



**Town of Cortland**  
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## DOT/CDL DRUG & ALCOHOL TESTING PROGRAM & POLICY

**Section 1 – PURPOSE** - This policy complies with the U.S. Department of Transportation 49 CFR Part 382, as amended, and 49 CFR Part 40, as amended. Copies of Parts 382 and 40 are available in the employer's office and can be found on the internet at the Department of Transportation (DOT) Office of Drug and Alcohol Policy and Compliance website <http://www.transportation.gov/odapc>. Additionally, information regarding this policy compliance with the FMCSA's Clearinghouse can be found on the internet at <https://clearinghouse.fmcsa.dot.gov>. All drivers who hold commercial driver's license (CDL) are required to submit to drug and alcohol tests and consent to queries regarding his or her drug and alcohol test past through the FMCSA's Clearinghouse as a condition of employment in accordance to these regulations.

This policy supersedes any previous employer policy or agreement that may be in existence prior to the effective date of this policy. This policy becomes effective March 1, 2023.

This policy is administered in a way that provides all an equal employment opportunity and shall not discriminate on the basis of race, color, religion, sex, sexual orientation, disability or any other characteristic protected by law. Information shared pursuant to this policy will be kept confidential and employees with a qualified disability will be reasonably accommodated to the extent required or provided by law.

Neither the adoption nor implementation of this policy shall be construed as creating a contractual obligation or modifying any at-will employment relationship between the company and an employee. The company reserves the right to modify or rescind this entire policy in whole or in part at any time with or without notice.

DOT forms will be used for any drug or alcohol testing that is conducted for DOT/FMCSA purposes under 49 CFR Part 40 and 49 CFR Part 382.

**Portions of this Policy in bold and underlined reflect the employer's independent authority. Non-DOT forms will be used for any drug or alcohol testing that is conducted under the employer's independent authority.**

Any questions or assistance needed regarding our company's DOT/CDL drug & alcohol testing program and Policy should be directed to:

NAME(S): Chief Lin Dargis

OFFICE LOCATION: 250 S Halwood St, PO Box 519

PHONE (Day): 815-756-2558 (Cell): \_\_\_\_\_

### Section 2 - DEFINITIONS -

**ADULTERATED SPECIMEN** is a specimen that has been altered, as evidenced by test results showing either a substance that is not a normal constituent for that type of specimen or showing an abnormal concentration of an endogenous substance.

**AIR BLANK** is a reading by an evidential breath testing device (EBT) of ambient air containing no alcohol. (For EBTs that use gas chromatography technology, it is a reading of the device's internal standard).

**ALCOHOL USE.** The drinking or swallowing of any beverage, liquid mixture or preparation (including any medication), containing alcohol.

**ALiquot** – A fractional part of a specimen used for testing. It is taken as a sample representing the whole specimen.

**ASD (ALCOHOL SCREENING DEVICE).** A breath or saliva device, other than an evidential breath testing device, that is approved by the National Highway Traffic Safety Administration (NHTSA) and appears on ODAPC's (Office of Drug & Alcohol Policy & Compliance) Web page for "Approved Screening Devices to Measure Alcohol in Bodily Fluids" because it conforms to the model specifications from NHTSA.

**BAT (BREATH ALCOHOL TECHNICIAN)** is an individual who instructs and assists individuals in the alcohol testing process and operates an EBT. A BAT may also act as a Screening Test Technician (STT) who instructs and assists individuals in the alcohol testing process and operates an ASD.

**CANCELED TEST** is a drug or alcohol test that has a problem identified that cannot be or has not been corrected, or in which 49 CFR Part 40 otherwise requires a test to be cancelled. A cancelled test is neither a positive nor a negative test.

**CDL (COMMERCIAL DRIVERS LICENSE)** means a license issued by a State or other jurisdiction, in accordance with the standards contained in 49 CFR Part 383, to an individual which authorizes the individual to operate a class of commercial motor vehicle.

**CMV (COMMERCIAL MOTOR VEHICLE)** means 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 rating 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 materials found to be hazardous for the purposes of the Hazardous Materials Transportation Act and which require the motor vehicle to be placarded under the Hazardous Materials Regulations.

**COLLECTOR** is a person who instructs and assists individuals at a collection site and who receives and makes an initial inspection of the specimen provided by those employees, and who initiates and completes the CCF.

**COMPANY WORKPLACE** includes, but is not limited to, any Company building, property, and parking area under the Company's control (regardless of whether it is leased or owned), or any location or area where an employee is performing his or her job duties or where an employee is physically located during his or her work schedule. Company property shall also include any place the employee is located when "on call" or at any time during his or her work shift including, but not limited to, guest, visitor or customer locations, vendor or supplier locations, home offices, as well as vehicles, whether leased, rented, or owned.

**CONFIRMATION (or confirmatory) TEST.** In drug testing, a second analytical procedure performed on a different aliquot of the original specimen to identify and quantify the presence of a specific drug or drug metabolite. In alcohol testing, a second test, following a screening test with a result of 0.02 or higher that provides a quantitative data of alcohol concentration.

**CONSORTIUM** is the Mid-West Truckers Association Drug and Alcohol Testing Consortium (hereinafter called the Consortium). The Consortium is a service agent that provides and coordinates the provisions of a variety of drug and alcohol testing services through other service agents for its participants by the employer to take immediate action(s) to removed employees from safety-sensitive duties, or cause employees to be removed from these covered duties, and to make required decisions in the testing and evaluation processes. The DER also receives test results and other communications for the employer, consistent with the requirements of Part 40.

**DER (DESIGNATED EMPLOYER REPRESENTATIVE)** is an employee authorized by the employer to take immediate action(s) to remove employees from safety-sensitive duties, or cause employees to be removed from these covered duties, and to make required decisions in the testing and evaluation processes. The DER also receives test results and other communications for the employer, consistent with the requirements of Part 40.

**DHHS (DEPARTMENT OF HEALTH AND HUMAN SERVICES)** is the Department or any designee of the Secretary, Department of Health and Human Services.

**DILUTE SPECIMEN.** A specimen with creatinine and specific gravity values that is lower than expected for human urine.

**DOT** means the Dept. of Transportation.

**DRIVER and EMPLOYEE** mean any person who operates any commercial motor vehicle. This includes, but is not limited to: full time, regularly employed drivers; casual, intermittent or occasional drivers; leased drivers and independent owner-operator contractors who are either directly employed by or under lease to an employer or who operate a commercial motor vehicle at the direction of or with the consent of an employer. Driver includes both applicants for employment (subject to pre-employment testing) and current drivers employed by this employer.

**DRUGS AND CONTROLLED SUBSTANCES** – mean the drugs or classes of drugs for which tests are required under 49 CFR Parts 40 and 382, including marijuana/cannabis whether medical, recreational and/or derivatives, even considered legal under state law.

**EBT (EVIDENTIAL BREATH TESTING DEVICE)** is a device approved by the National Highway Traffic Safety Administration (NHTSA) for the evidential testing of breath at the .02 and .04 alcohol concentrations and appears on ODAPC's Web page for "Approved Evidential Breath Measurement Devices" because it conforms with the model specifications available from NHTSA.

**EMPLOYER** means a person or entity employing one or more employees (including an individual who is self-employed) that is subject to 49 CFR Parts 382 and 40. The term employer includes an employer's officers, designated representatives or management personnel.

**FMCSA (FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION)** is the federal agency responsible for the administration of federal regulations for commercial motor vehicle drivers.

**HHS** means the same as the Department of Health and Human Services (DHHS).

**ILLEGAL DRUGS** mean drugs and controlled substances that are considered illegal under federal law, including legal drugs or controlled substances that are being used illegally under federal law.

**INITIAL TEST (or screening test)** - In drug testing, it is the test used to differentiate a negative specimen from one that requires further testing for drugs or drug metabolites. In alcohol testing, it is an analytical procedure to determine whether an employee may have a prohibited concentration of alcohol in a breath or saliva specimen.

**INVALID DRUG TEST** is the result reported by an HHS-certified laboratory in accordance with the criteria established by HHS Mandatory Guidelines when a positive, negative, adulterated, or substituted result cannot be established for a specific drug or specimen validity test.

**LABORATORY** – Any U.S. laboratory certified by HHS under the National Laboratory Certification Program as meeting the minimum standards of Subpart C of the HHS Mandatory Guidelines for Federal Workplace Drug Testing Programs; or, in the case of foreign laboratories, a laboratory approved for participation by DOT under Part 40.

**MRO (MEDICAL REVIEW OFFICER)** is a licensed physician (Medical Doctor or Doctor of Osteopathy) responsible for receiving and reviewing laboratory results generated by an employer's drug testing program and evaluating medical explanations for certain drug test results. The MRO must be knowledgeable of and have clinical experience in controlled substances abuse disorders, including detailed knowledge of alternative medical explanations for laboratory confirmed drug test results. The MRO must be knowledgeable of issues relating to adulterated and substituted specimens as well as the possible causes of specimens having an invalid result.

**NEGATIVE RESULT** – The result reported by an HHS-certified laboratory to an MRO when a specimen contains no drug, or the concentration of the drug is less than the cutoff concentration for the drug or drug class and the specimen is a valid specimen.

**ON CALL** means an employee who is scheduled to be on standby or could be called into work or otherwise responsible for performing work-related tasks either at the Company's premises or any other designated location by management.

**POSITIVE RESULT** – The result reported by an HHS-certified laboratory when a specimen contains a drug or drug metabolite equal to or greater than the cutoff concentrations.

**PRIMARY SPECIMEN** - In drug testing, it is the specimen bottle that is opened and tested by a first laboratory to determine whether the employee has a drug or drug metabolite in his or her system; and for the purpose of validity testing.

**RECONFIRMED** – The result reported for a split specimen when the second laboratory is able to corroborate the original result reported for the primary specimen.

**REFUSAL TO TEST (alcohol or controlled substances)** means that a driver:

- 1) Fails to show up for any test within a reasonable time after being directed to do so by the employer or to remain at the testing site until the testing process is complete. This includes the failure of a driver (including an owner/operator) to appear for a test when called by the Consortium.
- 2) Fails to provide a specimen or fails to attempt to provide a saliva or breath specimen for any drug or alcohol test as required by this policy and 49 CFR Parts 382 and 40.
- 3) In the case of a directly observed or monitored collection in a drug test, fails to permit the observation or monitoring in providing a specimen.
- 4) Fails to sign the certification at Step 2 of the Alcohol Testing Form.
- 5) Fails to provide a sufficient amount of specimen or a sufficient amount of breath, when directed; unless it has been determined, through a required medical evaluation, that there was an adequate medical explanation for the failure.
- 6) Fails or declines to take an additional test the employer or collector has directed the driver to take.
- 7) Fails to undergo an additional medical examination or evaluation as directed by the MRO as part of the verification process, or as directed by the employer concerning the evaluation as part of the shy bladder or insufficient breath procedures.
- 8) Fails to cooperate with any part of the drug or alcohol testing process (e.g., refuses to empty pockets when directed by the collector, behaves in a confrontational way that disrupts the collection process, fails to wash hands after being directed to do so by the collector).
- 9) For an observed collection, fails to follow the observer's instructions to raise his/her clothing above the waist, lower clothing and underpants, and to turn around to permit the observer to determine if the driver has any type of prosthetic or other device that could be used to interfere with the collection process.
- 10) Possesses or wears a prosthetic or other device that could be used to interfere with the collection process.
- 11) Admits to the collector or the MRO that the driver has adulterated or substituted the specimen.

It is also considered a refusal to test (which is the same as a positive test) when the driver refuses to test or when the MRO reports to the employer/Consortium that a driver has a verified adulterated or substituted drug test result.

**REJECTED FOR TESTING** – The result reported by an HHS-certified laboratory when no tests are performed for a specimen because of a fatal flaw or a correctable flaw that is not corrected.

**SAFETY SENSITIVE FUNCTION** means the time period when a driver begins to work or is required to be in readiness to work until the time, he/she is relieved from work and all responsibility for performing work.

Safety Sensitive Functions shall include:

- (1) All time at an employer or shipper plant, terminal, facility, workplace or other property, or any public property, waiting to be dispatched, unless the driver has been relieved from duty by the employer.
- (2) All time inspecting equipment as required by 49 CFR Parts 392.7 and 392.8 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 in operation.
- (4) All time, other than driving time, in or upon any commercial motor vehicle except time resting in a sleeper berth (a berth conforming to requirements of 49 CFR Part 393.76).
- (5) All time loading and unloading a 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 repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle.

**SAMHSA (SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION)** is the federal agency under the Department of Health and Human Services (DHHS) responsible for the certification of laboratories used as part of the drug testing program.

**SAP (SUBSTANCE ABUSE PROFESSIONAL)** is a person who evaluates employees who have violated a DOT drug and alcohol regulation and makes recommendations concerning education, treatment, follow-up testing, and aftercare.

**SPLIT SPECIMEN.** A part of the specimen that is sent to a first laboratory and retained unopened, and which is transported to a second laboratory in the event that the employee requests it to be tested following a verified positive, adulterated or substituted test of the primary specimen.

**SPLIT SPECIMEN COLLECTION** – A collection in which the specimen collected is divided into two separate specimen bottles, the primary specimen (Bottle A) and the split specimen (Bottle B).

**STT (SCREENING TEST TECHNICIAN)** is a person who instructs and assists individuals in the alcohol testing process and operates an alcohol screening device (ASD).

**SUBSTITUTED SPECIMEN** is a specimen with creatinine and specific gravity values that are so diminished or so divergent that they are not consistent with normal human urine.

**VERIFIED TEST** is a drug test result or validity test result from a DHHS/SAMHSA-certified laboratory that has undergone review and final determination by the MRO.

**Section 3 – PROHIBITED BEHAVIOR** – 49 CFR Parts 382 and 40 prohibit the use/misuse of controlled substances and/or alcohol by drivers of commercial motor vehicles.

The employer will maintain a pre-employment screening program designed to prohibit the hiring of anyone who uses any illegal drugs.

No driver, at any workplace, work site, in any company vehicle or leased vehicle, while working, on call or operating company equipment or commercial motor vehicles (owned and leased) will possess, distribute, dispense, conceal, use, sell, manufacture or use any quantity of any controlled substance or alcohol, lawful or unlawful, which in sufficient quantity could result in impaired performance.

No driver will report for duty, remain on duty or perform safety-sensitive functions (including driving a CMV) when the driver has used, is under the influence of, impaired by or has in his or her body a quantifiable presence of prohibited drugs at or above the minimum thresholds defined in 49 CFR Part 40. Prohibited drugs are any drug or substance identified in 21 CFR 1308.11 Schedule 1 or 49 CFR Part 40, which include Marijuana, Cocaine, Phencyclidine (PCP) Opioids and Amphetamines. No driver shall report for duty, remain on duty or perform safety-sensitive functions (including driving a CMV) if the driver tests positive, has adulterated or substituted a drug test or there is actual knowledge of prohibited drug.

The employer having actual knowledge that the driver has used a drug, tested positive or has adulterated or substituted a drug test, shall not permit the driver to perform or continue to perform safety-sensitive functions (including driving a CMV). The employer can obtain actual knowledge that a driver has used alcohol or drugs based on

- The employer's direct observation of the driver,
- Information provided by the driver's previous employer(s),
- A traffic citation for driving a CMV while under the influence of alcohol or drugs, or
- A driver's admission of alcohol or drug use.

The consumption of alcohol is prohibited while the driver is performing a safety-sensitive function. No driver shall report for duty or remain on duty, requiring the performance of safety-sensitive functions, while consuming or having consumed alcohol within four (4) hours of reporting for such duties, or having a BAC (breath alcohol concentration) of .04 or greater. The employer having knowledge of such conditions shall not allow a driver to perform or continue to perform safety-sensitive functions.

Any driver that has an alcohol concentration of .02 or greater, but less than .04, shall not perform or continue to perform safety-sensitive functions, nor shall the employer allow a driver to perform or continue to perform safety-sensitive functions, until the start of the driver's next regularly scheduled work period, but not less than 24 hours following the administration of the alcohol test.

No driver required to take a post-accident alcohol test shall use alcohol for up to eight (8) hours after the accident or until a post-accident test is completed.

A driver who refuses to submit to a drug or alcohol test (see Refusal to Test definition in Section 2) when required in accordance with 49 CFR Parts 382 and 40 shall not perform or continue to perform safety-sensitive functions and may be subject to discipline, up to and including termination.

Any driver who has engaged in prohibited behavior in this Section (except when a driver has a BAC of .02 or greater, but less than .04), shall be advised by the employer of the resources available in evaluating and resolving problems associated with the misuse of alcohol and/or drugs by providing the driver with a listing of SAP's. **The driver will also be subject to the Disciplinary Action in this policy.**

Complying with this Policy, including consenting to drug and/or alcohol test, queries through the Clearinghouse and reporting positive drug and/or alcohol tests to the Clearinghouse when required in compliance with the law or under this Policy is a condition of employment or continued employment with the company.

**Section 4 - TYPES OF TESTING** - According to Part 382, drivers shall be subject to pre-employment, random, post-accident, reasonable cause, return-to-duty and follow-up drug and/or alcohol testing.

- **PRE-EMPLOYMENT TESTING** – The driver shall be drug tested and the employer must receive the verified negative drug test result for the driver from the MRO/Consortium before allowing a driver to perform a safety-sensitive function for the first time (Attachment A must be completed by the driver).
- **RANDOM TESTING** – Testing rates will meet or exceed the minimum annual percentage rate set each year by the FMCSA Administrator. The current year testing rates can be viewed online at <http://www.dot.gov/odapc/random-testing-rates>.

On a regular basis, the Consortium or the Consortium's service agent will, from the total group, randomly select by a computer-based random number generated program that is matched with the membership numbers, the drivers' names, their social security numbers or other comparable identifying numbers. Under the selection process used, each driver shall have an equal chance of being selected each time selections are made.

The Consortium will notify the employers of the drivers selected. The employer will be given a date before which the driver must be tested per the random selection process. The employer shall ensure that random drug and alcohol tests conducted under the random testing regulations are unannounced. A driver shall only be tested for alcohol while the driver is performing safety-sensitive functions, just before the driver is to perform safety-sensitive functions, or just after the driver has ceased performing such functions.

- **POST-ACCIDENT TESTING** - As soon as possible following an accident involving a CMV on a public road, a post-accident drug and alcohol test shall be conducted when one of the three circumstances below applies:
  1. If an accident involves a fatality.
  2. If a driver receives a citation for a moving traffic violation and the accident involves bodily injury to a person who as a result of the accident immediately receives medical treatment away from the scene of the accident.
  3. If a driver receives a citation for a moving traffic violation and one or more motor vehicles incur disabling damage as a result of the accident, requiring the motor vehicle(s) to be transported away from the scene by a tow truck or other motor vehicle.

If the alcohol test is not conducted within two (2) hours following the accident, a record shall be prepared and maintained why the alcohol test was not promptly administered. If an alcohol test is not conducted within eight hours following the accident, the employer shall cease all attempts to complete the alcohol test and a record shall be prepared and maintained why the alcohol test was not promptly administered. (See Attachment C)

If a post-accident drug test is not conducted within thirty-two (32) hours following the accident, our company shall cease all attempts to conduct the drug tests and prepare and maintain on file a record stating why the drug test was not promptly administered. (See Attachment C)

A driver who is subject to post-accident testing shall remain readily available for such testing or may be deemed by the employer as a refusal to test. Nothing in this Section shall be construed 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 medical care.

The employer shall provide the driver with necessary post-accident information, procedures and instructions prior to the driver operating a CMV, so that the driver will be able to comply with the requirements of this section. (See Attachment D)

Drug and/or breath or blood alcohol tests conducted by federal, state or local officials, having independent authority for the test, shall be considered to meet the post-accident testing requirements, provided such testing conforms to the applicable federal, state or local drug and/or alcohol testing requirements and that the results are obtained by the employer.

- **REASONABLE SUSPICION TESTING** - When the employer's designated person(s) has reasonable suspicion that a driver has violated Section 3 of this Policy, the driver shall be required to submit to an alcohol and/or drug test. The employer's determination that reasonable suspicion exists to require the driver to undergo an alcohol and/or drug test must be based on specific contemporaneous, articulable observations concerning the appearance, behavior, speech, or body odor of the driver. (See Attachment E)

Alcohol testing is authorized only when observations of the driver are made during, just before or just after the period of the workday the driver is required to be in compliance with Part 382. The driver may be required to undergo reasonable suspicion alcohol testing while the driver is performing safety-sensitive functions, just before the driver is to perform safety-sensitive functions, or just after the driver has ceased such functions.

If a reasonable suspicion alcohol test is not conducted within two hours after observing the driver, the employer shall prepare and maintain on file a record stating the reason why the test was not promptly administered. If the test is not conducted within eight hours after observing the driver, the employer shall cease attempts to conduct the test and prepare and maintain on file a record stating the reasons why the test was not administered.

No driver shall report for duty or remain on duty when the employer's designated person(s) has observed the driver using or under the influence of alcohol or impaired by alcohol. The employer shall not permit the driver to perform or continue to perform safety-sensitive functions until an alcohol test is conducted and the driver's alcohol test result is less than .02 or 24 hours have elapsed since the employer's first suspicion of the driver being under the influence of or impaired by alcohol.

The reasonable suspicion observation form must be completed and signed by at least one of the employer's designated person(s) who made the observations either within 24 hours of the observed behavior or before the drug test results are released, whichever is earlier.

- **RETURN TO DUTY TESTING** – When a driver has violated a drug or alcohol regulation, the employer, before returning a driver to duty to perform safety-sensitive functions, shall ensure the driver has followed the procedures outlined in 49 CFR Part 40, Subpart O.

The SAP will provide a follow-up evaluation letter to the employer and clearly state the driver has complied with his/her recommendations for education/treatment. If the employer allows a driver to return to safety-sensitive functions, a return to duty test will be scheduled. The return to duty drug collection is conducted under direct observation.

After voluntarily admitting to alcohol misuse or controlled substance use and demonstrating successful completion of an education or treatment program, a driver shall be subject to a return to duty test under 49 CFR Part 382.121 and required to pass before being returned to work.

If the result is negative, the employee may return to his/her job functions. If a notice of a positive test result is received from the Medical Review Officer following said testing, then the employee will be subject to the disciplinary provisions in Section 12 of this Policy.

- **FOLLOW-UP TESTING** – If the employer allows a driver to return to safety-sensitive functions, follow up testing will be conducted as specified in 49 CFR Part 40, Subpart O and according to the SAP's follow up evaluation letter. The employer will ensure that all follow up drug collections are conducted under direct observation.

## **Section 5 - DRUG TESTING** - Drug testing procedures will be followed in accordance with 49 CFR Part 40.

When a driver arrives at the collection site, the testing process will begin without undue delay. To ensure the security during the testing process, only one collection will be conducted at a time. The driver must have positive identification either by photo identification or by the identification of the driver by the employer's designated representative. The collector will explain the basic collection procedures and show the driver the instructions on the back of the Federal Drug Testing Custody and Control Form (hereinafter called CCF). The driver will be instructed to remove and leave with the collector, or in a mutually agreeable location, any outer clothing along with any briefcase, purse or other personal belongings. The driver may retain his/her wallet.

The driver will be directed to empty his/her pockets and display the items in them. If the collector determines none of the items could adulterate the specimen, the driver may return the items into his/her pockets. If there is material that could adulterate a specimen, the collector must determine whether it was accidentally brought in or intentionally brought in to adulterate a specimen. If it was accidental, the collector will retain the material and return it when the testing process is complete. If it was intentional, a direct observation test will take place immediately.

The collector shall complete Step 1 of the CCF. The driver shall wash and dry his/her hands before providing the specimen, then will have no further access to water or other materials until the specimen is given to the collector. The driver will be instructed to provide at least 45 mL of urine, not flush the toilet and return to the collector with the specimen. The driver will provide the specimen in private, except in the case of an observed or monitored collection. Any conduct that clearly indicates an attempt to tamper with a specimen will cause a new collection under direct observation to take place immediately.

The collector will ensure there is at least 45 mL of urine in the collection container and the temperature of the specimen is within the range of 90-100 degrees. If the temperature is out of that range, a new collection under direct observation will take place immediately. The specimen will also be inspected for unusual color, the presence of foreign objects or material or for other signs of tampering. If it is apparent the driver has tampered with the specimen, a new collection under direct observation will take place immediately.

If a direct observation collection must take place, it must be conducted immediately. All direct observation collections are done without any advance notice to the driver. The collector shall explain to the driver the reason for the direct observation test, except when the employer is required to do so. The collector or an observer must be the same gender as the driver. The same gender collector or observer must request the driver to raise his or her shirt, blouse, or dress/skirt, as appropriate, above the waist; and lower his/her clothing and underpants to show the collector or observer, by turning around, that the driver does not have a prosthetic device. After the collector or observer has determined the driver does not have such a device; the driver may be permitted to return the clothing to its proper position for the observed urination. The collector or observer must watch the urine go from the driver's body into the collection container. An observer will continue to watch the specimen until it is given to the collector.

A monitored collection will only be conducted if a multi-stalled restroom is used and all sources of water or potential adulterants cannot be secured. The collector must be the same gender, unless he or she is a medical professional. An observer must be the same gender. A bluing agent shall be put in the toilet the driver will use. The driver shall provide the urine specimen behind a closed stall door with the collector/observer standing outside of the stall door listening to the driver urinate into the collection container. If the collector/observer hears sounds or makes other observations of the driver attempting to tamper with a specimen, another collection will take place immediately under direct observation.

The tabs on the specimen bottles will be broken in front of the collector and the driver. The driver will give the specimen container to the collector and the collector will pour the urine specimen into the split specimen bottles. The primary specimen shall be at least 30 mL of urine and the split specimen shall be at least 15 mL of urine. If a driver is tested under the company's non-DOT Drug and Alcohol testing program and policy, it will be done completely separate from and after the collection of specimens for testing under the company's DOT Drug and Alcohol Testing program and policy.

The driver should observe the specimen at all times until the lids/caps are secured and the tamper-evident bottle seals are put over the lids/caps (this is for the driver's protection to ensure it is his/her specimen).

The driver is to initial the tamper-evident bottle seals on the bottles for proof that it is her/her specimen. The driver will also be required to sign the CCF as proof that the specimen identified as having been collected is in fact the drivers. The collector will complete the CCF and place the specimen bottles and Copy 1 of the CCF in the pouches of the plastic bag and secure both pouches. The driver will then be dismissed from the collection site.

Both specimens will be sent by overnight delivery to the DHHS/SAMHSA-certified laboratory for testing of the drugs or classes of drugs as identified in 49 CFR Part 40.85.

Before informing any third party about any medication the driver is using pursuant to a legally valid prescription consistent with the Controlled Substances Act, the MRO will allow 5 business days from the date the MRO reported the verified negative result for the driver to have his/her prescribing physician contact the MRO to determine if the medication can be changed to one that does not make the driver medically unqualified or pose a significant safety risk. If, in the MRO's reasonable medical judgement, a medical qualification issue or a significant safety risk remains after communicating with the driver's prescribing physician or after 5 business days, whichever is shorter, the MRO will report to third parties the driver is medically unqualified or poses a significant safety risk if allowed to continue safety-sensitive functions.

Before a laboratory-confirmed positive test, adulterated test, substituted test or invalid test result will be released to the Consortium, the MRO will conduct a verification interview with the driver by telephone unless: the driver declines to discuss the test result; the MRO or the employer cannot make contact with the driver within 10 days of the MRO receiving the laboratory result; or more than 72 hours have passed since the employer has contacted the driver to call the MRO. During the verification process, if the driver can give the MRO a legitimate medical explanation for the positive, adulterated or substituted test result, the MRO will report the verified test result as negative. If the driver cannot give the MRO a legitimate medical explanation, the verified positive test result will be reported as positive and the verified adulterated or substituted test result will be reported as a refusal to test. If the test result is invalid or contains an unexplained interfering substance and the driver cannot give the MRO an acceptable explanation or a valid prescription and the driver does not admit to adulterating or substituting the specimen, the verified test result will be reported as a cancelled test with a second collection to take place immediately on the driver under direct observation. If the driver can give the MRO an acceptable explanation, the verified test result will be a cancelled test with no further testing needed unless a negative result is needed for pre-employment, return to duty or follow-up testing. If the driver admits to adulterating or substituting the specimen, the verified test result will be reported as a refusal to test.

All verified negative, refusal to test (adulterated or substituted), positive, canceled and invalid test results will be released by the MRO to the Consortium, who will forward the results to the employer.

**Dilute Specimens:** The employer has **chosen not / chosen (circle one)** to conduct a second collection on **all / pre-employment, random, return to duty, follow-up (choose all or choose which test will have a second collection)** dilute test results that are negative.

**Shy Bladder:** After a driver's first unsuccessful attempt to provide a minimum of 45 mL of urine, the shy bladder time starts. The collector will document on the remarks line of the CCF and inform the driver of the time in which the 3-hour period begins and ends. Any insufficient specimen shall be discarded. The driver will be urged to drink up to 40 oz. of fluids, reasonably through a period of up to 3 hours; however,

it is not considered a refusal to test if the driver chooses not to drink fluids. If the driver does not provide a sufficient amount of specimen within 3 hours, the collection will be discontinued, and the employer will be notified. The employer will consult with the MRO, then direct the driver to obtain, within 5 working days, an evaluation from a licensed physician, acceptable to the MRO, who has expertise in the medical issues associated with the driver's inability to provide an adequate amount of specimen. The physician must provide to the MRO a written statement of his/her recommendations and the basis for them. The MRO, will seriously consider and assess the physician's recommendations and issue a determination as to 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. If the MRO agrees with the physician's recommendations, the MRO will report the test result as a cancelled test. If the MRO disagrees with the physician's recommendation or determines the employee does not have a medical condition that could have prevented him/her from providing a sufficient amount of urine, the MRO will report the test result as a refusal to test.

Split Specimen Testing: In the event of a verified positive, adulterated or substituted test result, the driver can request the MRO to send the split specimen to a second laboratory to be tested within 72 hours from the time the driver was notified of the result. **The driver shall reimburse the employer for the cost of the split specimen test.**

## **Section 6 - ALCOHOL TESTING** - Alcohol testing procedures will be followed in accordance with 49 CFR Part 40.

If both a drug and alcohol test is to be conducted on the driver, the alcohol test must be completed before the urine collection process begins. A driver shall only be tested for alcohol while the driver is performing a safety-sensitive function, just before a driver is to perform a safety-sensitive function, or just after the driver has ceased performing a safety-sensitive function.

To ensure the security of the alcohol testing site, only authorized personnel shall be allowed to enter the testing site. The BAT/STT shall ensure that the driver is given privacy while an alcohol test is being conducted to prevent unauthorized persons from seeing or hearing the test result. Alcohol testing will be conducted on one driver at a time. The screening test and confirmation test, if needed, will be completed on a driver before the BAT/STT starts an alcohol test on another driver to be tested.

A driver shall appear at the collection site at the time specified by the employer. If the driver does not appear at the specified time, the BAT/STT shall notify the employer to determine how long it should take for the driver to arrive at the collection site. If the driver has not arrived by that time, the BAT/STT will contact the employer to inform him/her the driver has not reported for testing.

When the driver arrives at the collection site, the testing process will begin without undue delay. The driver must have positive identification either by photo identification or by the identification of the driver by the employer representative. The BAT/STT will explain the testing procedures and show the instructions on the back of the DOT Alcohol Testing Form (hereinafter called DOT ATF) to the driver. The BAT/STT shall complete Step 1 on the ATF. The driver will then be directed to complete Step 2 on the DOT ATF and sign the certification. If the driver refuses to sign the certification, the BAT/STT will document on the DOT ATF that the driver has refused to test, and the employer will be immediately notified.

If an ASD is used for the screening test, the BAT/STT will follow the manufacturer's directions for use. If the alcohol concentration is less than .02, The BAT/STT will sign and date Step 3 of the DOT ATF and transmit the alcohol test result using Copy 1 of the DOT ATF by telephone, electronic means, or in person to the employer. The ASD and materials used in the testing process shall be properly disposed of. If the alcohol concentration is greater than or equal to 0.02, the BAT will immediately conduct a confirmation test using an EBT.

If an EBT is used for the screening test, the BAT or the driver will select an individually sealed mouthpiece. The BAT will open the sealed mouthpiece in front of the driver and insert it into the EBT. The driver will be requested to blow steadily and forcefully into the mouthpiece for at least six seconds or until the EBT indicates that enough breath has been obtained. The driver will be shown the breath alcohol test result and the result will be affixed to the DOT ATF with tamper-evident tape.

If the result is less than 0.02 alcohol concentration, the BAT shall sign and date Step 3 on the DOT ATF. The BAT must transmit the alcohol test result using Copy 1 of the DOT ATF immediately by telephone, electronic means or in person to the employer. If the alcohol concentration is 0.02 or greater, a confirmation test shall be conducted with an EBT not less than 15 minutes nor more than 30 minutes after the completion of the screening test. During that time, the driver will be asked not to eat, drink, belch or put anything into his/her mouth to prevent an accumulation of mouth alcohol that could lead to an artificially high reading on the confirmation test. The BAT/STT will note in the remarks on the DOT ATF these instructions were given and will also note on the DOT ATF if the driver chose to ignore the instructions. The confirmation test will still be conducted. If the confirmation test will be conducted at a different site, the BAT/STT or the employer must transport the driver to the testing site. The driver will not be allowed to drive a motor vehicle.

If the confirmation test is conducted more than 30 minutes after the result of the screening test, the BAT shall note in the remarks on the DOT ATF the reason the confirmation test could not be conducted within the 15-30-minute time frame. The confirmation test will still be conducted.

An individually sealed mouthpiece will be opened in front of the driver and attached to the EBT. The BAT and the driver shall read the sequential test number displayed on the EBT. The driver will be requested to blow steadily and forcefully into the mouthpiece for at least six seconds or until the EBT indicates that enough breath has been obtained. The driver will be shown the breath alcohol test result and the result will be affixed to the DOT ATF with tamper-evident tape.

If the confirmation test result is less than 0.02 alcohol concentration, the BAT shall sign and date Step 3 on the DOT ATF. The BAT must transmit the alcohol test result using Copy 1 of the DOT ATF immediately by telephone, electronic means or in person to the employer. If the confirmation test result is 0.02 or greater alcohol concentration, the driver shall be directed to sign Step 4 on the DOT ATF. If the driver

does not sign, the BAT will note in the remarks on the DOT ATF of the driver's failure to sign Step 4. The driver's failure to sign Step 4 will not be considered a refusal to test. The BAT must immediately notify the employer by any means of an alcohol test result of 0.02 or greater to ensure the result is immediately received by the employer.

Inability to Provide an Adequate Amount of Breath: If a driver is unable or alleges, he/she is unable to provide an amount of breath sufficient to give a reading on the EBT, the BAT should again instruct the driver to attempt to provide an adequate amount of breath and the proper way to do so. If the driver refuses to make a second attempt, the BAT shall discontinue the test and immediately notify the employer.

If the driver fails to provide an adequate amount of breath, the BAT shall note the failure on the remarks of the DOT ATF and immediately notify the employer. The employer will then direct the driver to obtain, within 5 days, an evaluation from a licensed physician who is acceptable to the employer and has expertise in the medical issues associated with the driver's inability to provide a sufficient specimen. The employer will tell the physician the driver was required to take a breath alcohol test but was unable to provide a sufficient amount of breath and the consequences for refusing to take the required alcohol test. If the physician determines the driver has a medical condition that could have prevented him/her from providing a sufficient amount of breath, the test will be cancelled. If the physician determines the driver does not have a medical condition that could have prevented him/her from providing a sufficient amount of breath, it will be considered a refusal to test. The employer shall notify the driver of the physician's conclusions.

**Section 7 – CLEARINGHOUSE** - As part of the continuing efforts to promote safe roadways and to ensure only qualified CDL drivers are performing safety-sensitive duties, FMCSA created a database for querying and reporting CDL drivers' compliance with 49 CFR Part 382, including drivers' drug and alcohol testing violations and other pertinent information. Employers are required to query the database on an annual (or more frequent basis) for each current CDL driver, and as part of the pre-employment screening process for each driver applicant.

The employer shall conduct a query of the Clearinghouse for each driver applicant before hiring into a CDL position. Driver consent is required for the query. Each driver applicant must register in the Clearinghouse and execute the FMCSA Clearinghouse electronic specific consent. If a driver applicant refuses consent, the employer cannot hire the driver. When the query results in the driver being qualified under Part 382, the employer may hire the driver. If the query results in the driver being unqualified under Part 382, the employer cannot hire the driver unless all applicable driver qualification requirements are met.

The employer shall query the Clearinghouse at least annually on each driver employed. Driver consent is required. Each driver shall sign a general consent form provided by the employer. The general consent form may be used for multiple Clearinghouse queries and can extend for the tenure of the driver's employment. If the driver refuses consent for the query, the driver will be removed from driving duty and cannot resume driving duty until the query is conducted. If the query results in notice that drug and alcohol violation information exist in the Clearinghouse for the driver, the employer must conduct a full query of the driver's record in the Clearinghouse after obtaining a specific FMCSA Clearinghouse consent executed by the driver via the Clearinghouse.

Employers are also required to report driver specific Part 382 drug and alcohol violations to the Clearinghouse using driver specific identification data including driver name, CDL license number and State of issuance, and driver date of birth. No driver consent is required for such reporting.

In order to comply with the Clearinghouse requirement, the Employer shall report the following Part 382 drug alcohol testing and violation information to the Clearinghouse within three (3) business days of obtaining the information:

- Alcohol confirmation test with a concentration of 0.04 or higher.
- Refusal to test (alcohol) as specified in 49 CFR 40.261.
- Refusal to test (drug) not requiring a determination by the MRO as specified in 49 CFR 40.191.
- Actual knowledge, as defined in 49 CFR 382.107, that a driver has used alcohol on duty, used alcohol within four hours of coming on duty, used alcohol prior to post-accident testing, or has used a controlled substance.
- Negative return-to-duty test results (drug and/or alcohol testing, as applicable)
- Completion of follow-up testing requirements.

Additionally, the Employer's Medical Review Officer (MRO) must report the following Part 382 violations to the Clearinghouse within two (2) business days:

- Verified positive, adulterated, or substituted drug test results.
- Refusal to test (drug) requiring a determination by the MRO as specified in 49 CFR 40.191.
- Substance Abuse Professionals (SAP) must report successful completion of treatment and/or education and the determination of eligibility for return-to-duty testing to the Clearinghouse within one business day.

As set forth above, a driver must register in the Clearinghouse in order to provide specific consent for the pre-employment query. After registering, a driver will have access to his/her Clearinghouse record. The driver may designate how he or she receive notices and communication from the FMCSA clearinghouse, including via US mail, or designated electronic means (email/text, etc.). Any driver or authorized representative of the driver may also submit a petition to the FMCSA contesting the accuracy of information in the Clearinghouse, using the procedures specified in 49 CFR Part 382.717.

**Section 8 - ACCESS TO RECORDS** - All records pertaining to the employer's drug and alcohol testing program shall be maintained in a secure location with controlled access. Access and release of drug and alcohol testing records shall be in accordance with 49 CFR Parts 382 and 40.

Upon written request, drivers are entitled to copies of their records pertaining to their use of drugs or alcohol, including any records pertaining to their drug and alcohol tests. Drivers are also entitled to have access to any pertinent records directly related to their given drug or alcohol specimen testing.

Records to subsequent employers shall be made available upon receipt of a specific written authorization from the driver. The employer will only disclose information that is expressly authorized by the terms of the driver's request. The employer shall provide such information and results requested promptly to the subsequent employer at no charge.

Records shall be made accessible pertaining to the employer's drug and alcohol testing program at all of the employer's facilities to the U.S. Secretary of Transportation, any DOT agency, or any state or local officials with regulatory authority over the employer's drivers.

**Section 9 - EMPLOYEE ASSISTANCE PROGRAM** - Each driver must sign an Acknowledgment (Attachment G) that they received a copy of the Drug & Alcohol Abuse Policy that complies with Part 382.601. Drivers shall be made aware of educational information concerning the effects and consequences of drug and alcohol use on the driver's personal health, safety and work environment, including signs and symptoms of a drug or alcohol problem.

It is the driver's responsibility to report to work fit for duty and remain fit throughout the workday in order to perform in a safe, efficient and productive manner. The driver will also be made aware of the signs and symptoms of a drug and/or alcohol problem (his/hers or a co-worker's) and shall be made aware of ways to intervene when a problem is suspected, including referral to management, referral to an employee assistance program (if available from the employer), and referral to drug and/or alcohol abuse hotlines and help-lines, or local Alcoholics Anonymous or Narcotics Anonymous groups. Referrals to local Alcoholics Anonymous or Narcotics Anonymous groups or drug and/or alcohol abuse hotlines and help-lines are made available as a reference only: Alcoholics & Narcotics Help Line (888) 206-7272; Focus on Recovery Help-Line for Alcohol and Drug Abuse (800) 234-0286; or the Center for Substance Abuse Treatments Drug Information, Treatment, and Referral Hotline (800) 662-4357.

A driver may come forward for assistance with a drug and/or alcohol use problem, if it is before a driver's notification of an impending drug and/or alcohol test and before the driver performs a safety-sensitive function. The employer shall provide the driver with referrals of where the driver can go for assistance and give the driver sufficient opportunity to complete the counseling, education or rehabilitation required by a drug and alcohol professional; e.g., a qualified drug and alcohol counselor or substance abuse professional.

No adverse action will be taken against the driver. The driver will not perform safety-sensitive functions until the employer is satisfied that the driver has been evaluated and has successfully completed the counseling or treatment requirements and the driver tests negative on a return to duty drug and/or alcohol test. The employer may require follow up testing after the driver returns to duty. All costs associated with the evaluation and rehabilitation will be the responsibility of the driver. The return to duty testing and any follow up testing conducted shall be pre-paid by the employer, to be immediately reimbursed by the driver.

**Section 10 - GENERAL INFORMATION - PRESCRIPTION MEDICATIONS, EXPECTATION OF PRIVACY AND SEARCH POLICY**-The unlawful manufacture, distribution, dispensation or possession of drugs are prohibited on all employer premises, at any location the driver is performing work for the employer or in any employer-owned or leased commercial motor vehicle. If the employer proves a driver is engaging in any of these activities, the driver shall be subject to termination. Any driver who faces criminal action as a result of engaging in these activities will be immediately suspended until the employer makes a good faith determination regarding whether the conduct is a violation of this policy and what, if any, discipline, up to and including termination, is appropriate.

Prescription Medication and Over-the-Counter Drugs. Drivers are prohibited from using drugs listed in 21 CFR 1308.11, Schedule I, regardless of whether the drug is obtained legally or not. Non-Schedule I drugs, including prescription medication and over-the-counter drugs that are (1) administered by or under the direction of a licensed medical practitioner who is familiar with the driver's medical history and assigned duties; and (2) the licensed medical practitioner has advised the employee that the substance will not adversely affect the employee's ability to safely perform his/her job functions or operate a commercial motor vehicle.

A driver shall not report for duty or remain on duty requiring performance of safety-sensitive functions when the driver uses a non-Schedule I drug or substance that is identified in the other Schedules in 21 CFR Part 1308, except when the use is pursuant to the instruction of a licensed medical practitioner who is familiar with the driver's medical history and has advised the driver that the substance will not adversely affect the driver's ability to safely operate a commercial motor vehicle (CMV). If the substance should adversely affect his/her ability to perform his/her job functions, or, if the employee does not promptly provide written verification from the prescribing physician or pharmacist, the employer will temporarily remove or reassign the employee from his/her job functions and may be subject to discipline up to including termination, if deemed appropriate.

All prescription and over the counter drugs must be kept in their original packaging or container and must be possessed and stored in compliance with applicable laws. An employee who fails to adhere to this provision may be subject to disciplinary action, up to and including immediate termination of employment. Additionally, consuming or possessing a prescribed drug where the prescription has

expired, that is not one's own prescription and/or abusing one's own prescription is not lawful and will subject the employee to disciplinary action, up to and including immediate termination of employment.

Notwithstanding the foregoing, the Company does endeavor in good faith to engage in the interactive reasonable accommodation process with any employee lawfully taking medication for an underlying medical condition, to the extent required or permitted by applicable disability laws.

**No Expectation of Privacy and Workplace Searches** – The employer may conduct reasonable searches for illegal drugs or alcohol on the employer's workplace, premises or in employer-owned or leased motor vehicles. Searches of drivers and their personal property may be conducted when there are reasonable grounds to believe the driver is in violation of this policy. All drivers are expected to cooperate in such searches. A driver's refusal to cooperate or consent to such searches may result in disciplinary action, including termination.

Nothing in this policy is intended to prohibit or interfere with an employee's right to engage in lawful protected concerted activities, including discussion of any term or condition of their employment with others, to the extent permitted by law.

## **Section 11 - INFORMATION CONCERNING THE EFFECTS OF ALCOHOL AND CONTROLLED SUBSTANCES USE ON AN INDIVIDUAL'S HEALTH, WORK & PERSONAL LIFE**

- Employees who abuse drugs and/or alcohol cause more absenteeism, loss in work productivity, more accidents and more medical claims. This results in a loss of \$140 billion to American businesses each year. Compared with the average employee, a typical drug-using employee in the workplace is:

- 2.5 times more likely to be absent 8 days or more each year.
- 3 times more likely to be late for work.
- 3.6 times more likely to be involved in workplace accidents.
- 5 times more likely to file a workers' compensation claim.
- Incur 300% higher medical claims.

**Marijuana / Cannabis** - The common name for the drug made from chopped leaves, stems and flowering tops of a cannabis plant. Some common street names for marijuana are "weed", "flower", "dope", "blunt", "joint", "pot", "reefer." Marijuana can be smoked or eaten. Marijuana is a depressant and mind-altering drug. It works on the brain and causes hallucinations. A person using marijuana is more than likely to experience slowed reaction time, reduced concentration, distorted vision and depth perception, is slower in making decisions, often drives slower than the speed limit, is unable to correctly measure distance and time, and has impaired short-term memory.

Some of the symptoms and signs of marijuana use are:

- |  |                 |                    |   |
|--|-----------------|--------------------|---|
| Short-term memory loss                                       | reddened eyes   | moodiness          | disruption of production or manufacturing process |
| Increased appetite   | slowed thinking | loss of memory     | disregard for safety of self or others            |
| Increased heart rate   | dilated pupils  | performance issues | demeanor, irrational or unusual behavior          |
| Negligence or carelessness                                   |                 |                    | involvement in an accident                        |
| Symptoms of speech, physical dexterity, agility coordination |                 |                    |   |

Some visible signs noted for the presence of marijuana are:

- |             |             |                          |  |
|-------------|-------------|--------------------------|--|
| Roach clips | bongs       | cigarette rolling papers | concentrate (i.e. wax, shatter, butter, oil) |
| Vape pen    | small pipes | one hitters              | vape pen cartridge with oil                  |

The main psychoactive part of marijuana is tetrahydrocannabinol (THC). The impact of marijuana use depends on the quality of the drug, the tolerance of the user, the dosage or amount taken and the method it is used. Marijuana and alcohol together will magnify the effects of both many times. Chronic marijuana smoking could cause severe irritation of the lungs, heart problems, reduced immune system and possible brain damage.

**Phencyclidine** - It was developed originally as an anesthetic but was taken off the market because it caused hallucinations. The most common street names for phencyclidine are "PCP", "angel dust", "crystal" and "tea". Phencyclidine is sold in various forms, mainly as a white, off-white or brown crystal-like powder, tablet or capsule. It can be ingested by mouth, snorted or injected intravenously. It can also be smoked when combined with marijuana or tobacco. A person using phencyclidine is more than likely to experience impaired coordination and dulled senses, a sense of power, drowsiness, aggressive behavior, hallucinations and blurred or double vision. In some cases, a person could even experience convulsions, coma, ruptured blood vessels in the brain, heart and lung failure, or even death.

Some of the symptoms and signs of phencyclidine use are:

- |                      |                          |            |
|----------------------|--------------------------|------------|
| Confusion            | increased blood pressure | anxiety    |
| panic                | dizziness                | drowsiness |
| hallucinations       | disorientation           | sweating   |
| Increased heart rate | aggressive behavior      |            |

Some of the signs for the presence of phencyclidine are:

- |  |          |          |
|--|----------|----------|
| Needles                                | capsules | syringes |
| Plastic packets with powdery substance | tablets  |          |

Phencyclidine is water soluble but still could be retained in the body's system for days, depending on the quality of the drug, the tolerance of the user and the dosage or amount taken. Phencyclidine and alcohol together are dangerous and could cause an overdose. Chronic

phencyclidine use could cause hallucinations, psychosis, convulsions, coma or possible death.

**Cocaine** - Cocaine comes from the leaves of coca plants. Some common street names for cocaine are “coke,” “crack,” “rock,” “snort,” “toot,” “blow,” and “snow.” Cocaine can be snorted, injected intravenously, smoked or freebased (heating the cocaine and inhaling the vapors). Cocaine stimulates the body’s central nervous system. Psychological dependence on the drug can be high with repeated use. A person using cocaine is more than likely to experience impatience, anger, over stimulated reflexes, distorted vision and depth perception, slow reaction time and false sense of security and alertness. In some cases, a person could even experience seizures, heart attacks, convulsions, hallucinations and death.

Some of the symptoms and signs of cocaine use are:

Dilated pupils	nose bleeds	paranoia
Irritability	runny nose	needle marks
Increased blood pressure	hallucinations	restlessness
Talkativeness	anxiety	weight loss
Depression	nervousness	

Some of the signs for the presence of cocaine are:

Small spoons	mirrors	needles
Small plastic bags or vials	syringes	small drinking straws
Razor blades	rolled paper currency	small butane torch

Cocaine is water soluble but still could be retained in the body’s system for several days, depending on the quality of the drug, the tolerance of the user and the dosage or amounts taken. Cocaine causes the most mental dependency of any known drug. Cocaine and depressants, taken together, can be very dangerous or even fatal. Intravenous users have a high risk of contracting liver disease, tetanus, serum hepatitis and AIDS from the use of needles. Chronic cocaine use could cause seizures, heart attacks, strokes, convulsions, depression or death.

**Amphetamines**- Amphetamines are manufactured central nervous system stimulants used most often by individuals to stay awake. Psychological dependence on the drug can be high with repeated use. Some common street names for amphetamines are “speed,” “crank,” “meth,” “crystal,” “diet pills,” “bennies” and “uppers.” In pure form, amphetamines are yellowish crystals in which some are made into tablets, pills or capsules. Amphetamines can be ingested in tablet, pill or capsule form, snorted, or injected intravenously if in powder or liquid form. A person using amphetamines is more than likely to experience delayed reaction time, over stimulated reflexes, anxiety, irritability, distorted vision and depth perception, and a false sense of security and alertness.

Some of the symptoms and signs of amphetamine use are:

Loss of appetite	weight loss	sweating
Paranoia	dilated pupils	increased blood pressure
Dry mouth	talkativeness	sleeplessness
Nervousness	needle marks	depression
Hallucinations	anxiety	

Some of the signs for the presence of amphetamines are:

Pills	small butane torch	tablets
Rolled paper currency	capsules	small drinking straws
Small plastic bags or vials	razor blades	needles
Syringes		

Amphetamines are water-soluble, but still could be retained in the body’s system for several days depending on the quality of the drug, the tolerance of the user and the dosage or amount taken. Chronic amphetamine use could cause physical collapse, delusions, hallucinations, brain damage, heart damage, toxic psychosis or death.

**Opioids** - Some opioids come from the seed pod of the Asian poppy. Other opioids are synthesized or manufactured. Psychological dependence can be high with repeated use. Some common street names are “horse,” “junk,” “smack,” “downers,” “M,” “yellow jackets,” “blues” and “ludes.” Opioids are in many different compounds and forms. The most common are the pills, tablets or capsules. Other compounds and forms are in liquid or powder form. Opioids can be injected, smoked or injected intravenously. A person using opioids is more than likely to experience distorted sense of time and distance, slowed reflexes, difficulty focusing, drowsiness and little or no concentration.

Some of the symptoms and signs of opioid use are:

Nausea	needle marks	loss of appetite
Confusion	drowsiness	cold or moist skin
Depression	short attention span	reduced pain
Memory loss	constricted pupils	sweating
Diarrhea	vomiting	

Some of the signs for the presence of opioids are:

Pills	bottle caps	tablets
Small packets	capsules	eye droppers
Needles	small spoons	syringes

Opioids are water soluble, but still could be retained in the body's system for one to several days, depending on the quality of the drug, the tolerance of the user and the dosage or amount taken. Opioids taken with alcohol and other depressant drugs magnify the effects of the opioids and could lead to overdoses. Intravenous users have a high risk of contracting liver disease, tetanus, serum hepatitis and AIDS from the use of needles. Chronic opioid use could cause loss of consciousness, convulsions, coma or death.

Alcohol - Some common street names for alcohol are "booze," "juice," "brew," "sauce" and "hooch." As a rule, a drink or two will create a feeling of well-being. What determines the rate of metabolism in the body and how fast it dissipates the alcohol depends on the altitude, the individual's body weight, metabolism, stomach content, gender, and whether the individual is sick or healthy, rested or tired. After the first drink or two, impairment begins, depending on the factors stated above. When the individual consumes alcohol that produces physical or mood-altering effects, it becomes a substance of abuse. A person using alcohol is more than likely to experience blurred or distorted vision, impaired reaction time, impaired judgment, anger, nausea, drowsiness and aggressiveness.

Some of the symptoms and signs of alcohol use are:

Slurred speech	hostility	odor on breath
Insomnia	flushed skin	loss of concentration
Glazed eyes	unsteadiness	blackouts
Memory loss	drowsiness	incoherence

Chronic alcohol use could cause brain damage, neurological damage, liver damage, pancreas and kidney damage, heart problems, strokes, cancer, coma, toxic psychosis and possible death.

## **Section 12 - DISCIPLINARY ACTION (Circle the Option 1, 2 or 3 that will apply for a driver who has violated a drug and/or alcohol violation. Then circle Option A or B, to identify who will pay for the return to duty and follow up testing.)**

**OPTION 1 (if the driver violates a drug or alcohol regulation, they are terminated)** - The employer will provide the driver who has violated a drug and/or alcohol regulation with names and phone numbers of SAP networks that will offer qualified SAPs available geographically to the driver. **The driver will be terminated.**

If the employer chooses to rehire the driver for safety-sensitive functions, the driver must follow the procedures outlined in 49 CFR Part 40. The driver must test negative on a return to duty drug test and/or less than 0.02 on a breath alcohol test before returning to safety sensitive functions. The employer shall conduct follow up testing on the driver as specified in the SAP follow up evaluation letter. The employer will ensure that the return to duty and all follow up drug collections are conducted under direct observation.

**OPTION 2 (if the driver violates a drug or alcohol regulation a second time, they are terminated)** - The employer will provide the driver who has violated a drug and/or alcohol regulation the first time with names and phone numbers of SAP networks that will offer qualified SAPs available geographically to the driver. The driver must follow the procedures outlined in 49 CFR Part 40. The driver must test negative on a return to duty drug test and/or less than 0.02 on a breath alcohol test before returning to safety-sensitive functions. The employer shall conduct follow up testing on the driver as specified in the SAP follow up evaluation letter. The employer will ensure that the return to duty and all follow up drug collections are conducted under direct observation.

The employer will provide the driver who has violated a drug and/or alcohol regulation a second time with names and phone numbers of SAP networks that will offer qualified SAPs available geographically to the driver. **The driver will be terminated.**

**OPTION 3 (if the driver violates a drug or alcohol regulation a third time, they are terminated)** - The employer will provide the driver who has violated a drug and/or alcohol regulation the first time with names and phone numbers of SAP networks that will offer qualified SAPs available geographically to the driver. The driver must follow the procedures outlined in 49 CFR Part 40. The driver must test negative on a return to duty drug test and/or test less than 0.02 on a breath alcohol test before returning to safety-sensitive functions. The employer shall conduct follow up testing on the driver as specified in the SAP follow up evaluation letter. The employer will ensure that the return to duty and all follow up drug collections are conducted under direct observation.

The employer will provide the driver who has violated a drug and/or alcohol regulation a second time with names and phone numbers of SAP networks that will offer qualified SAPs available geographically to the driver. The driver must follow the procedures outlined in 49 CFR Part 40. The driver must test negative on a return to duty drug test and/or test less than .02 on a breath alcohol test before returning to safety-sensitive functions. The employer shall conduct follow up testing on the employee as specified in the SAP follow up evaluation letter. The employer will ensure that the return to duty and all follow up drug collections are conducted under direct observation.

The employer will provide the driver who has violated a drug and/or alcohol regulation a third time with names and phone numbers of SAP networks that will offer qualified SAPs available geographically to the driver. **The driver will be terminated.**

**OPTION A** - All costs associated with the SAP evaluations, rehabilitation, return to duty testing and follow up testing will be the responsibility of the driver. The return to duty and follow-up testing costs shall be pre-paid by the employer, to be immediately reimbursed by the driver.

**OPTION B** - All costs associated with the SAP evaluations and rehabilitation will be the responsibility of the driver. The return to duty and follow up testing costs shall be paid by the employer.

***THIS IS NOT AN EMPLOYMENT CONTRACT***