

This document is designed to acquaint readers new to workplace drug testing with the basics and the current status of drug testing services available in the market. It is also designed to assist all readers - new to and experienced with drug testing - with how terms and basics are applied to MultiCare Occupational Medicine's drug & alcohol test program.

It is not intended to be a substitute for legal advice about employment law or federally regulated workplace drug testing. Nor does it cover drug testing for non-workplace reasons, such as ordered by courts or law enforcement.

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How Long will Results Take?

This section applies only to MultiCare OccMed "House" drug test programs resulted through the MyeScreen web portal. Contact your Lab or TPA for programs managed by others. Days are "business days", Monday-Friday.

Express Test Negative results:

- Clinic collections: Generally within 10-20 minutes of the collection.
- After Hours Mobile Collections: Generally the next morning (business day)

Express Sent to Lab, and all Lab-Based results:

- Lab Negatives: 1-3 days from collection date.
- Positives and MRO Negatives: 6-10 days from collection date.

Why do lead times vary? Lead times are generally consistent despite an explosion of demand for drug testing in recent years, but they are impacted by multiple factors:

Day and time of the collection: Specimens sent to the Lab are shipped FedEx and arrive the next business morning. Collections done late in the day may ship the following day and arrive at the Lab the day after that. The long example is a sample collected late Friday may not ship until Monday, and arrive at the Lab Tuesday morning.

Lab volume: Lab testing is generally complete 1 day following arrival at the lab. Occasionally it is done the same day as arrival or 2 days after arrival, if volumes are lower or higher than normal, respectively. Negatives are available to the employer at that time. Positives are referred to MRO.

MRO: The MRO generally results in 3 business days, depending on how quickly the MRO can reach the donor about possible prescriptions to explain a positive lab results, and again, on volumes at the time.

Regardless of test type, only the MRO provides positive results and consults employers about results.

Categorizing Drug Testing

Drug testing can be categorized in several independent ways.

- DOT vs. Non-DOT
- Express vs. Lab-Based
- Clinic House Account vs. Collection Only Accounts

DOT vs. Non-DOT

- **DOT Drug Testing:** Common name for Federal Drug Testing. Testing for Federal employees and non-Federal jobs subject to DOT regulated mandatory drug testing, including commercial truck drivers, pilots, and merchant marine. The entire process is regulated per DOT rule 49, CFR Part 40. Federal regulation supersedes state and municipal regulations regarding drug testing for jobs subject to Federal drug testing.
- **Non-DOT Drug Testing:** Refers to all employment drug testing not regulated by DOT / Federal Gov.
 - DOT procedures remain a significant influence to policy and practice. However, employers have wide latitude to determine drug testing policy, including what drugs to test for, within the laws applicable in their State.
 - Collection Site Procedures: While not required by regulation, MultiCare OccMed follows DOT collection procedures for non-DOT tests, except for the use of non-Federal CCFs and where Express Testing is used.

Express vs. Lab-Based Testing

- **Express Testing:** Also known as “rapid” or “instant” testing. Urine drug testing using a collection cup manufactured to react to a specific panel of drugs. Qualitative results (i.e. not metrics from laboratory analysis) are determined immediately, either manually read by the collector (e.g. eScreen “mCup” offered by MultiCare OccMed), or electrically read by a device (e.g. eScreen “eCup” offered by MultiCare OccMed, read by the eReader).
 - **Definitively negative results:** Are resulted following collection, frequently within minutes.
 - **Non-negative & inconclusive results:** Are sent to a SAMHSA certified lab for testing. The result is sent to the employer following lab testing and, if required, MRO review.
 - **No custom test panels:** The special cups are manufactured for specific test panels. Offerings vary from lab to lab, which typically includes a basic 5-panel and one or more expanded panels determined by the lab (see “Test Panels”)
 - **Only Non-DOT:** DOT regulations do not permit express testing.
- **Lab-Based Testing:** The “traditional” drug test method is to use a simple collection cup and send the specimen to a SAMHSA certified lab for exact testing.
 - **Negative results:** Can be made available to the employer immediately after lab analysis is complete.
 - **Non-negative results:** Are referred to MRO review.
 - **Required for DOT Tests:** DOT requires Lab-Based Testing. Express testing is not permitted.
 - **Custom test panels possible:** While not practical to order on a test by test basis, it is practical to set up custom test panel specifications in advance for on-going use (see “Test Panels”).

“House Account” vs. “Collection Only Account”

- **House Account:** Where the collection site – like MultiCare Occupational Medicine clinics – provides the employer with collection, lab analysis, MRO and resulting. At MultiCare OccMed, our certified technicians conduct the collection procedure, and we purchase Lab services, MRO and web portal resulting technology from eScreen/Alere.
- **Collection Only Account:** Where the collection site – like MultiCare OccMed clinics – provides collection services only billed to either the employer or more commonly, a TPA. Lab services, MRO and resulting are provided by others, most commonly a TPA (see “TPA”).

Who’s Who in the Drug Test Process

Donor: Candidate or current employee being tested for drugs.

Employer: The organization ordering the drug test for a candidate or existing employee.

DER (Designated Employer Representative): The person at the employer who receives drug test results.

Collector: Certified technician providing the collection process. This includes:

- Donor instructions, processing the specimen and custody control form (paper or electronic) to protect the chain of custody, sending the specimen to the lab for analysis.
- In express testing, the collector has the additional responsibility to use specific special supplies, equipment and procedures for an initial read immediately following collection. (See “Express Testing”).

Collection site: Organization employing the Collector. Example: a MultiCare Occupational Medicine clinic.

Lab: A SAMHSA-HHS certified laboratory which analyzes specimens while protecting the chain of custody. The lab maintains separate accounts with a specific MRO for each employer drug test program.

MRO (Medical Review Officer): A physician licensed to interpret and evaluate drug test results. An MRO is designated to review drug lab results and issue a final result for a specific lab account. MRO is actively involved in positive lab results. Depending on specific drugs and levels, the MRO may contact the donor to discuss legitimate prescriptions that will explain the lab result, and issue a “negative” test result. **Only the MRO issues positive final results.** The MRO reviews all DOT tests for proper administrative and chain of custody process. MultiCare OccMed uses eScreen’s national MRO office.

SAMHSA (Substance Abuse and Mental Health Services Administration): A branch of the US Dept of Health and Human Services (HHS). SAMHSA regulates and administers the Federal Workplace Drug Testing program, which provides guidelines for workplace drug testing and oversight of certified drug testing laboratories.

Resulting organization: The organization responsible for providing results to the employer DER. For MultiCare OccMed “House” accounts, we deliver results via the MyeScreen web portal, supplemented by our Toxicology Coordinator, Jennifer Cabico. For collection only accounts, this is usually the TPA (Third Party Administrator).

Random & Consortium Manager: Organization managing random selection of donors from a pool of employees for drug testing programs, and consortium services for smaller companies (multiple companies’ employee lists pooled together). Usually either the collection site, the employer, or a TPA.

TPA (Third Party Administrator): An organization other than the lab or collection site managing a drug testing programs on behalf of an employer. They generally provide resulting, random & consortium services, and contract with collection sites and labs for those services. They generally bill the employer for all parties' services.

What's What in the Drug Test Process

CCF (Custody Control Form): A uniquely numbered document used to track the chain of custody for one specific drug test specimen. A copy is provided to the Donor, Collection Site, Employer, Lab (accompanies the specimen), and the MRO.

- **Paper CCFs:** Traditional paper CCFs are multipart NCR forms provided by the lab where the specimen will be sent. They are most commonly pre-printed for a specific employers' drug test program.
- **eCCF (Paperless) Non-DOT Tests:** The CCF may be managed electronically for Non-DOT tests. For example via eScreen at MultiCare OccMed. i.e. "paperless CCF" or "eCCF"
- **eCCF (Paperless) DOT Tests:** DOT approves certain lab systems to use paperless CCFs. Alere/ eScreen, the eCCF leader used by MultiCare OccMed, was the first laboratory to be approved by DOT for eCCFs.

COC (Chain of Custody Form): Another abbreviation / name for CCF.

Test Reasons: The CCF requires the collector to choose what reason the employer ordered the test from the following list:

- Pre-Employment
- Random
- Reasonable Suspicion/For Cause
- Post-Accident (injury and/or damage to property)
- Return to Duty
- Follow-Up
- Other (specify)

Reasons for DOT testing are regulated. Refer to DOT rule 49, CFR Part 40. Non-DOT test reasons are driven by company policy within the laws in their State.

Test Panel: The list of drugs a specimen is to be tested for (See chart: Drug Names and Abbreviations for a complete list of drugs in our menu of test panels)

- **Basic 5-Panel:** Also known as the SAMHSA 5. The original list of five drugs tested for under SAMHSA guidelines. The most common and only "standard" Non-DOT test panel. It tests for:

THC	Tetrahydrocannabinol (Marijuana)
COC	Cocaine
OPI	Opiates (Codeine/Morphine)
PCP	Phencyclidine (Angel dust)
AMP	Amphetamines (Express 5-panel tests specifically for mAMP, methamphetamines)
- **DOT Panel:** The USDOT regulated test panel. Basic 5-panel plus additional drugs. DOT has added drugs several times in recent history. A Non-DOT "Mirror" or "Look-A-Like" is the same test, but not reported to the Federal Government.
- **Expanded Panels:** Generally refers to a Non-DOT test which includes a Basic 5-panel plus additional drugs. While SAMHSA publishes "typical" expanded panels, there is no regulated or market driven standard for expanded panels. For example, what is included in a "10-Panel" varies among programs offered by Labs, TPAs, and Collection Sites. In fact, drugs in the Express and Lab-Based 10-panels offered by the same organization are frequently different.

- **Custom Test Panels:** A test panel specified by an employer or employers, which is different from the vendors' standard test panel offering. MultiCare OccMed offers custom test panels to fit employer specifications.

Cutoff levels: The maximum level of a drug present in a specimen, above which is considered positive. Most commonly, cutoff levels published by SAMHSA are used, except DOT B Bottle Tests (See "B Bottle Testing")

- **Unit of measure:** nanograms per milliliter (ng/ml). The unit is small: billionths of a gram per thousandths of a liter.
- **Initial cutoff level:** The cutoff level for initial specimen testing. Positive results then undergo Confirmatory testing.
- **Confirmatory cutoff level:** The cutoff level for confirmatory testing if a test is positive in initial testing.

Specimen: The specimen collected to analyze for drugs.

- **Urine:** The vast majority of employment drug testing. It is widely available with competitive pricing.
- **Hair:** Hair testing is an option when an employer wants to check for drug use farther back in time. It is more expensive and less available.

Split Specimen: Also called Split Sample. Where a urine sample is split into two sealed specimen bottles, A and B.

- **Required for DOT:** DOT requires split specimens.
- **Custom order for Non-DOT:** Non-DOT tests are single specimen tests unless split specimens are ordered by the employer. Split specimen non-DOT tests are uncommon.
- **"B" Bottle Retest:** Refers to the process under DOT regulations where the donor may request the second specimen, the "B" bottle, be tested at a different laboratory.
 - The request must be made by the donor through the MRO, and cannot be refused.
 - The sealed B bottle is sent from the original lab to a different lab for testing, protecting the chain of custody.
 - The employer is generally billed for the test. They may seek reimbursement from the donor.
 - Cutoff levels do not apply to B bottle tests. Rather the "limits of detection" apply. This means that cutoff levels are considered. Any level detected is considered positive.
 - The process expensive because it is uncommon and has extra steps, overnight shipping, etc.

Result Certificate: The document issued by the lab/medical review officer with the test result. Generally, these will include test cutoff levels and the MRO's ruling as a positive or negative test. *It will not include actual lab results.* Employers can contact the MRO office to discuss actual levels for positive tests. However, risk management and legal considerations should be carefully weighed before doing so.

Collection supplies: Generally, the cup, custody control form (CCF) and shipping supplies needed to provide collection services. The CCF may be managed electronically, i.e. "paperless CCF". At MultiCare OccMed, we use eScreen to manage the collection process, including non-DOT CCFs

Breath Alcohol Testing

Breath Alcohol Test (BAT) is also called Evidentiary Breath Test (EBT). Measures blood alcohol (ethanol) by analyzing a donor's forced exhaled breath using a device used by a certified Breath Alcohol Technician.

- Unlike a urine or hair drug test, it is considered a measure of current impairment, not past use.
- Results are reported as a quantity (number), known as the Blood Alcohol Concentration (BAC), which shows the level of alcohol in the blood at the time the test was taken.
- The legal BAC limit for driving is 0.08. However under DOT regulations, and commonly used Non-DOT employer policies, BAC of 0.02 is high enough to stop someone from performing a safety-sensitive task for a specific amount of time and a BAC reading of 0.04 or higher is considered a positive test and requires immediate removal from safety-sensitive functions.
- BAT/EBT testing is regulated for certain positions under DOT rule 49, CFR Part 40, and is also a common component of non-regulated employer workplace drug testing policies.

Web Resources

US Department of Labor Drug-Free Workplace Advisor	http://www.dol.gov/elaws/asp/drugfree/drugs/dt.asp
SAMHSA Drug Testing Programs	http://www.samhsa.gov/workplace
DOT Workplace Drug and Alcohol Testing Programs	http://www.dot.gov/odapc/part40