accident alcohol or controlled substances test required under Sec. 382.303, a random alcohol or controlled substances test required under Sec. 382.305, a reasonable suspicion alcohol or controlled substances test required under Sec. 382.307, or a follow-up alcohol or controlled substances test required under Sec. 382.311. IV.

SCOPE OF TESTING

Prospective Employees - Following an employment offer, and prior to starting work, prospective employees may be required to provide a urine sample to screen for drugs. The tested candidate must test free of drugs as a condition of employment.

Current Employees - Drug testing of current employees will occur in the following situations:

POSITIONS COVERED BY FEDERAL LAW (DOT REGULATIONS):

For positions covered by federal law there are six situations when employers must test employees for alcohol and/or controlled substances.

It should be noted that the term "safety-sensitive function" as used throughout this portion of the document has a very specific definition under federal law (See the Drugfree Workplace Policy, Section II-Definitions, incorporated as an addendum to this document) and should not be confused with the broader "safety-sensitive position" terminology used in LA R.S. 49:1015. The six situations when employers must test employees for alcohol and/or controlled substances under federal law are as follows:

- A. **Pre-employment:** Prior to the first time an employee performs a safety sensitive function, the individual must undergo testing for controlled substances. The employee shall not be allowed to perform safety-sensitive functions unless the driver has received a controlled substances test result from the Medical Review Officer indicating a verified negative test result. Pre-employment testing is for drugs only.
- B. **Post-accident:** The definition of accidents that trigger a post-accident test vary by industry. For an employee with a commercial driver's license covered by the Federal Highway Administration, a post-accident test will be conducted for the surviving employee driver of an accident involving a loss of human life or where the driver receives a moving traffic violation. A collision or occurrence meets the definition of an "accident" when the incident involves a motor vehicle operating on a public road which results in a death or bodily injury to a person who immediately receives medical treatment away from the accident; or one or more vehicles is disabled and must be towed from the scene.

For purposes of this policy, as soon as practicable following an accident involving a commercial motor vehicle, the University shall test, for alcohol and controlled substances, the employee driver when either:

- 1. the accident involved a fatality; or
- the accident involved bodily injury treated away from the accident scene and/or disabling damage to any motor vehicle requiring a tow away from the scene and the employee driver was issued a citation under state or local law

Type of Accident Citation Issued to Driver Test Must Be Performed by Employer Human Fatality YES YES Bodily Injury with immediate medical attention away from the scene of the accident YES NO YES NO Disabling damage to any motor vehicle requiring tow away from the scene YES NO YES NO

- C. **Random:** The employer must test 25% of covered employees each year for alcohol, and 50% of covered employees for controlled substances. The rate for alcohol testing may be lowered to 10% or raised to 50% in subsequent years depending on the annual rate of positive tests by industry. For example, the rate of random alcohol testing for Commercial Motor Vehicle operators will be determined based upon the results for all commercial vehicle operators nationwide subject to the FHWA rules.
- D. **Reasonable Suspicion:** A supervisor's belief must be based on specific, contemporaneous, articulable observation concerning the appearance, behavior, speech, or body odors of the driver. One supervisor can determine reasonable suspicion; however, such determinations should be confirmed by a second employee

whenever possible. Employer representatives designated to determine whether reasonable suspicion exists must receive at least 60 minutes of training on alcohol misuse and an additional 60 minutes training on indicators of probable controlled substance abuse.

- E. **Return-to-Duty:** An employee who has violated a prohibition on alcohol or controlled substance use must have a negative alcohol or controlled test before returning to duty.
- F. **Follow-up Testing:** A safety-sensitive employee who has been identified as needing assistance in resolving problems associated with alcohol misuse or controlled substances use is subject to follow-up testing. The number and frequency of such follow-up tests is determined by the substance abuse professional and consists of at least six unannounced tests in the first year. The substance abuse professional may terminate this requirement or continue follow-up testing for another four years.

The purpose of this testing is to establish employer-based alcohol and control substance testing programs to help prevent accidents and injuries resulting from the misuse of alcohol and controlled substances by drivers of commercial motor vehicles.

Alcohol Testing

This rule prohibits any alcohol misuse that could affect performance of driving a Commercial Motor Vehicle (CMV) including: (1) use on the job; (2) use during the 4 hours before driving a CMV; (3) having prohibited concentrations of alcohol in the system while driving CMVs; (4) use during 8 hours following an accident; and (5) refusal to take a required test.

This rule requires reasonable suspicion, random, post-accident, return-to-duty and follow-up testing using procedures specified in 49 CFR part 40. These procedures use an evidential breath testing for alcohol testing. Alcohol testing is not required for preemployment. Pre-employment testing is for drugs only.

Following a determination that an employee has misused alcohol, this rule requires the employee's removal from safety-related functions and provides minimum requirements for return to performance of safety-sensitive functions:

- 1. An employee with a test result of 0.04 BAC or greater must be removed from, and cannot be returned to, a safety-sensitive function until, at a minimum,
 - A. The employee undergoes evaluation and, where necessary, rehabilitation,
 - B. A substance abuse professional determines that the employee has successfully complied with any required rehabilitation, and
 - C. The employee undergoes return-to-duty tests with a result of less than 0.02.
- 2. An employee with an alcohol concentration of 0.02 or greater but less than 0.04 is not permitted to perform safety-sensitive functions for a minimum of 24 hours.

Controlled Substances

The FMCSA currently prohibits the use of controlled substances by drivers (49 CFR 392.4) except pursuant to a doctor's prescription. The doctor must also advise the driver that the substance does not adversely affect the driver's ability to safely operate a commercial motor vehicle. Employers are prohibited from permitting a driver who uses drugs to perform safety-sensitive functions. Drivers are required to inform their supervisors of any therapeutic drug use otherwise prohibited. Drivers are prohibited from driving, and employers are prohibited from using, a driver who tests positive for drugs with a 0.04 or greater BAC. The prohibition remains in effect until the driver complies with requirements of section 382.605, including evaluation by a SAP. A driver who is prohibited from performing safety-sensitive functions may be assigned to non-safety-sensitive functions until such time as the driver complies with the requirements for returning to duty. For controlled substance testing,

urine specimen collection and testing by a laboratory certified by the Department of Health and Human Services is required.

Following a determination that an employee has misused controlled substances, as determined through testing, this rule requires the employer to remove the employee from safety-related functions until, at a minimum,

- A. the employee undergoes evaluation, and where necessary, rehabilitation,
- B. a substance abuse professional determines that the employee has successfully complied with any required rehabilitation, and
- C. the employee takes a return-to-duty test with a verified negative test result

Alcohol and Controlled Substances

An applicant who refuses to submit to a pre-employment test will not be hired; a driver who refuses to submit to a return-to-duty test will not be returned to duty.

The FMCSA will disqualify drivers for one year, under the procedures in 49 CFR Part 386, if a driver refuses to submit to a post-accident test after a fatal accident.

When a required test has not been administered within a reasonable time frame following an accident for which a test is required, the following actions shall be taken:

TIME ELAPSED ACTION REQUIRED

2 Hours - If the driver has not submitted to an alcohol test at this time, the employer shall prepare and maintain on file a record stating the reason a test was not promptly administered.

8 Hours - Cease attempts to administer alcohol test, and prepare and maintain records described above.
32 Hours- If the driver has not submitted to a controlled substance test at this time, the employer shall cease attempts to administer the test, and prepare and maintain the record described above.

Driver's responsibility: A driver who is subject to post-accident testing must remain available, or the employer may consider the driver to have refused to submit to testing. The driver subject to post-accident testing must refrain from consuming alcohol for eight hours following the accident, or until he/she submits to an alcohol test, whichever comes first.

IMPORTANT NOTE: Nothing in this document (or the rule itself) should be construed as to require the delay of necessary medical attention for injured people following an accident, or to prohibit a driver from leaving the scene of an accident for the period necessary to obtain assistance in responding to the accident, or to obtain necessary emergency medical care.

FOR EMPLOYEES COVERED BY STATE LAW (LA R.S. 49:1015):

Southeastern Louisiana University shall require drug testing under the following conditions:

- 1. **Reasonable Suspicion:** Any employee shall be required to submit to a drug test if there is reasonable suspicion (as defined by this policy) that the employee is using drugs.
- 2. **Post Accident:** Each employee involved in an accident during the course and scope of employment shall be required to submit to a drug test if the accident a) involves circumstances leading to a reasonable suspicion of an employee=s drug use, b) results in a fatality, or c) results in or causes the release of hazardous waste as defined in R.S. 30:2173(2) or hazardous materials defined in R.S. 32:1502(5).
- 3. **Rehabilitation Monitoring:** An employee who is participating in a substance abuse after-treatment program or who has a rehabilitation agreement with the agency following an incident involving substance abuse shall be required to submit to random drug testing.

- 4. **Pre-employment** Prospective employees may be required to submit to drug screening at the time and place designated by the Human Resource Director following a job offer contingent upon a negative drug-testing result. Pursuant to R.S. 49:1008, a prospective employee who tests positive for the presence of drugs in the initial screening shall be eliminated from consideration for employment.
- 5. **Safety-Sensitive and Security-Sensitive positions** Appointments and Promotions: Each employee who is offered a safety-sensitive or security sensitive position (as defined in this policy) shall be required to pass a drug test before being placed in such position, whether through appointment or promotion.
- 6. **Safety-Sensitive and Security-Sensitive positions Random Testing:** Every employee in a safety-sensitive or security-sensitive position shall be required to submit to drug testing as required by the Appointing Authority, who shall periodically call for a sample of such employees, selected at random by a computer-generated random selection process, and require them to report for testing. All such testing shall, if practicable, occur during the selected employee's work schedule.

WHAT SUBSTANCES ARE TO BE TESTED FOR?

- 1. All positions tested in accordance with state law, LA R.S. 49:1015, will be tested using the 9-panel screen: Amphetamines, barbiturates, benzodiazepines, cocaine, marijuana, methadone, opiates, phencyclidine, and propoxyphene. The laboratory shall use a cut-off of 50 ng/ml for a positive finding in testing for Cannabinoids. Alcohol may be added at the discretion of the University.
- 2. DOT testing will include the NIDA 5 panel screen marijuana, cocaine, phencyclidine (PCP), amphetamines, and opiates.

WHAT IS THE TESTING METHODOLOGY?

- A. Urine testing for (5) and (9) nine drug panel screen
- B. Blood testing for alcohol
- C. Five or Nine panel initially screened using immunoassay or EMIT technology
- D. Any drug initially testing positive is sent to a confirmation test using gas chromatography/mass spectrometry (GI/MS) technology
- E. Alcohol is tested using the GI/MS technology directly
- F. Evidential Breath Test for Alcohol

WHO PERFORMS THE URINE TESTING?

An independent toxicology laboratory that has SAMSHA (formerly NIDA) certification.

WHO RECEIVES THE TEST RESULTS?

All results will be reported to a Medical Review Officer (MRO) within (72) seventy-two hours, who will then follow approved protocol.

WHAT IS THE CONSEQUENCE OF A CONFIRMED POSITIVE?

- A. Prospective employees who have a confirmed positive will have their employment offer rescinded.
- B. Currently employee employees in safety-sensitive and security-sensitive positions, having a confirmed positive, will be placed on leave and referred to the University Counseling Center.
- C. After the first confirmed positive, employees may apply to return to duty subsequent to completion of an approved rehabilitation program.
- D. Second time confirmed positive may result in termination of employment.

FINANCIAL

- A. The cost of drug testing will be covered by the University.
- B. A second testing after a confirmed positive may be at the prospective employee or current employee's expense.

RETENTION OF RECORDS:

The University shall maintain records of alcohol misuse and controlled substances use prevention programs as follows:

For a period of five years: positive test results, refusals to submit to testing, driver evaluation and referrals, calibration documentation, records relating to the administration of the alcohol and control substances testing program.

For a period of two years: records related to the alcohol and controlled substances collection process (except calibration of evidential breath testing devices)

For a period of one year: Negative or cancelled test results.

For an indefinite period: Records related to education and training of supervisors and drivers shall be maintained by the University while the individual performs the functions which require training and for two years after ceasing to perform those functions.

See Drug Testing Policy Section III. Statement of Confidentiality.

FEDERAL DRUG-FREE WORKPLACE POLICY

- I. DEFINITIONS LA R.S. 49:1015
 - A. **CAP-FUDT Laboratory** a laboratory certified for forensic drug testing by the College of American Pathologists.
 - B. **Chain of Custody** procedures to account for the integrity of each urine specimen by tracking its handling and storage from point of specimen collection to final disposition of the specimen.

- C. **Collection Site** means a place designated by the employer where individuals present themselves for the purpose of providing a specimen of their urine to be analyzed for the presence of drugs.
- D. **Confirmatory Test** a second analytical procedure to identify the presence of a specific drug or metabolite which is independent of the initial test and which uses a different technique and chemical principle from that of the initial test in order to ensure reliability and accuracy.
- E. **Controlled Substance** a drug, chemical substance or immediate precursor in Schedules I through V of R.S. 40:964 or Section 202 of the Controlled Substances Act (21 U.S. C. 812).
- F. **Designer (Synthetic) Drugs** Those chemical substances that are made in clandestine laboratories where the molecular structure of both legal and illegal drugs is altered to create a drug that is not explicitly banned by federal law.
- G. **Employee** unclassified, classified, and student employees, student interns, and any other person having an employment relationship with the agency, regardless of the appointment type (e.g. full-time, part-time, temporary, etc.)
- H. **Employer** any person, firm, or corporation, including any governmental entity, that has one or more workers or operators employed, or individuals performing service, in the same business, or in or about the same establishment, under any contract of hire or service, expressed or implied, oral or written.
- Illegal Drug -any drug which is not legally obtainable or which has not been legally obtained, to include prescribed drugs not legally obtained and prescribed drugs not being used for prescribed purposes or being used by one other than the person for whom prescribed.
- J. Initial Test an immunoassay screen to eliminate "negative" urine specimens from further consideration.
- K. **Legal Drug** includes drugs prescribed by a licensed practitioner and over-the counter drugs which have been legally obtained and are being used solely by the individual and for the purpose for which they were prescribed or manufactured in the appropriate amount.
- L. **Job-Related Accident/Incident** any employee behavior (action or inaction) which resulted in an accident, injury, or illness. Usually the accident/incident results in lost work time by an employee, serious or significant injury or illness to a patient, visitor, or co-worker, or an accident involving a vehicle, equipment or property.
- M. **Medical Review Officer (MRO)** a licensed physician responsible for receiving laboratory results generated by employer or testing entity's drug testing program who has knowledge of substance abuse disorders and has appropriate medical training to interpret and evaluate an individual's positive test result together with his medical history and any other relevant biomedical information.
- N. **NIDA Laboratory** a laboratory certified for forensic urine [and/or blood and hair] drug testing by the National Institute on Drug Abuse. (Now SAMSHA)
- O. **Non-Employees** Those who do not receive W-2's from the University including but not limited to all contract and subcontract workers, [faculty, residents, interns] volunteers, students, laborers or independent agents who are conducting business on behalf of or providing services for the University.
- P. **Prospective Employee** means any person who has made application to an employer whether oral or written to become an employee.
- Q. **Reasonable Suspicion** belief based on reliable, objective and articulable facts derived from direct observation of physical, behavioral, odorous presence, or performance indicators and being of sufficient import and quantity to lead a prudent person to suspect that an employee is in violation of this policy.
- R. Safety-Sensitive or Security-Sensitive position a position determined by the Appointing Authority to contain duties of such nature that the compelling State interest to keep the incumbent drug-free outweighs the employee=s privacy interests. A list of such positions within Southeastern Louisiana University is attached hereto and is made a part hereof. The list was determined with consideration of statutory law, jurisprudence, the practices of this agency and the following examples of safety-sensitive and security-sensitive positions:
 - Positions with duties that are required or are authorized to carry a firearm
 - Positions with duties that allow access to controlled substances (drugs);
 - Positions with duties that are required or are authorized to inspect, handle, or transport hazardous waste as defined in R.S. 30:2173(2) or hazardous material as defined in R.S. 32:1502(5).

- S. **Sample** means urine, blood, saliva or hair.
- T. Split Sample one urine specimen from one individual that is separated into two specimen containers.
- U. **Substance Abuse** is the term used to indicate excessive and/or inappropriate use as defined by this policy of a drug [alcohol] regardless of whether an individual has reached the point of true dependence on it.
- V. **Supervisor** a manager/supervisor/faculty who, based on objective criteria, knowledge or training, has a reasonable suspicion that an employee may be under the influence of a drug [alcohol].
- W. **Supposed to be Working** includes all time from the beginning to the end of an employee's scheduled work period including overtime work, meals, and rest breaks.
- X. **Under the Influence** for the purposes of this policy, a drug, chemical substance, or the combination of a drug, chemical substance that affects an employee in a detectable manner. The symptoms or influence are not confined to that consistent with misbehavior, nor to obvious impairment of physical or mental ability, such as slurred speech or difficulty in maintaining balance. A determination of influence can be established by a professional opinion or a scientifically valid test.
- Y. While at Work includes all times when an employee is involved in the aspects of actual or simulated work experiences.
- Z. **Workplace** any location on agency property including all property, offices and facilities (including all vehicles and equipment) whether owned, leased or otherwise used by the agency or by an employee on behalf of the agency in the conduct of its business while such business is being conducted.

DEFINITIONS - CFR 382.107

- A. **Alcohol** the intoxicating agent in beverage alcohol: beer, wine, and distilled spirits as defined under the Internal Revenue Code of 1954.
- B. **Alcohol Concentration** means 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.
- C. **Alcohol Use** the consumption of any beverage, mixture, or preparation, including any medication containing alcohol.
- D. **Breath Alcohol Technician (BAT)** an individual who instructs and assists individuals in the alcohol testing process and operates an evidential breath testing device (EBT).
- E. **Commercial Motor Vehicle** a motor vehicle or combination of motor vehicles used in commerce to transport passengers or property if the motor vehicle-
 - 1. Has a gross combination weight of 26,001 or more pounds inclusive of a towed unit with a gross vehicle weight rating of more than 10,000 pounds; or
 - 2. Has a gross vehicle weight rating of 26,001 or more pounds; or
 - 3. Is designed to transport 16 or more passengers, including the driver; or
 - 4. Is of any size and is used in the transportation of hazardous materials requiring placards.
- F. **Confirmation Test** for **alcohol** testing means a second test, following a screening test with a result of 0.02 or greater, that provides quantitative data of alcohol concentration. For **controlled** substances testing means a second analytical procedure to identify the presence of a specific drug or metabolite which is independent of the screen test and which uses a different technique and chemical principle from that of the screen test in order to ensure reliability and accuracy.
- G. **Driver** any person who operates a commercial motor vehicle. This includes but is not limited to: full-time, regularly employed drivers; casual, intermittent or occasional drivers.
- H. **Employer** means any person (including the United States, a State, the District of Columbia or a political subdivision of a State) who owns or leases a commercial motor vehicle or assigns persons to operate such a vehicle, including agents, officers, and representatives of the employer.
- I. **Evidential Breath Testing Device (EBT)** A device approved by the National Highway Traffic Safety Administration (NHTSA) for the evidential testing of breath and placed on NHTSA's "Conforming Product's List of Evidential Breath Measurement Devices" (CPL).

- J. Licensed Medical Practitioner means a person who is licensed, certified, and/or registered, in accordance with applicable Federal, State, local, or foreign laws and regulations, to prescribe controlled substances and other drugs.
- K. Medical Review Officer (MRO) A licensed physician (medical doctor or doctor of osteopathy) responsible for receiving laboratory results generated by an employer's drug testing program who has knowledge of substance abuse disorders, and has appropriate medical training to interpret and evaluate an individual's confirmed positive test result together with his or her medical history and any other relevant biomedical information.
- L. **Performing (a safety-sensitive function)** any period in which the driver is actually performing, ready to perform, or immediately able to perform any safety sensitive functions.
- M. **Positive Rate** the number of positive results for random controlled substances tests conducted plus the number of refusals of random controlled substances tests divided by the total of random controlled substances tests.
- N. Refusal to submit (to an alcohol or controlled substance test) a driver (1) fails to provide adequate breath for testing without a valid medical explanation after he or she has received notice of the requirement for breath testing, (2) fails to provide adequate urine for controlled substances testing without a valid medical explanation after he or she has received notice of the requirement for urine testing, or (3) engages in conduct that clearly obstructs the testing process.
- O. **Safety-sensitive function** any of those on-duty functions set forth in 395.2 On Duty time, paragraphs (1) through (7) as listed below:
 - 1. All time at a carrier or shipper plant, terminal, facility, or other property, waiting to be dispatched, unless the driver has been relieved from duty by the employer.
 - 2. All time inspecting equipment as required by the Federal Motor Carrier Safety Regulations (FMCSR's), or otherwise inspecting, servicing, or conditioning any commercial motor vehicle at any time.
 - 3. All time spent at the driving controls of a commercial motor vehicle.
 - 4. All time, other than driving time, spent on or in a commercial motor vehicle (except for time spent resting in the sleeper berth).
 - 5. All time loading or unloading a commercial motor vehicle, supervising, or assisting in the loading or unloading, attending a vehicle being loaded or unloaded, remaining in readiness to operate the vehicle, or in giving or receiving receipts for shipments loaded or unloaded.
 - 6. All time spent performing the driver requirements associated with an accident.
 - 7. All time repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle.
- P. **Screening Test (aka initial test)** in alcohol testing it means an analytical procedure to determine whether a driver may have a prohibited concentration of alcohol in his or her system. In controlled substance testing it means an immunoassay screen to eliminate "negative" urine specimens from further consideration.
- Q. Substance Abuse Professional a licensed physician (Medical Doctor or Doctor of Osteopathy), or a licensed or certified psychologist, social worker, employee assistance professional, or addiction counselor (certified by the National Association of Alcoholism and Drug Abuse Counselors Certification Commission) with knowledge of and clinical experience in the diagnosis and treatment of alcohol and controlled substances-related disorders.

STATEMENT OF CONFIDENTIALITY

Except as otherwise provided by this policy, all drug testing under this policy will be done in strict confidence. Qualitative information regarding results, such as the identification of a substance, will be provided only to the designated Medical Review Officer pursuant to current law who will report final results to the appropriate university official. Results of the test will be released to appropriate licensing agencies on a need to know basis. All drug test results will be maintained in separate health files with restricted access. Except as otherwise provided by this policy and the law, all drug testing and recordation will be done in strict confidence.

Access to records - (In accordance with Section 382.405)

- A. Except as required by law or expressly authorized or required in this section, no employer shall release driver information that is contained in records required to be maintained under Sec.382.401.
- B. A driver is entitled upon written request to obtain copies of any records pertaining to the driver's use of alcohol or controlled substances including any records pertaining to his or her alcohol or controlled substances tests. The University shall promptly provide the records requested by the driver.
- C. The University shall make available copies of all results of tests for alcohol and controlled substances when requested by the Secretary of Transportation, any DOT agency, or any State or local officials with regulatory authority over the University or any of its drivers.
- D. When requested by the National Transportation Safety Board as part of an accident investigation, employers shall disclose information related to the employer's administration of a post-accident alcohol and/or controlled substance test administered following the accident under investigation.
- E. Records shall be made available to any subsequent employer upon receipt of a written request from a driver. Disclosure by the subsequent employer is permitted only as expressly authorized by the terms of the driver's request.
- F. An employer may disclose information required to be maintained under this part pertaining to a driver, the decision maker in a lawsuit, grievance or other proceeding initiated by or on behalf of the individual, and arising from the results of an alcohol and/or controlled substance test administered under this part or from the employer's determination that the driver engaged in conduct prohibited by subpart B of this part including but not limited to a worker's compensation, unemployment compensation, or other proceeding relating to a benefit sought by the driver.
- G. An employer shall release information regarding a driver's records as directed by the specific, written consent of the driver authorizing release of the information to an identified person. Release of such information by the person receiving the information is permitted only in accordance with the terms of the employee's consent.

CONSEQUENCES OF NON-COMPLIANCE/CONFIRMED POSITIVE TEST RESULTS

A. Pre-Employment - Applicants:

Confirmed positive test results or refusal to undergo post-offer drug screening will result in non-consideration for immediate employment or withdrawal of any existing job offer. Applicants who have tested positive and who later want to reapply will be required to provide reasonable evidence that the illegal drug use is no longer continuing. Such evidence could include evidence which verifies an individual participated in a drug rehabilitation program.

B. Reasonable Suspicion/Post Accident:

- 1. Employees will be sent home on leave, pending the results of the drug test. If the results are negative, the employee will be paid for the scheduled work time lost.
- If the results are confirmed positive, corrective action up to and including termination will be initiated.
 Employees will be removed from safety and security sensitive positions and placed on leave. Continued employment may be offered to employees who have completed their probationary employment period, contingent upon entry into and successful completion of a rehabilitation and/or EAP program approved by the University.
- 3. Evidence of non-compliance with treatment guidelines, incomplete treatment, subsequent drug related misconduct, a subsequent confirmed positive test result, refusal to test or failure to abide by any part of a Return to Work Agreement between employee and employer will be grounds for immediate termination.

C. Random - Employees:

If the results are confirmed positive, corrective action up to and including termination will be initiated.
 Employees will be removed from safety and security sensitive positions and placed on leave. Continued employment may be offered to employees who have completed their probationary employment period, contingent upon entry into and successful completion of a rehabilitation and/or EAP program approved by the University.

Evidence of non-compliance with treatment guidelines, incomplete treatment, subsequent drug related
misconduct, a subsequent confirmed positive test result, refusal to test or failure to abide by any part of
a Return to Work Agreement between employee and employer will be grounds for immediate
termination.

CHALLENGING A POSITIVE TEST

A. Applicant:

In the event of a confirmed positive test result in the post-offer drug test, the applicant will not be considered for immediate employment. He/she will be notified of the test results and informed that she/he will no longer be considered for immediate employment. The applicant may reapply only after (12) twelve months have expired.

All applicants with a confirmed positive drug test will be allowed to challenge the results of the test within (7) seven working days of notification and in the following manner(s):

- If the individual wishes to challenge the test results, it is his/her responsibility to notify the MRO in writing.
- If the test of the first bottle is confirmed positive, and a split sample is collected, the employee may request that the medical review officer direct that the second bottle be tested, at the employee's own expense, in an NIDA-certified or CAP-FUDT-certified laboratory (or meets current state/federal certification requirements as outlined by appropriate laws) for presence of the drug(s) for which a positive result was obtained in the test of the first bottle. The result of this test is transmitted to the medical review officer without regard to the cutoff values as listed in the NIDA guidelines. The medical review officer shall honor such a request if made within (72) seventy-two hours of the employee's having actual notice that he or she tested positive.
- The second test must be equal to or of greater sensitivity for the drug in question as was the initial test. A copy of the second test result must be submitted to the MRO before the applicant can be reconsidered for employment/enrollment.
- Action taken by the employer, as the result of a positive drug test such as removal from performing a safety-sensitive function is not stayed pending the result of the second test.
- If the result of the second test is negative, the medical review officer shall cancel the positive results of the first test.

B. Current Employees:

If the employee wishes to challenge a confirmed positive test result he/she may do so in writing within (7) seven working days of notification and with the understanding that he/she will be placed on leave until the challenge is resolved.

All employees with a confirmed positive drug test may contest the results in the following manner:

- A written request for such is submitted to the Medical Review Officer within (7) seven working days. (Employees who are on legally prescribed and obtained medication for a documented illness, injury or ailment may be considered for continued employment only upon receiving clearance from the Medical Review Officer.)
- If the test of the first bottle is confirmed positive, and a split sample is collected, the employee may request that the medical review officer direct that the second bottle be tested, at the employee's own expense, in a NIDA-certified or CAP-FUDT-certified laboratory for presence of the drug(s) for which a positive result was obtained in the test of the first bottle. The result of this test is transmitted to the medical review officer without regard to the cutoff values as listed in the NIDA guidelines. The medical review officer

shall honor such a request if made within (72) seventy-two hours of the employee's having actual notice that he or she tested positive.

- The second test must be equal to or of greater sensitivity for the drug in question as was the initial test. A copy of the second test result must be submitted to the MRO before the applicant can be reconsidered for employment.
- Action taken by the employer as the result of a positive drug test such as removal from performing a safety-sensitive function is not stayed pending the result of the second test.
- If the result of the second test is negative, the medical review officer shall cancel the positive results of the first test.
- If the result of the second test is negative, the employee will be paid for the scheduled work time lost.

COLLECTION PROCEDURES CHECKLIST

Prior to Collection:

- Collection site facilities are clean, well-lighted, and dedicated solely to collection during collection process.
- Collection site has enclosure where private urination can occur.
- Toilet for completion of urination or single use container with sufficient capacity to contain void.
- Suitable clean surface for writing.
- Toilet bluing agent put in toilet bowl. (If no bluing agent available, employee/applicant is not to flush toilet until specimen is delivered to collection site person.)
- No other source of water in enclosure where urination occurs.
- Secure site, i.e., lock any rear entrances and limit access to enclosure to one person at a time.
- Request photo identification from employee. If no photo identification, identification by supervisor or manager who can give positive identification.
- Fill out chain of custody form. Do NOT have employee/applicant sign before specimen given.
- Be sure laboratory has been instructed that all results go to MRO, not to employer.
- Designate only one or a limited number of persons at employer to receive results from MRO.

COLLECTION PROCEDURES CHECKLIST

Collection (Unobserved):

- Have employee/applicant remove unnecessary outer garments such as coat or jacket.
- Leave personal belongings such as purse or briefcase with outer garments. [Note: May retain wallet.]
- Employee/applicant instructed to wash and dry hands.
- If using a public restroom, collection site person remains in the restroom, but outside the stall. Collection site person should be same gender as employee/applicant. If collection takes place where employee goes into a separate room, with a fully closeable door, collection site person need not be same gender as employee.
- Collection site person receives specimen from employee/applicant.
- Employee/applicant and collection site person sign chain of custody form and seal specimen.
- If testing for alcohol and/or additional drugs (beyond (5) five major ones), must have separate collection of specimens.
- Protocol for receipt of a split sample includes:
- The donor shall urinate into a collection container, which the collection site person, in the presence of the donor, after the initial examination, pours into two specimen bottles.
- The first bottle is to be used for the employer-mandated test, and at a minimum shall contain the quantity specified by the NIDA guidelines. If there is no additional urine available for the second specimen bottle, the first specimen bottle shall nevertheless be processed for testing.

- Up to 60 ML of the remainder of the urine shall be poured into the second specimen bottle.
- All requirements of this Part shall be followed with respect to both samples, including the requirement that a copy of the chain of custody form accompany each bottle processed under split sample procedures.
- The first sample of the split sample collection may be forwarded to an NIDA-certified or a CAP-FUDT-certified laboratory in compliance with the NIDA guidelines for initial and confirmatory testing in compliance with the regulations of this Chapter of pursuant to statutory or regulatory authority under R.S. 23:1081 et seq. or R.S. 23:1601.
- The second sample may be sealed, labeled, and stored for future use or used for testing for drugs not listed in the regulations of this Chapter. Any specimen collected under split sample procedures must be stored in a secured, refrigerated environment and an appropriate entry made in the chain of custody form.

COLLECTION PROCEDURES CHECKLIST

Collection (Reasons for Direct Observation):

Under circumstances where there is reason to believe an individual may alter or substitute the specimen, collection under direct observation is permitted as per LA R.S. 49:1006. Direct observation of the individual during collection of the urine specimen may be allowed under any of the following conditions:

- There is reason to believe that the individual may alter or substitute the specimen to be provided.
- The individual has provided a urine specimen that falls outside the acceptable temperature range as listed in the NIDA guidelines.
- The last urine specimen provided by the individual was verified by the medical review officer as being adulterated based upon the determinations of the laboratory.
- The collection site person observes conduct indicating an attempt to substitute or adulterate the sample.
- The individual has previously been determined to have a urine specimen positive for one or more of the drugs the testing of which is regulated by this Chapter, and is being tested for purposes of follow-up testing upon or after return to service.
- The type of drug testing is post-accident or reasonable suspicion/cause.

COLLECTION PROCEDURES CHECKLIST

Collection (Observed):

- A designated representative of the entity authorizing the drug testing shall review and concur in advance with any decision by a collection site person to obtain a specimen under direct observation. All direct observation shall be conducted by a same gender collection site person.
- Observer is same gender as employee.
- Collection site person informs employee/applicant that collection will be under direct supervision.
- Employee/applicant washes and dries hands.
- Observer verifies that the specimen passes directly from employee's/applicant's body into a container.
- Follow protocol for split sample if a split sample is required.
- Employee/applicant is encouraged to wash hands after urination.
- Collection site person documents on chain of custody form that collection was done under direct observation.
- Employee/applicant and collection site person sign chain of custody form and seal specimen.

COLLECTION PROCEDURES CHECKLIST

After Collection:

• Insure specimen is 60 ml (2 oz.)

- Measure temperature of specimen within 4 minutes of urination.
- Acceptable range is 90.5 to 99.8 degrees F.
- Inspect specimen's color and look for any signs of contaminants.
- Note any unusual findings on chain of custody form.
- Collection site person and employee shall keep specimen in view at all times prior to it being sealed and labeled.
- Place tamper-proof seal on bottle.
- Complete chain of custody form. Employee and collection site person sign form.
- Place specimen in proper mailing container, if appropriate.
- On tape sealing container, collection site person shall sign and date.
- Mail or deliver specimen to laboratory.
- Follow protocol for split sample if a split sample is required.

MEDICAL REVIEW OFFICER (MRO)

- Licensed physician responsible for receiving laboratory results generated by employer or testing entity's drug testing program who has knowledge of substance abuse disorders and has appropriate medical training to interpret and evaluate an individual's positive test result together with his medical history and any other relevant biomedical information.
- Should not be an employee of laboratory unless the laboratory establishes a clear separation of functions to prevent any appearance of a conflict of interest.
- May be an employee of the agency, but must have final authority without input from persons involved in hiring or discipline decisions.

MRO Duties:

- Shall receive all results from the laboratory.
- Shall give employee opportunity to discuss a positive test result prior to a decision to verify result. Will contact employee directly.
- May place employee on temporary leave if unable to contact employee.
- May verify a test as positive if employee declines the opportunity to discuss results, or if employee is contacted and fails to contact MRO within (7) seven working days.
- After verifying a test as positive, refer employee to the Comprehensive Counseling Center, if applicable, or recommend to University that administrative action be taken, or both.
- MRO may authorize reanalysis of original sample and shall do so if employee requests it within (72) seventy-two hours of the employee's having received actual notice of his/her positive test.
- MRO shall report a test as negative if there is a legitimate medical explanation for a positive test result or if the evidence is scientifically insufficient.
- MRO shall keep medical information confidential.
- MRO will report all results to the appropriate university official.

LEGAL DOCUMENTATION

- 1. See ACT 1036 1990 Regular Session; LA R.S. 49:1001, 49:1002, 49:1005, 49:1008, 49:1011, 49:1012, 49:1015.
- 2. See 49 CFR Subtitle B, Chapter III, parts 382, 391, 392, and 395. (Amended rules effective March 8, 1996.)
- 3. Executive Order No. MJF 98-38.
- 4. Federal Register/Vol. 66, No. 83/Monday, April 30, 2001



FORMS

AGREEMENT TO SUBMIT TO DRUG SCREEN BY A URINE [and/or BLOOD AND HAIR] TEST

AND AUTHORIZATION FOR THE RELEASE OF MEDICAL INFORMATION TO SOUTHEASTERN LOUISIANA UNIVERSITY

I have been requested to submit to a drug screen by a urine [and/or blood and hair] test and medical assessment.

I have been informed and I understand, that my agreement to submit to the requested drug screens by a urine [and/or blood and hair] test is completely voluntary on my part, and that I have the right to refuse to submit to the test. I am aware and have been told that my refusal to submit to the drug screen by a urine [and/or blood and hair] test and/or medical assessment may be grounds for disciplinary action against me up to and including termination.

I have also been informed and am aware and hereby authorize that the results of this drug screen by a urine [and/or blood and hair] test and/or medical assessment may be released to the EEO/ADA Coordinator and such other University officials as may be determined necessary. I understand that the information so released to the University will be used to determine whether I was fit to perform my job duties, and/or whether I had violated the University's work rules concerning drug use and that the results of such test(s) may form the basis for disciplinary action against me, up to and including termination/dismissal.

With full knowledge of the above information, I have decided to voluntarily agree and submit to the requested drug

screen by a urine [and/or blood and hair] test and/or medical assessment.

EMPLOYEE SIGNATURE	
DATE	
PARENT SIGNATURE (if minor under 18)	
DATE	
NOTE: A witness other than the supervisor who ha [and/or blood and hair] test and/or medical assess	is requested that the employee submit to a drug screen by a urine ment should also sign the consent form.
WITNESS SIGNATURE	
DATE	
SUPERVISOR OF EMPLOYEE SIGNATURE	

REFUSAL TO SUBMIT TO DRUG SCREEN BY A URINE [and/or BLOOD AND HAIR] TEST

I hereby refuse to authorize testing of my urine [and/or blood and hair] for drugs. I understand that my refusal means that I cannot complete a medical exam/drug screen. If I am an applicant, I understand I will not be considered further for employment/enrollment. If I am an employee, such refusal will result in disciplinary action up to and including termination/dismissal.

EMPLOYEE SIGNATURE	
ENT ESTEE SIGNWOOLE	
DATE	
WITNESS SIGNATURE	
DATE	
SUPERVISOR SIGNATURE	
DATE	
Employee refused to sign.	
WITNESS SIGNATURE	
DATE	
SUPERVISOR SIGNATURE	
DATE	
RETURN TO WORI	CONTINUATION OF EMPLOYMENT AGREEMENT
l,	
	my continued recovery is my responsibility and that in support of my will allow me to continue my employment under the following conditions:

I understand that in addition to fulfilling all of my normal employment obligations and satisfactorily discharging all of the duties and responsibilities of my position including attendance, I consent and agree to the following conditions:

- 1. To abstain from using, possessing or trafficking in drugs;
- 2. To cooperate in an evaluation for chemical dependency and to complete successfully all recommended treatment, including aftercare, and to provide documentation of such treatment and care as may be required by the University;
- **3.** To authorize all persons involved in evaluating or treating me to disclose to my employer that evaluation, any evidence I am using drugs [and/or alcohol], and whether I have successfully completed treatment;
- **4.** To cooperate in any and all random follow-up tests (including periodic testing) for evidence of drug [and/or alcohol] use requested by the University in the next months;
- 5. That refusal to test will result in immediate termination of my employment;
- **6.** That a confirmed positive test result of an illegal drug, [alcohol, or abusive use of a legal drug] will result in immediate termination of my employment;
- 7. Any on or off the job accident, injury, illness, or medical procedure requiring prescription drugs will be reported to my treatment care supervisor, Employee Assistance Program Representative, Human Resource Director, EEO/ADA Coordinator, and Supervisor immediately. Failure to make full disclosure may result in disciplinary action up to and including termination. Full disclosure will minimally consist of the following:
 - A. Nature and severity of accident, injury, illness or medical procedure
 - B. Name of treating physician
 - C. All drugs prescribed, amounts and number of days supply
 - D. Expected duration of need for medication
 - E. Authorization to physician to release and verify information

I further understand that Southeastern Louisiana University will bear no financial responsibility for my recovery as is the case with any other illness.

Any failure on my part to fully comply with and participate in this Agreement will be grounds for immediate termination of my employment.

Compliance with this Agreement in no way implies a guarantee of employment and I understand that I may be terminated with or without cause or for lack of work, attendance or performance problems, rule violations, business necessity or any other legal reason, notwithstanding my compliance with this Agreement.

I understand that if any one or more of the conditions or portions of this Agreement become unenforceable, null, or void, it will in no way impact the enforceability of the remaining components of this agreement.

I have read and understand this Agreement and certify that I am competent to execute it and that I am entering into it freely and voluntarily after a reasonable opportunity for deliberation and consultation.

EMPLOYEE / APPLICANT SIGNATURE
DATE
ENADLOVED DEDDECENITATIVE CICNIATUDE

DATE	
WITNESS SIGNATURE	
WITHESS SIGIWATORE	
	
DATE	
	APPLICANT CONSENT FORM
Applicant Name:	Social Security No
	Applicant Consent

I, autho	orize	physicians and staff to collect
urine [and/or blood and hair] to screen for drug not pass the standards established I will be disq during the course of my employment.	abuse as part of my post-o	offer physical examination. I realize that if I do
during the course of my employment.		
Prescription drugs with addiction potential may with Codeine, tranquilizers, pain pills such as Da understand that I must list at the bottom of this days. I may also be required to provide proof the	arvon, headache pills such a s form any of these medicat	as Fiorinal and/or sleeping pills, etc. I tions, if I have taken one or more in the last 30
SIGNATURE OF APPLICANT		
	-	
DATE		
WITNESS SIGNATURE		
Also, PARENT SIGNATURE (if minor under 18)		
************	*******	*******
Please list all prescription and over-the-counter	drugs taken during the last	t 30 days.
SIGNATURE OF APPLICANT		

APPENDIX B

DATE

MRO PROTOCOL

MEDICAL REVIEW OFFICER (MRO) DUTIES AND SERVICES PRINCIPAL MRO DUTIES

- A. Receive all test results
- B. Review and verify confirmed positive test(s)
- C. Notify employee of results within "reasonable time"
- D. Contact should be directly between MRO and employee

- E. Provide employee opportunity to discuss result
- F. Review employee's medical history
- G. Review medical records and other biomedical factors as appropriate
- H. Examine employee as appropriate
- I. Verify laboratory report and assessment
- J. Notify designated official of employer of confirmed positive as well as those that are negative
- K. Process retest request of employee(s), if a request is made in appropriate time frame
- L. Follow procedure as listed above for retest
- M. Make return-to-work decisions

RECORD KEEPING BY THE MEDICAL REVIEW OFFICER

- A. Laboratory test results
- B. Custody and control forms
- C. Certified copy of custody and control form
- D. Verification statement
- E. Laboratory performance testing results
- F. Follow-up testing results
- G. MRO verification worksheet
- H. Medical records and information (confidential)
- I. Restricted release of information

USE THE MRO VERIFICATION WORKSHEET TO DOCUMENT INTERVIEW MRO CONFORMATION DOCUMENT

Employee Name: _				
_	Last	First	Middle	

Date of Collection:	
Employee SSN or ID#:	Date of Birth:
Specimen ID#	Time:
Date Positive Result Received:	Time:
Date of Initial Contact with Employee:	
Initial Contact Made By:	
Date MRO interview conducted:	Time:
Employee refused to discuss test resi	ult, declined interview with MRO
Medical records are forthcoming. Da	te records to be available:
Date medical examination conducted	d (if applicable): Time:
Examining Physician's name:	
Address:	Phone #:
Date re-test ordered (if applicable):	
	cable):
Result and date received:	
Date employee notified of verified result:	Time:
	Time:
Employer Contact:	
General Comments:	
Verification Decision:	
Positive	
Negative	
Test Cancelled	
Drug	
Reason for test cancellation:	
MRO SIGNATURE	DATE

MRO/EMPLOYEE INTERVIEW CHECKLIST

(1) Identify yourself as a physician serving as the Medical Review Officer (MRO) for (Employer), with the duty of
receiving and reviewing drug test results. Clearly state that you have been designated the MRO for (Employer's) drug
testing program.
(2) Establish identity of the employee (i.e., full name, social security number of employee I.D. number, date of
birth.)
(3) Inform employee that medical information discussed during the interview is confidential, and may only be
disclosed under very special circumstances. Identify those circumstances as prescribed in 40.33 (h).
(4) Tell the employee you are calling about the specific drug test he/she underwent on the specific date and at the
specific location. Inform the employee what drug(s) the specimen tested positive for.
(5) Briefly explain the testing process, discussing screening and confirmation testing, and laboratory reporting.
(6) If the employee requests the quantitative levels of the confirmed results, provide them if available. If the
quantitative levels are not available, the MRO should request them, however does not delay his/her verifications
decision pending receipt of the quantitative data.
(7) Ask for recent medical history, when appropriate. Prescription drugs OTC drugs. Dental, ENT, ophthalmologic,
or other medical procedures. Food ingestion.
(8) Request employee provide medical records or documentation of prescription for controlled substance when
appropriate. Set a specific deadline for receipt of the medical records.
(9) Request employee undergo a medical examination or evaluation, when appropriate, make arrangements for
medical examination.
(10) Notify the employee that he/she may request a re-test, and explain this process to him/her. Provide
information about payment for re-test in accordance with employer's policy, if appropriate. Tell the employee that a re-
test will not delay verification of the initial test result.
(11) If the verification process is complete, inform the employee that the appropriate employer official will be
notified.
(12) If the test result was verified positive, inform the employee of the Employee Assistance Program made
available by the employer, as appropriate.
(13) Offer to answer any further questions.
(14) Give your name and phone number in case the employee has any further questions.

APPENDIX C

DRUG INFORMATION
ORIGINS, PHARMACOLOGICAL PROPERTIES, AND BEHAVIORAL EFFECTS OF THE ILLICITLY USED DRUGS FOR WHICH TESTS WILL BE CONDUCTED
27 D = -

DRUGS	SOURCE	MEANS OF USE	EFFECTS	MEDICAL USE	DETECTION AFTER LAST USE
Marijuana (THC)	Cannabis Plant	Smoked Eaten	High, impaired concentration, learning & perception	Anti-Emetic in Cancer patients	1-3 days single use 5-45 days chronic use
Cocaine	Coca Plant	Snorting Inhalation - Freebase-Crack IV	High, Confusion, Exhaustion, Lethargy	Anesthetic ENT, Dentist Bronchoscopy	Up to 72 hours
Amphetamine Methamphetamine	Synthetic Lab & Street	Oral, IV	Overstimulation, Tremor, Exhaustion, Lethargy, Confusion, Paranoia	*Appetite Suppressant, Narcology Attention Disorders	24 hours
Opiates Morphine Codeine	Opium Poppy Synthetic Semisynthetic	Oral, IV, IM, Snorted	Miosis, Mental Dullness, Confusion, Ptosis, Slurring Speech, Drowsiness, Nodding	Heroin- None Pain, Cough, Diarrhea	Heroin 2-4 days 3-12 hours
Phencyclidine (PCP)	Synthetic	Eaten, Snorted, Smoked, Injected	Fearfulness, Tremors, Facial Twitching, Nystagmus, Decreased Sensation, Blurred Vision, Ataxia, Confusion, Muteness, Amnesia, Auditory Hallucination, Aggressiveness, Psychosis.	No Medical Use	2-6 days
Barbiturates		Oral, Injection	CNS Depressant Sedation, Drowsiness	Hypnotic Sedative Epilepsy, Anxiety	Hours to Weeks
Benzodiazepines Valium Dalmane Xanax		Oral, Injection	CNS Depressant	Anti-Anxiety Sedation, Muscle Relaxant Anti-Convulsive	5 to 100 hours Chronic - weeks
Methaqualone		Oral	CNS Depressant	Hypnotic	1 week
Propoxyphene Darvon Wygesic		Oral	CNS Depressant Dizziness Sedation	Pain	72 hours
Methadone		Oral	CNS Depressant, Nausea Dizziness, Sedation	RX of Addiction Severe Pain	Effects last 36-48 hours
Alcohol		Ingestion	High, CNS Depressant	Cough Syrup	Short Time

Breath Test .1 = Intoxication

Tested only for Cause and Post Accident

Blood Test .1 = Intoxication

DRUGS OF ABUSE

Central nervous system depressant and anesthetic

ORIGIN AND APPEARANCE:

Made synthetically or produced naturally by fermentation of fruits, vegetables, or grains. Liquid

GENERAL FACTS:

Alcohol is the oldest and the most widely used social drug in the world. Depending on the concentration consumed, alcohol acts as an analgesic, tranquilizer, sedative-hypnotic, soporific, intoxicant, anesthetic, or narcotic.

USAGE:

Swallowed

"STREET" NAMES:

Booze, hooch

EFFECTS:

Loss of inhibitions, loss of judgment, personality change, memory impairment, loss of coordination.

HIGHER DOSE SYMPTOMS:

Stupor, coma, possible death

SCREENING CUTOFF LEVEL:

20 mg/dl (.02%)

CONFIRMATION CUTOFF LEVEL:

20 mg/dl (.02%)

RETENTION TIME:

3-10 hours

THERAPEUTIC USES:

Given for Methanol poisoning

AMPHETAMINES/METHAMPHETAMINES: C

Central nervous system stimulants

GENERAL FACTS:

An estimated 2 million Americans use stimulants without medical supervision. Many "designer" amphetamines have appeared on the illicit market. Designer drugs are synthetic drugs, chemically related to legitimate drugs, which are produced inexpensively and sold (sometimes legally) as substitutes for the legitimate products they imitate. The term was originally used to describe drugs designed to the tastes of particular clients. Some of the most popular designer amphetamines are "Ecstasy" and, more recently, "Ice."

The screening process will identify some common over-the-counter drugs, including ephedrine and phenylpropanolamine (PPA). These compounds are commonly found in diet, allergy and cold medications, such as Nyquil, Primatene Mist, Robitussin, Dexatrim, and others. However, GC/MS confirmation can differentiate the illegal amphetamine/methamphetamine from the legal compounds.

USAGE:

Usually administered orally.

"STREET" NAMES:

bennies, dexies, uppers, speed

EFFECTS:

Euphoria, elevation in mood, increased alertness and energy, loss of appetite.

HIGHER DOSE SYMPTOMS:

Increased heart rate, high blood pressure, tremor, anxiety, hyperirritability, restlessness, bizarre behavior, weight loss and suspiciousness.

SCREENING CUTOFF LEVEL:

1,000 ng/ml

CONFIRMATION CUTOFF LEVEL:

Amphetamines 500 ng/ml Methamphetamines 500 ng/ml

RETENTION TIME:

2 days

THERAPEUTIC USES:

Once prescribed for obesity, amphetamines are no longer widely used, due to the potential for abuse; still prescribed for narcolepsy (sleep disorder) and attention-deficit disorder. Sometimes, in rare instances, prescribed for depression.

BARBITURATES:

Central nervous system depressants

ORIGIN AND APPEARANCE:

Manufactured drug. Tablets, capsules, liquid, white powder

GENERAL FACTS:

Since first used in 1903, over 2,500 barbiturates have been produced, but only 50 commercial brands are now available and only 12 widely used. In 1970, barbiturates and their substitutes accounted for 28.6 percent of all prescriptions for psychoactive drugs in America. Although still considered indispensable in medicine, their medical applications have declined primarily due to the availability of other drugs with similar effects such as the antianxiety tranquilizers and other nonbarbiturate sedative-hypnotics.

USAGE:

Swallowed or injected

"STREET" NAMES:

Rainbows, blue devils, reds, yellows, yellow jackets, blues, blue heavens, barbs, downers, goofballs, sleeping pills

EFFECTS:

In small doses they are effective in sedation and in relieving tension and anxiety, and like tranquilizers, they do not cause much drowsiness.

HIGHER DOSE SYMPTOMS:

Loss of consciousness, coma, or death

SCREENING CUTOFF LEVEL:

200 ng/ml

CONFIRMATION CUTOFF LEVEL:

100 ng/ml

RETENTION TIME:

Short acting 24 hours Intermediate 1-4 days Long Acting 2-3 weeks

THERAPEUTIC USES:

Used as sedatives

BENZODIAZEPINES:

Central nervous system depressants

ORIGIN AND APPEARANCE:

White or pale yellow crystalline powders, tablets, capsules, liquid (injectable)

GENERAL FACTS:

A family of depressants that relieve anxiety, tension, and muscle spasms, produce sedation and prevent convulsions. They are marketed as mild tranquilizers, sedatives, hypnotics or anticonvulsants.

USAGE:

Swallowed or injected

"STREET" NAMES:

Tranks, downers, blues, yellows

EFFECTS:

Sedation, drowsiness, blurred vision, fatigue, mental depression, loss of coordination.

HIGHER DOSE SYMPTOMS:

Confusion, somnolence, slurred speech, hypotension, diminished reflexes.

SCREENING CUTOFF LEVEL:

300 ng/ml

CONFIRMATION CUTOFF LEVEL:

300 ng/ml

RETENTION TIME:

3-5 days if therapeutic dose injected

THERAPEUTIC USES:

Minor tranquilizers, anti-anxiety/sedation

COCAINE (erythroxylon coca):

Central nervous system stimulant

ORIGIN AND APPEARANCE:

An alkaloid extracted from the coca plant; most comes from Columbia or Peru. Cocaine is usually a white crystalline powder, sold in envelopes. "Crack" cocaine is sold in "rocks," and is so named because of the popping sound the crystals make when heated.

GENERAL FACTS:

Once considered the "champagne of drugs," cocaine use now crosses all strata of society. There is no evidence of physical dependence, although psychological dependence does occur. Cocaine's popularity results probably from the instantaneous onset of action and the brief duration of the "high." It has a reputation of enhancing social interactions. An estimated 30 million Americans have tried cocaine, and 5 million regularly use it.

USAGE:

Cocaine is usually administered intranasally by "snorting;" it can be smoked, injected or taken orally.

"STREET" NAMES:

Coke, snow, blow, toot, leaf

EFFECTS:

Euphoria, over alertness, sense of overconfidence that encourages risks, loss of appetite.

HIGHER DOSE SYMPTOMS:

Paranoia, weight loss, inability to concentrate, anxiety, restlessness, extreme irritability, hallucinations.

SCREENING CUTOFF LEVEL:

300 ng/ml

CONFIRMATION CUTOFF LEVEL:

150 ng/ml

RETENTION TIME:

24-48 hours

THERAPEUTIC USES:

Local vasoconstrictive anesthetic. Used in certain dental and otolaryngologic procedures and sometimes bronchoscopy. A licensed physician must order its use, so an employee's statement that a positive test resulted from medical use can easily be verified.

MARIJUANA (cannabis sativa):

ORIGIN AND APPEARANCE:

Derived from the hemp plant. Usually appears as chopped, dried vegetable matter.

GENERAL FACTS:

Psychoactive substances in the plant are called "cannabinoids." Highest concentrations occur in the flowering tops and the lowest in the seeds. Most commonly used illegal substance in the United States. An estimated 50 million people have tried marijuana once; 18 million people are current users.

USAGE:

Usually smoked or ingested orally.

"STREET" NAMES:

Pot, grass, weed, joint, reefer

EFFECTS:

Effects vary based on dose, personality and expectations of the user, environmental and social factors. Includes euphoria, passivity, relaxation, increased auditory/visual perceptions, increased appetite, blood-shot eyes.

HIGHER DOSE SYMPTOMS:

More intense levels of above symptoms, impairment of short-term memory, diminished learning abilities, disturbances in thought processes, attention lapses. Even larger doses can lead to disorientation, depersonalization, paranoia, delirium, hallucinations.

SCREENING CUTOFF LEVEL:

100 ng/ml; eliminates possibility of "passive inhalation."

CONFIRMATION CUTOFF LEVEL:

15 ng/ml

RETENTION TIME:

Light smoker, 2-7 days; Moderate smoker, 2 weeks; Heavy smoker, 3-6 weeks

THERAPEUTIC USES:

Approved antiemetic for cancer chemotherapy patients with intractable vomiting.

METHADONE

A synthetic opiate

ORIGIN AND APPEARANCE:

Manufactured narcotic. White crystalline powder, tablets, or liquid

GENERAL FACTS:

It is a synthetic narcotic which prevents withdrawal symptoms and the craving to use other opiates.

USAGE

It is effective orally, though it can be administered intravenously.

"STREET" NAMES:

Dolly

EFFECTS:

Euphoria, Drowsiness

HIGHER DOSE SYMPTOMS:

It blocks the effects of heroin through cross-tolerance thus canceling the pleasurable effects of heroin.

SCREENING CUTOFF LEVEL:

300 ng/ml

CONFIRMATION CUTOFF LEVEL:

150 ng/ml

RETENTION TIME:

3 days (chronic user)

THERAPEUTIC USES:

This opioid is largely used in the maintenance treatment of heroin dependency.

OPIATES:

Narcotic analgesic; central nervous system depressants

ORIGIN AND APPEARANCE:

The drug is derived from unripe seed capsules of the opium poppy. It can be sold as an intravenous solution or in capsule/tablet format.

GENERAL FACTS:

The main opiate compounds are morphine and codeine, a very widely prescribed painkiller. Derivations include heroin and hydrocodone. There are approximately 800,000 daily heroin users in the United States. Heroin is used by 90% of narcotic addicts. Poppy seeds contain trace amounts of morphine and codeine. A Medical Review Officer must find that a positive result for morphine or morphine and codeine does not demonstrate drug abuse unless other signs are present. A GC/MS confirmation result for 6-monoacetylmorphine confirms heroin use.

USAGE:

Usually administered intravenously, though it may be taken orally or nasally.

"STREET" NAMES:

Dope, smack, horse, "H"

EFFECTS:

Warm flush of the skin, long-lasting dream-like state, feelings of relaxation, contentment, apathy, tranquility, constricted pupils, head nodding, and needle tracks.

HIGHER DOSE SYMPTOMS:

Signs of addiction are malnutrition, infections, unattended diseases or injuries, watery eyes, runny nose, yawning, perspiration.

SCREENING CUTOFF LEVEL:

300 ng/ml

CONFIRMATION CUTOFF LEVEL:

Morphine 300 ng/ml Codeine 300 ng/ml

RETENTION TIME:

2 days

THERAPEUTIC USES: Commonly prescribed as painkillers, including Dilaudid, Darvon and Demerol. Heroin has no legal use. Morphine is used in the treatment of heroin addiction

PHENCYCLIDINE (1-phenylcyclohexyl piperidine):

Hallucinogen

ORIGIN AND APPEARANCE:

Once used as a surgical anesthetic in the 1950s, it was removed from the market because of its hallucinogenic side effects. Usually appears in powder, capsule or tablet form.

GENERAL FACTS:

The prevalence of PCP is difficult to estimate, because the drug is often sold under other names. It is often misrepresented to the purchaser, usually as cocaine or LSD.

USAGE:

Powder is snorted or smoked after mixing it with marijuana or other vegetable matter. Tablets and capsules are ingested.

"STREET" NAMES:

Angel dust, peace pills, hogs, rocket fuel

EFFECTS:

User thinks and acts swiftly, mood swings from euphoria to depression, visual hallucinations, poor perception of time and distance.

HIGHER DOSE SYMPTOMS:

Mood changes are unpredictable; sense of unreality; irrational and violent actions. Self-injurious behavior is leading cause of death from PCP intoxication.

SCREENING CUTOFF LEVEL:

25 ng/ml

CONFIRMATION CUTOFF LEVEL:

25 ng/ml

RETENTION TIME:

3-10 days

THERAPEUTIC USES:

None

EVALUATING POSITIVE TESTS FOR OPIATES

- Poppy Seed Pastries
 - Positive test for Morphine and Codeine
 - Negative result in absence of clinical evidence of opiates abuse
- Codeine Metabolism
 - Body may metabolize some codeine to morphine
 - Proportion of morphine and codeine depends on stage of metabolism (the later the stage, the greater the amount of morphine)
- Non-prescription narcotics
 - Permitted under Schedule V of the Controlled Substances Act

- Dispensed and controlled only by a pharmacist

ACCURACY OF TESTING

- Initial immunoassay approaches 99% accuracy
- Confirmatory gas chromatography/mass spectrometry virtually error free assuming proper chain of custody
- Armed services 5-year period, 10 million tests, no false positives

GUIDELINES FOR SELECTING A LAB

- Is the lab insured?
- Specializes and is well experienced in urine testing with high volume of tests performed.
- Follows rule of two for confirmation.
- Has procedures to ensure integrity and security of samples with chain-of-custody procedures being strictly followed and documented.
- What form and labeling process is used?
- How is tampering prevented/detected?
- Reports results within 72 hours.
- Can provide competent, persuasive expert testimony if legal challenges are made concerning the authenticity and validity of a test.
- Employs only qualified, competent personnel to perform tests and supervise lab.
- Is the lab certified/registered with NIDA, CAP-FUDT, DHH, CDC?
- Has the lab been involved in any litigation questioning or attacking the validity or integrity of it's testing techniques or been ruled negligent?
- Does the lab use EMIT for initial testing and GC/MS for confirmation?
- Does the lab supply a technician to testify at unemployment, court or arbitration cases in which a rejected applicant or former employee attacks the substance abuse policy and it's testing provisions? (If so, how much experience do these technicians have? How effective have they been in presenting their testimony?)
- How are the test results safeguarded and communicated to the Employer or MRO.
- Lab participates in proficiency testing on at least quarterly basis (Scores > 80).
- Positive specimens kept at least 60 days. Records maintained at least 2 years.
- Can freeze and retain specimens for future analysis and possible legal use.
- Minimum of 10% all test samples are used as quality control specimens.
- Perform site survey of lab.

RECEIPT OF LABORATORY TEST RESULTS

- All results (positive and negative) are transmitted directly to MRO
- Results can be transmitted by secure electronic means or by mail
- Results may not be transmitted over the phone
- MRO does not necessarily review negative reports but receives negative reports and reports them to designated official of employer

VERIFICATION AND REPORTING

- Enter a signed verification statement on laboratory test report
- Provide copies of verified report to employee and appropriate official(s) of employer
- Maintain documents that support the determination

RETEST REQUEST

- "Confirmed" positive employee may request retest
- Retest only after MRO has confirmed test as positive to employer
- Request must be in writing to MRO within 7 days to contest a confirmed positive
- Retest of split sample must be requested by employee within 72 hours of being notified of the confirmed positive
- Employee may be requested to pay for retest
- MRO notifies employee of results of second test

APPENDIX D POSITIONS WHICH REQUIRE A COMMERCIAL DRIVERS LICENSE

Bus Drivers:

- 1. Bus Driver-Travel Aide (Primary Driver)
- 2. Locksmith (Relief Bus Driver)

Mechanic Shop - Test-drives trucks and buses:

- 3. Mobile Equipment Maintenance Mechanic
- 4. Mobile Master Mechanic
- 5. Mobile Equipment Overhaul Mechanic
- 6. Mobile Equipment Shop Foreman

Moving Crew – Drives trucks:

7. Mobile Equipment Operator 1

Heavy Equipment:

8. Mobile Equipment Operator 1 – Heavy

APPENDIX E SECURITY-SENSITIVE AND SAFETY-SENSITIVE POSITIONS

Medical:

- 1. Registered Nurse 1 Student Health
- 2. Registered Nurse Supervisor Student Health

Police:

- 3. Police Officer 2
- 4. Police Sergeant

- 5. Police Investigator
- 6. Police Captain7. Director of University Police

[end of policy]