

ALCOHOL AND DRUG RULES: AN OVERVIEW

<http://www.fmcsa.dot.gov/safety-security/safety-initiatives/drugs/engtesting.htm>

The following is a general overview of the Federal Motor Carrier Safety Administration's (FMCSA) alcohol and drug testing rules for persons required to obtain a commercial driver's license (CDL). The information is intended to provide a general summary of the rules; it should not be relied upon to fulfill all legal requirements stipulated in the regulations. It does not contain many of the requirements or special circumstances detailed in the FMCSA and DOT rules.

For more comprehensive, detailed rules, JJ Keller & Associates publishes a Federal Motor Carrier Safety Regulations Handbook as prescribed by: U.S. Department of Transportation Federal Motor Carrier Safety Administration Parts 40, 325. 350-399.

WHAT ARE THE RULES?

The FMCSA regulations require alcohol and drug testing of drivers, who are required to have a CDL. The DOT rules include procedures for urine drug testing and breath alcohol testing. Urine drug testing rules were first issued in December 1989. In 1994, the rules were amended to add breath alcohol testing procedures. In the years following the implementation of the drug and alcohol testing requirements, a number of factors including changes in testing technology, and the issuance of a number of written interpretations, required OST to review and revise the rules. In December of 2000, OST published final rules that incorporated these factors, as well as input from the public sector, into the existing drug and alcohol testing regulations. In August of 2001, the FMCSA revised modal specific drug and alcohol testing regulations published in 49 Code of Federal Regulations Part 382 to reflect the revisions made by OST.

WHO IS AFFECTED BY THESE RULES?

The FMCSA rules apply to safety-sensitive employees, who operate commercial motor vehicles requiring a CDL. *Examples* of drivers and employers that are subject to these rules are (the following does not represent a complete listing):

- ✓ Anyone who owns or leases commercial motor vehicles
- ✓ Anyone who assigns drivers to operate commercial motor vehicles
- ✓ Federal, State, and local governments
- ✓ For-Hire Motor Carriers
- ✓ Private Motor Carriers
- ✓ Civic Organizations (Disabled Veteran Transport, Boy/Girl Scouts, etc.) Churches

WHAT ALCOHOL USE IS PROHIBITED?

Alcohol is a legal substance; therefore, the rules define specific prohibited alcohol related conduct. Performance of safety-sensitive functions is prohibited:

- While using alcohol.
- While having a breath alcohol concentration of **0.04 percent** or greater as indicated by an alcohol breath test.
- Within four hours after using alcohol.

In addition, refusing to submit to an alcohol test or using alcohol within eight hours after an accident or until tested (for drivers required to be tested) are prohibited.

WHAT ALCOHOL TESTS ARE REQUIRED?

The following alcohol tests are required:

- ✓ **Post-accident** - conducted after accidents on drivers whose performance could have contributed to the accident (as determined by a citation for a moving traffic violation) and for all fatal accidents even if the driver is not cited for a moving traffic violation.
- ✓ **Reasonable suspicion** - conducted when a trained supervisor or company official observes behavior or appearance that is characteristic of alcohol misuse.
- ✓ **Random** - conducted on a random unannounced basis just before, during, or just after performance of safety sensitive functions.
- ✓ **Return-to-duty and follow-up** - conducted when an individual who has violated the prohibited alcohol conduct standards returns to performing safety-sensitive duties. Follow-up tests are unannounced. At least 6 tests must be conducted in the first 12 months after a driver returns to duty. Follow-up testing may be extended for up to 60 months following return to duty.

NOTE: Pre-employment Alcohol Testing is NOT required by DOT. (382.301) If the motor carrier chooses to Pre-employment test, it must adhere to all rules for all drivers.

HOW DOES RANDOM ALCOHOL TESTING WORK?

Random alcohol testing must be conducted just before, during, or just after a driver's performance of safety sensitive duties. The driver is randomly selected for testing from a "pool" of subject drivers. The testing dates and times are unannounced and are reasonably spread throughout the year. Each year, the number of random tests conducted by the employer must equal at least 10% of average number of driver positions subject to the regulations. (382.305)

HOW WILL ALCOHOL TESTING BE DONE?

The rules allow for screening tests to be conducted using saliva devices or breath testing using evidential breath testing (EBT) and non-evidential breath testing devices approved by the National Highway Traffic Safety Administration (NHTSA). NHTSA periodically publishes a list of approved devices in the Federal Register. Two tests are required to determine if a person has a prohibited alcohol concentration. A screening test is conducted first. Any result less than **0.02 percent** alcohol concentration is considered a "negative" test. If the alcohol concentration is 0.02 or greater, a second confirmation test must be conducted. The driver and the individual conducting the confirmation breath test, called a breath alcohol technician (BAT) complete the alcohol testing form to ensure that the results are properly recorded. The confirmation test, if required, must be conducted using an EBT that prints out the results, date and time, a sequential test number, and the name and serial number of the EBT to ensure the reliability of the results. The confirmation test results determine any actions taken. Testing procedures that ensure accuracy, reliability and confidentiality of test results are outlined in the Part 40 rule. These procedures include training and proficiency requirements for the screening test technicians (STT), breath alcohol technicians (BAT), quality assurance plans for the breath testing devices (including calibration requirements for a suitable test location), and protection of driver test records.

WHO DOES THE TESTING?

Employers are responsible for implementing and conducting the testing programs. They may do this using their own employees or contract services of a **Third Party Administrator (TPA)**, or by joining together in a consortium that provides services to all member companies. Law enforcement officers will not conduct the tests as part of roadside or other inspections. However, under certain circumstances, post-accident tests conducted by law enforcement personnel will be acceptable. Any individual conducting the test must be trained to operate the EBT and be proficient in the breath testing procedures.

WHAT ARE THE CONSEQUENCES OF ALCOHOL MISUSE?

Drivers who engage in prohibited alcohol conduct must be immediately removed from safety-sensitive functions. Drivers who have engaged in alcohol misuse cannot return to safety-sensitive duties until they have been evaluated by a substance abuse professional and complied with any treatment recommendations to assist them with an alcohol problem. To further safeguard transportation safety, drivers who have any alcohol concentration (**defined as 0.02 or greater**) when tested just before, during or just after performing safety-sensitive functions must also be **removed from performing such duties for 24 hours**. When alcohol concentration is recorded at **0.04 percent or higher**, the driver must be removed from safety sensitive functions, and must be evaluated by an SAP and pass a return to duty alcohol test with a reading of 0.02 or less. (40.285 and *Guidance* 382.503)

HOW WILL EMPLOYEES KNOW ABOUT THESE NEW RULES?

Employers must provide detailed information about alcohol misuse, the employers' policy, the testing requirements, and how and where drivers can get help for alcohol abuse. Supervisors of safety-sensitive drivers must attend at least one hour of training on alcohol misuse symptoms and indicators used in making determinations for reasonable suspicion testing. (382.301)

ARE EMPLOYEES ENTITLED TO REHABILITATION?

Drivers who violate the alcohol misuse rules will be referred to a Substance Abuse Professional (SAP) for evaluation. Any treatment or rehabilitation would be provided in accordance with the employer's policy or labor/management agreements. The employer is not required under these rules to provide rehabilitation, pay for treatment, or reinstate the driver in his/her safety-sensitive position. Any employer who does decide to return a driver to safety-sensitive duties must ensure that the driver: 1) has been evaluated by a substance abuse professional; 2) has complied with any recommended treatment; 3) has taken a return-to-duty alcohol test (with a result less than 0.02); and 4) is subject to unannounced follow-up alcohol tests. (40.285)

HOW WILL THE FMCSA KNOW IF THESE RULES ARE BEING FOLLOWED?

Employers are required to keep detailed records of their alcohol misuse prevention programs. The FMCSA will conduct inspections or audits of employers' programs. Additionally, selected employers will have to prepare annual calendar year summary reports for the FMCSA. These reports will be used to help monitor compliance and enforcement of the rules, as well as to provide data on the extent of alcohol misuse and the need for any future program and regulatory changes. (390.15)

ARE DRIVER ALCOHOL TESTING RECORDS CONFIDENTIAL?

Yes. Test results and other confidential information may be released only to the employer and the substance abuse professional. Any other release of this information is only with the driver's written consent. If a driver initiates a grievance, hearing, lawsuit, or other action as a result of a violation of these rules, the employer may release relevant information to the decision maker.

WILL FOREIGN OPERATORS HAVE TO COMPLY WITH THESE RULES?

Yes. The FMCSA requires foreign motor carriers to comply with the drug and alcohol rules when their drivers operate in the United States. (382.305 *Guidance* 16)

WHAT ABOUT DRUG TESTING?

The drug testing rules cover the same drivers as the alcohol testing rules. The types of tests required are: (382.301)

- ✓ **Pre-employment** – conducted prior to the first time a driver performs safety-sensitive functions for an employer.
- ✓ **Post-accident** - conducted after accidents on drivers whose performance could have contributed to the accident (as determined by a citation for a moving traffic violation) and for all fatal accidents even if the driver is not cited for a moving traffic violation.
- ✓ **Reasonable suspicion** - conducted when a trained supervisor or company official observes behavior or appearance that is characteristic of alcohol misuse.
- ✓ **Random** - conducted on a random unannounced basis just before, during, or just after performance of safety-sensitive functions.
- ✓ **Return-to-duty and follow-up** - conducted when an individual who has violated the prohibited alcohol conduct standards returns to performing safety-sensitive duties. Follow-up tests are unannounced. At least 6 tests must be conducted in the first 12 months after a driver returns to duty. Follow-up testing may be extended for up to 60 months following return to duty.

HOW IS DRUG TESTING DONE?

Drug testing is conducted by analyzing a driver's urine specimen. The analysis is performed at laboratories certified and monitored by the Department of Health and Human Services (DHHS). The list of DHHS approved laboratories is published monthly in the Federal Register. The driver provides a urine specimen in a location that affords privacy and the "collector" seals and labels the specimen, completes a chain of custody document, and prepares the specimen and accompanying paperwork for shipment to a drug-testing laboratory. The specimen collection procedures and chain of custody ensure that the specimen's security; proper identification and integrity are not compromised. The Omnibus Transportation Employee Testing Act of 1991 requires that drug testing procedures for commercial motor vehicle drivers include split specimen procedures. Each urine specimen is subdivided into two bottles labeled as a "primary" and a "split" specimen. Both bottles are sent to a laboratory. Only the primary specimen is opened and used for the urinalysis. The split specimen bottle remains sealed and is stored at the laboratory. If the analysis of the primary specimen confirms the presence of illegal, controlled substances, the driver has 72 hours to request the split specimen be sent to another DHHS-certified laboratory for analysis. This split specimen procedure essentially provides the driver with an opportunity for a "second opinion". (Part 40)

WHAT DRUGS ARE TESTED FOR?

All urine specimens are analyzed for the following drugs:

- ✓ **Marijuana (THC metabolite)**
- ✓ **Cocaine**
- ✓ **Amphetamines**
- ✓ **Opiates (including heroin)**
- ✓ **Phencyclidine (PCP)**

The testing is a two-stage process. First, a screening test is performed. If it is positive for one or more of the drugs, then a confirmation test is performed for each identified drug using state-of-the-art gas chromatography/mass spectrometry (GC/MS) analysis. GC/MS confirmation ensures that over-the-counter medications or preparations are not reported as positive results. (40.85/40.87)

WHO REVIEWS AND INTERPRETS THE LABORATORY RESULTS?

All drug test results are reviewed and interpreted by a physician (Medical Review Officer (MRO)) before they are reported to the employer. If the laboratory reports a positive result to the MRO, the MRO contacts the driver (in person or by telephone) and conducts an interview to determine if there is an alternative medical explanation for the drugs found in the driver's urine specimen. If the driver provides appropriate documentation and the MRO determines that it is legitimate medical use of the prohibited drug, the drug test result is reported as negative to the employer. (40 Subpart G)

WHAT DRUG USE IS PROHIBITED?

The drug rules prohibit any unauthorized use of the controlled substances. **Illicit use of drugs by safety-sensitive drivers is prohibited on or off duty.** The FMCSA has some additional rules that prohibit the use of legally prescribed controlled substances (such as barbiturates, amphetamines, morphine, etc.) by safety-sensitive drivers involved in interstate commerce. (382.201)

WHAT ARE THE CONSEQUENCES OF A POSITIVE DRUG TEST?

A driver must be removed from safety-sensitive duty if he/she has a positive drug test result. The removal cannot take place until the MRO has interviewed the driver and determined that the positive drug test resulted from the unauthorized use of a controlled substance. **A driver cannot be returned to safety-sensitive duties until he/she has been evaluated by a substance abuse professional, has complied with recommended rehabilitation, and has a negative result on a return-to-duty drug test.** Follow-up testing to monitor the driver's continued abstinence from drug use is also required. (382 Subpart E)

HOW DOES RANDOM DRUG TESTING WORK?

Employers are responsible for conducting random, unannounced drug tests. The total number conducted each year must equal at least **50% of the safety-sensitive drivers.** Some drivers may be tested more than once each year; some may not be tested at all depending on the random selection. Random testing for drugs does not have to be conducted in immediate time proximity to performing safety-sensitive functions. Once notified of selection for testing, however, a driver must proceed immediately to a collection site to accomplish the urine specimen collection. (382.305)

ARE EMPLOYEE EDUCATION AND TRAINING REQUIRED?

Employers must provide information on drug use and treatment resources to safety sensitive drivers. All supervisors and officials of businesses with safety-sensitive drivers must attend at least one hour of training on the signs and symptoms of drug abuse. This training is necessary to assist supervisors and company officials in making appropriate determinations for reasonable suspicion testing. (382.601)

ARE DRIVER DRUG TESTING RECORDS CONFIDENTIAL?

Yes. Driver drug testing results and records are maintained under strict confidentiality by the employer, the drug-testing laboratory, and the medical review officer. They cannot be released to others without the written consent of the driver. Exceptions to these confidentiality provisions are limited to a decision maker in arbitration, litigation or administrative proceedings arising from a positive drug test. Statistical records and reports are maintained by employers and drug testing laboratories. This information is aggregated data and is used to monitor compliance with the rules and to assess the effectiveness of the drug testing programs. (382.401)

WHAT OTHER DRUG AND ALCOHOL TESTING INFORMATION IS REQUIRED BY FMCSA?

A CONFIDENTIAL FILE containing AT LEAST the following documents pertaining to Drug and Alcohol Testing is to be kept for each Commercial Driver.

Following, is an *example* "Table of Contents" for this file, **SAMPLE forms, and instructions for each.**

WHERE CAN I GET MORE INFORMATION?

ACCESS TO THE FMCSA WEBSITE: www.fmcsa.dot.gov

For assistance with the procedures of how to conduct an alcohol or drug test contained in Part 40, contact:
Office of the Secretary of Transportation
Office of Drug and Alcohol Program Compliance,
Room 10317
400 Seventh Street, S.W.
Washington, D.C. 20590
(202) 366-3784

49 CFR part 40.15 – As an employer, you may use a service agent (TPA) to perform the tasks needed to comply with this part and DOT agency drug and alcohol testing regulations, consistent with the requirements of Subpart Q and other applicable provisions of this part.

CMI-Drug Program Administrators is a Third Party Administrator for Drug and Alcohol Programs specializing in DOT compliance. For more information contact Ron or Shawn Shupe at 817-577-5580.

Motor Carrier Name	DRUG AND ALCOHOL TESTING FILE DOCUMENT
Address	
Phone Number	DRUG AND ALCOHOL TESTING FILE CONTENTS INSTRUCTIONS
US DOT Number	

FMCSA regulations require certain actions and documentation concerning drug and alcohol testing of your employees. You will want to read part 382 thoroughly and refer to part 40 as well.

The following information is taken from part 382 and part 40 of 49CFR. If you have a Third Party Provider (TPA) for your drug and alcohol program, they should maintain these records for you, either on paper or electronically.

If you are administering your own program, you should have these documents filed separately from your Driver Qualification Files in a private and secured location.

Motor Carrier Name	DRUG AND ALCOHOL TESTING FILE DOCUMENT
Address	
Phone Number	DRUG AND ALCOHOL TESTING FILE CONTENTS
US DOT Number	

DOCUMENTS THAT ARE REQUIRED TO BE COMPLETED BEFORE SAFETY SENSITIVE FUNCTIONS ARE PERFORMED.

- 1. Certification of Receipt of Drug and Alcohol Policy and Educational Information. (382.601(d))
- 2. Result Report of Pre-employment DOT Drug and Alcohol Test (382.301(a))

DOCUMENTS THAT ARE REQUIRED TO BE COMPLETED WITHIN 30 DAYS AFTER SAFETY SENSITIVE FUNCTIONS ARE PERFORMED.

- 3. Previous Employer Investigation for Drug and Alcohol Testing. (382.413/40.25)
Include responses received, and documentation for those who would not respond after 3 tries.
- 4. FOR TEXAS ONLY – Inquiry to and Result Letter from Texas DOT for Positive Drug Test Report.

DOCUMENTS THAT ARE REQUIRED TO BE RETAINED AS THEY ARE PRODUCED AS A RESULT OF DRUG AND ALCOHOL TESTING PERFORMED FOR ANY REASON. (40.333)

Note: If the Motor Carrier is using a Third Party Administrator, the following documents can be retained by the TPA as long as said documents can be produced on demand in the event of an audit.

1. Negative Test Result Reports.
2. Positive Test Result Reports.
3. Documentation of refusals.
4. SAP Reports
5. Follow-up Test Result Reports and Schedules for Follow-up Testing.

Motor Carrier Name	DRUG AND ALCOHOL TESTING FILE DOCUMENT
Address	
Phone Number	EMPLOYEE NOTIFICATION OF DRUG AND ALCOHOL POLICIES, PROCEDURES AND EDUCATIONAL MATERIALS INSTRUCTIONS
US DOT Number	

This form must be SIGNED by the employee as soon as he / she is given a copy of the company Drug and Alcohol Policy and Educational Materials.

The employee is to keep the copy of the Policy, and a copy of the Receipt Form is to be placed in the DOT Drug and Alcohol folder.

When a Third Party Administrator is used for the Drug and Alcohol Program, a receipt form may be included as part of the policy provided by them.

Motor Carrier Name	DRUG AND ALCOHOL TESTING FILE DOCUMENT
Address	
Phone Number	EMPLOYEE NOTIFICATION OF DRUG AND ALCOHOL POLICIES, PROCEDURES AND EDUCATIONAL MATERIALS
US DOT Number	

**EMPLOYEE ACKNOWLEDGEMENT OF RECEIPT OF DRUG AND ALCOHOL POLICIES,
PROCEDURES AND EDUCATIONAL MATERIAL (382.601 (d))**

- ✓ I hereby acknowledge that I have been provided a copy of the Company Drug and Alcohol Policies, Procedures and Educational Material.
- ✓ I have read and understand the provisions outlined in the handbook, and agree to all of the requirements contained therein.
- ✓ I understand that compliance with said document is a condition of employment with this company.
- ✓ I understand that disciplinary action up to and including termination may be taken if I am found to be in violation of the Policy at any time.
- ✓ I understand that upon my request, I may obtain documentation pertaining to my own drug or alcohol testing performed for any reason.

Employee's Printed Name

Employee's Signature

Employee's SSN

Date

Employee's Supervisor's Signature

Motor Carrier Name	DRUG AND ALCOHOL TESTING FILE DOCUMENT
Address	
Phone Number	RESULT REPORTS OF DRUG AND ALCOHOL TESTING INSTRUCTIONS
US DOT Number	

49 CFR part 382.401(a) – General Requirement. Each employer shall maintain records of its alcohol misuse and controlled substances use prevention programs as provided in a secure location with controlled access.

This part also contains instructions on how and how long each category of result records are to be retained.

When a Third Party Administrator is used for the Drug and Alcohol Program, these records will be kept by the TPA in a secured location as specified by FMCSA regulations. Records will be made available upon demand in the event of an audit.

Motor Carrier Name	CDL DRIVER QUALIFICATION FILE DOCUMENT
Address	
Phone Number	PREVIOUS EMPLOYER INVESTIGATION FOR DRUG AND ALCOHOL TESTING INSTRUCTIONS
US DOT Number	

Sections 40.25 and 392.23 (e) require the Motor Carrier to investigate 3 years of Drug and Alcohol testing at previous DOT mandated employers of the CDL applicant.

ONLY the Department of Transportation Regulated Employers need to be contacted; if the applicant worked for the employer as a Commercial Driver or in a DOT Safety Sensitive Function of any kind.

For each of these employers, complete and have the applicant SIGN a separate PREVIOUS EMPLOYER INVESTIGATION FOR DRUG AND ALCOHOL TESTING RESULTS form. Mail or fax it to the employer, and document the date that it was mailed or faxed EACH TIME. Regulation requires a "good faith effort" to contact the previous employer, and that each effort be documented.

Phone interviews are permitted, but be very careful to document each time phone calls are made and the name and title of who is interviewed. Ask the questions included in the form and document the answers you are given. Remember to document the date and who you spoke with.

Regulation allows 30 days from the date of hire to acquire these documents and get them into the Driver Qualification File.

Motor Carrier Name	DRUG AND ALCOHOL TESTING FILE DOCUMENT
Address	
Phone Number	PREVIOUS EMPLOYER INVESTIGATION FOR DOT DRUG AND ALCOHOL TESTING RESULTS
US DOT Number	

**FMCSA APPLICANT AUTHORIZATION TO RELEASE INFORMATION ON DOT REGULATED
DRUG AND ALCOHOL TESTING HISTORY (As required by CFR Part 40.25 and 392.23 (e))**
Prepare a separate form for each previous DOT regulated employer 3 years prior to application date.

APPLICANT NAME (Printed) _____

SOCIAL SECURITY NUMBER _____ DATE OF BIRTH _____

I, _____, do hereby authorize below noted company to release the information requested to (*prospective employer*) _____ for the purposes of investigation as required by 49 CFR, Section 391.23 of the Federal Motor Carrier Safety Regulations, and that I have informed _____ of ALL DOT regulated previous employers I have worked for in the past 3 years.

Check here if you have NOT performed DOT functions for any employer in the last three years.

Signature of Applicant _____ Date _____

Mail or fax this form to this address for completion. Phone call is acceptable, but must be documented.

PREVIOUS DOT REGULATED EMPLOYER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

In accordance with 49 CFR 40.25, the prospective employer is obligated to request the information below from all previous FMCSA regulated employers for which the applicant was pre-employment drug and alcohol tested or for whom the applicant worked in a DOT safety-sensitive position within the 3 years preceding the date noted. Complete the information below and return completed form within 30 days, as required to:

Prospective Employer _____

Address and Fax number _____

The above named applicant has applied to _____ for a position as _____

and states that he/she was employed by you as (job position) _____

From (m/y) _____ to (m/y) _____



AFFIDAVIT TO AUTHORIZE RELEASE OF CDL HOLDER'S REPORTED POSITIVE CONTROLLED SUBSTANCE TEST RESULTS



Use this form to obtain the CDL holder's reported positive controlled substance test results information.

This form should ONLY be used if you wish to inquire whether or not a prospective driver (CDL Holder) has had a positive controlled substance test result reported to the Texas Department of Public Safety in compliance with TRC 643.064 since 09/01/03.

THIS FORM IS NOT REQUIRED FOR REPORTING A POSITIVE CONTROLLED SUBSTANCE TEST.

1. This form must be completed in full and include the driver's original signature.

**Texas Department of Public Safety
Motor Carrier Bureau, MSC# 0522
6200 Guadalupe
Austin, Texas 78752-4019**

2. Send the completed form to:

I, _____ ,
Print Name of CDL Holder

of _____ ,
Print Address of CDL Holder

authorize release of the CDL holder's reported positive controlled substance test results reported under TRC 643.064

to _____ ,
Print Name

of _____ ,
Print Address

Driver License Number: _____ State: _____ Date of Birth: _____

Signature of Driver:
X

Date:



REPORT OF POSITIVE DRUG TEST UNDER TRC 643.064



NAME OF MOTOR CARRIER		DATE OF DRUG TEST	
NAME OF INDIVIDUAL TESTED	SOCIAL SECURITY NUMBER	CDL NUMBER & STATE	BIRTHDATE

CERTIFICATION OF MEDICAL REVIEW OFFICER

By signing below, I the Medical Review Officer certify the following:

1. I am the medical review officer for the drug testing program or consortium of the motor carrier listed above.
2. I am a licensed physician with knowledge of substance abuse disorders.
3. I have correctly followed the drug testing procedures required by 49 CFR Parts 40 and 382 that are applicable to the Medical Review Officer as follows:
 - The individual refused to submit to testing;
 - I reviewed the chain of custody of the specimen submitted by the individual tested to ensure that it is complete and sufficient on its face;
 - I examined any alternative medical explanations for the positive drug test result;
 - I gave the individual tested an opportunity to discuss the test result prior to making a final decision to verify the positive test result as follows:
 - I talked directly with the individual tested before verifying the test as positive; or
 - After making all reasonable efforts to contact the individual tested, including contacting a designated management official of the motor carrier, I was unable to communicate directly with the individual within 10 days of the date I received the test result from the laboratory; or
 - The individual tested was instructed by the designated management official of the motor carrier to contact me and the individual then failed to contact me within 72 hours; or
 - The individual tested expressly declined an opportunity to discuss the test result.
 - (TEST RESULT FOR OPIATES ONLY – GC/MS CONFIRMATION DOES NOT CONFIRM THE PRESENCE OF 6-MONOACETYLMORPHINE) I determined that there is clinical evidence, in addition to the urine test, of unauthorized use of an opium, opiate, or opium derivative or the level is 15,000 or above.
4. By submitting this Certificate I verify a positive drug test result from the individual tested or a refusal to be tested.

I further certify that I have reviewed my records and that the information contained in this certificate is true and correct to the best of my knowledge.

PRINTED NAME	SIGNATURE X
ADDRESS	CITY STATE ZIP CODE

CERTIFICATE OF MOTOR CARRIER (A COPY OF THE FEDERAL DRUG TESTING CUSTODY AND CONTROL FORM OR THE MRO'S REPORT OF POSITIVE CONTROLLED SUBSTANCE RESULT MUST BE ATTACHED, IF APPLICABLE)

By signing below, I certify the following:

1. The Motor Carrier listed above:
 - Has an in-house drug and alcohol testing program that meets the federal requirements of 49 CFR Parts 40 and 382; **OR**
 - Is a member of a consortium, as defined in 49 CFR 382.107, that provides drug and alcohol testing that meets the federal requirements of 49 CFR Parts 40 and 382.

NAME OF CONSORTIUM: _____

2. The individual tested is subject to drug testing by the Motor Carrier.
3. If the driver refused to submit to a controlled substance test, check below:
 - The individual refused to submit to a controlled substance test; therefore, there may not be an MRO certification.

I further certify that I have reviewed the motor carrier's records and that the information contained in this certificate is true and correct to the best of my knowledge.

PRINTED NAME OF DESIGNATED MOTOR CARRIER REPRESENTATIVE	TELEPHONE NUMBER
ADDRESS	CITY STATE ZIP CODE
SIGNATURE OF DESIGNATED MOTOR CARRIER REPRESENTATIVE X	DATE

After the form is completed, attach a copy of the Federal Drug Testing, Custody and Control Form or the MRO's report of positive controlled substance result. Send to: MCCA Section Supervisor, Motor Carrier Bureau, Texas Department of Public Safety, 6200 Guadalupe, MSC# 0522, Austin, Texas 78752-4019.