

**RESOLUTION OF THE
WHITE MOUNTAIN APACHE TRIBE OF THE
FORT APACHE INDIAN RESERVATION**

- WHEREAS,** The Tribal Council in 1991 adopted the Tribe's Drug & Alcohol Free Workplace Policy in order to promote public safety and a healthy work environment; and
- WHEREAS,** since that time various tribal departments and enterprises have been authorized to undertake employee drug testing under specified circumstances; and
- WHEREAS,** Sunrise Park Resort was authorized to carry out pre-employment testing, testing for cause, and post-accident testing, as well as limited mandatory and random testing of its workforce; and
- WHEREAS,** Sunrise Park Resort Management has determined that broader use of mandatory and random drug testing would promote greater public safety and contribute to a healthy work environment; and
- WHEREAS,** on that basis Sunrise Management requests authorization to expand the random drug testing program in place at Sunrise Park Resort; and
- WHEREAS,** at present the following employment positions are subject to mandatory/random drug testing at Sunrise Park Resort: bus drivers, snow removal operators, heavy equipment operators, snow groomers, lift operators, maintenance personnel, and ski patrol personnel; and
- WHEREAS,** all other employees at Sunrise Park Resort are called upon to engage in activities or support other staff engaged in activities which involve a high degree of risk or trust and potential danger to public safety; and
- WHEREAS,** the needs of Sunrise Park Management to respond to influxes of thousands of skier patrons who are dependant upon orderly and safe conditions make it necessary for Sunrise Management to reassign personnel to respond to the needs present on that particular day; and
- WHEREAS,** all categories of employees at Sunrise Park Resort must work closely together and are frequently engaged in mutual projects involving close cooperation for the benefit of public safety; and
- WHEREAS,** the White Mountain Apache Tribe recognizes the need for assurance of a healthy workforce to maintain welfare and public safety at Sunrise Park Resort, particularly on busy weekends when as many as 10,000 visitors are on the

premises engaged in high risk sports activities; and

WHEREAS, on this basis the Tribal Council concludes that it would serve the interests of public safety to authorize the random and mandatory drug testing program for all employee categories at Sunrise Park Resort.

BE IT RESOLVED by the Tribal Council of the White Mountain Apache Tribe for reasons stated above, it hereby designates all employees of the Sunrise Park Resort as holding critical high risk for safety positions pursuant to the Tribe's Drug & Alcohol Free Workplace Policy, and that such designation shall include all Sunrise Park Resort Management.

BE IT FURTHER RESOLVED by the Tribal Council of the White Mountain Apache Tribe that it authorizes mandatory and random drug and alcohol testing at Sunrise Park Resort for all employee classifications, in addition to the authorization for pre-employment testing, testing for cause, and post-accident testing previously authorized.

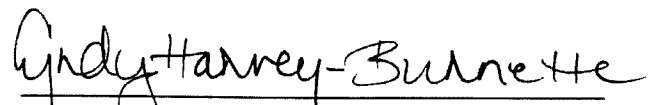
BE IT FURTHER RESOLVED by the Tribal Council of the White Mountain Apache Tribe that such mandatory/random testing shall be conducted pursuant to the Drug and Alcohol Testing Policy in place for Sunrise Park Resort, and on that basis, the Council affirms its approval for the drug and alcohol testing program at Sunrise Park Resort reviewed on this date.

BE IT FURTHER RESOLVED by the Tribal Council of the White Mountain Apache Tribe that it hereby delegates authority to the Tribal Chairman and the Legal Department to draft and execute any documents needed to carry out the intent of this resolution, including the amendment to the Sunrise Park Resort Drug and Alcohol Free Workplace Policy approved on this date.

The foregoing resolution was on January 9, 2001 duly adopted by a vote of SEVEN for and ZERO against by the Tribal Council of the White Mountain Apache Tribe, pursuant to authority vested in it by Article IV, Section 1 (a), (i), (s), (t) and (u) of the Constitution of the Tribe, ratified by the Tribe September 30, 1993, and approved by the Secretary of the Interior on November 12, 1993, pursuant to Section 16 of the Act of June 18, 1934 (48 Stat. 984).



Chairman of the Tribal Council



Secretary of the Tribal Council

SUNRISE PARK RESORT

EMPLOYEE DRUG AND ALCOHOL TESTING PROGRAM

SECTION ONE PURPOSE AND POLICY STATEMENT

The White Mountain Apache Tribe, in 1991, established a Drug and Alcohol Free Workplace Policy to ensure a healthy and safe work environment for Tribal employees. The drug and alcohol testing program set forth below incorporates and enforces the Drug and Alcohol Free Workplace Policy and is intended to send a clear message to employees that **the following conduct is prohibited:**

1. Consumption of alcohol while at work.
2. Use of illegal drugs, whether on or off the job.
3. Reporting to work under the influence of drugs or alcohol.
4. Use of prescription drugs in any manner contrary to a valid prescription.

The testing program set forth in these Policies enforces employment standards at Sunrise Park Resort. Test results are used for employment purposes only and shall not be released to any law enforcement agency. Violation of these Policies shall subject employees to mandatory disciplinary measures, described herein; however, in addition, the Tribe or Sunrise Park Resort management may take other lawful actions and disciplinary measures to respond to drug-related behavior or activities by employees.

SECTION TWO SUMMARY OF TESTING PROGRAM

All employees of Sunrise Park Resort are subject to the drug testing program established under these Policies. The testing program, described in greater detail in the following pages, consists of four components: 1) pre-employment testing, 2) random testing, 3) post-accident testing, and 4) testing for cause. The pre-employment test is required of any person seeking work at Sunrise Park Resort. Anyone who fails the pre-employment test shall be ineligible for employment for twelve months. The random test may be administered to any Sunrise employee at least once each year. The actual time of selection is determined at random and not subject to control by any person. An employee who fails the random test shall be given the opportunity to seek treatment and return to work. A second violation of the random testing policies will result in immediate termination from employment. The post-accident test and test for cause are administered only in the event of certain circumstances specified in Section Four. Failure of

either test will result in immediate termination from employment.

Drug and alcohol tests are based upon urinalysis conducted by an independent certified medical laboratory. Test samples are collected on-site or at a medical facility in Pinetop and sent to Phoenix for analysis. In addition, under certain circumstances, alcohol testing may be conducted on-site by Sunrise Management using a breathalyser machine.

SECTION THREE DEFINITIONS

In these Policies, unless the context indicates otherwise:

1. **“Abuse of Drugs or Alcohol”** means:
 - a. The use of illegal drugs, whether or not such use occurs during working hours; or
 - b. The consumption of alcohol while at work, or reporting to work or any appointment for the purposes of securing employment while under the influence of alcohol. For the purposes of these Policies, any individual with a blood alcohol level of .02% or more shall be conclusively deemed to be under the influence of alcohol; or
 - c. The use of prescription drugs in any manner or quantity, except as directed and authorized by a valid prescription; or
 - d. Engaging in work without prior notification to Primary Management of any prescription drug use or therapy which could reasonably be expected to impair an employee’s judgment or work performance.
2. **“Breathalyser”** means a machine maintained by Sunrise Park Resort which is calibrated to measure an individual’s blood alcohol level. Procedures for the use of the breathalyser are provided in **Attachment C** to these Policies.
3. **“Chain of Custody Collection Procedure”** means the written procedures established by the Collection and Testing Facility and shown in **Attachment B** to these Policies, governing the collection, handling and custody of urine samples.
4. **“Chain of Custody Requisition Form”** means the form signed by the employee or applicant at the time of collection which authorizes the Facility to release the laboratory test results to Sunrise Park Resort and which verifies that the preliminary chain of custody functions have been performed.
5. **“Collection and Testing Facility”** or **“Facility”** means the independent certified laboratory contracted by Sunrise Park Resort to collect samples from employees and perform

drug and alcohol screens.

6. **“Critical High Risk for Safety Position”** means all employment positions with Sunrise Park Resort pursuant to Tribal Council Resolution 01-2001-027 dated January 9, 2001.
7. **“Drug Screen”** or **“Urine Drug Screen”** means the laboratory urinalysis performed to indicate the abuse of drugs or alcohol. The specific substances which are screened are identified in **Attachment A** to these Policies. Sunrise Park Resort shall, as appropriate, make changes to the list of substances which will be screened.
8. **“Employee”** means any employee of Sunrise Park Resort, and its related operations. The term does not include an individual who is an applicant for employment.
9. **“Negative test result”** means a drug screen result prepared by the Collection and Testing Facility which finds no indication of abuse of drugs or alcohol.
10. **“Positive test result”** means a drug screen result prepared by the Collection and Testing Facility which indicates abuse of drugs or alcohol, in violation of these Policies.
11. **“Random Selection”** means the process of selection of employees for a urine drug screen which assures that each employee has an equal chance of being selected for testing.
12. **“Primary Management”** means the Sunrise Park Resort General Manager, Sunrise Park Resort Operations Manager and the Hotel Manager.
13. **“Test”** or **“Testing”** means the drug screen performed by the Collection and Testing Facility. The term can also include the breathalyser test performed on-site at Sunrise Park Resort.
14. **“Testing Coordinator”** means the official assigned to notify employees of their selection for random drug testing and to serve as a liaison between the Risk Manager, Primary Management and the employees.
15. **“Risk Manager”** means the independent contractor hired to perform the random selection of employees for drug screening and to receive drug screen results from the Collection and Testing Facility.

SECTION FOUR TESTING PROGRAMS

A. PRE-EMPLOYMENT TESTING

1. **Test Type**

Urine Drug Screen.

2. Covered Group

All applicants seeking employment with Sunrise Park Resort.

3. Procedure

Selection Applicants who are considered for employment in a specific position shall be required to report to the Collection and Testing Facility at the specified time.

Collection Applicants are responsible for reporting to the Collection and Testing Facility in Pinetop. Sunrise Park Resort shall pay the Facility for the test, however, each applicant must reimburse Sunrise Park Resort for the test cost.

Reporting Test results are sent directly from the Collection and Testing Facility to the Sunrise Personnel Office.

4. Test Findings

Failing to report for testing, or testing positive for the abuse of illegal drugs or alcohol shall make the candidate ineligible for employment. The candidate shall remain ineligible for consideration for employment for twelve months.

B. RANDOM TESTING

1. Test Type

Urine Drug Screen.

2. Covered Group

All employees holding *Critical High Risk for Safety* positions may be tested at least once on a random basis within a one year period. New hires shall not be subject to testing until after 30 days of employment.

3. Procedure

Selection The Risk Manager shall conduct a random selection of employees approximately once each month during the ski season. Additional selection times may occur during the off-season. The roster of names of employees selected for the drug screen shall be provided to the Testing Coordinator, who shall notify each identified employee upon the employee's arrival to work. In addition to personal notification, each employee shall also receive

written notification of his or her selection for testing. Employees shall not be given advance notice of their selection for testing. The Testing Coordinator shall notify the Risk Manager of any employee who is not scheduled to report to work or is otherwise unavailable for testing. The names of employees who are unavailable for testing shall be returned to the testing pool for random selection at a later date.

Collection Employees selected for testing shall be directed to the designated collection site at Sunrise Park Resort, which on that day shall be staffed by personnel from the Collection and Testing Facility. Based upon the number of employees who are subject for testing on a particular date, Sunrise Management, at its discretion, may arrange to have the testing conducted at the Collection and Testing Facility in Pinetop.

Reporting The Collection and Testing Facility will provide the test results to the Risk Manager approximately 48 hours after the sample is collected. In the event of a positive result, the Risk Manager shall, within 24 hours, notify the Testing Coordinator who shall notify Primary Management. The employee shall be informed of the test results by Primary Management. The employee's immediate supervisor shall be informed that the employee will become unavailable for work for a violation of these Policies. Negative test results are not reported to the Testing Coordinator and are not reported to the employee.

4. Test Findings

First violation Any employee who fails to report for testing or who tests positive for abuse of illegal drugs or alcohol will be suspended from work without pay for two weeks. Employees who test positive for the presence of illegal drugs or alcohol must also complete drug and alcohol abuse screening and treatment. Failure to complete the prescribed treatment shall result in the employee's termination of employment. In addition, any employee who tests positive for abuse of illegal drugs or alcohol will be subject to transfer or suspension from work without pay until the successful completion of the screening and treatment, depending upon the nature of his or her work responsibilities. Immediately upon returning to work the employee will be placed on probation for a period of 90 days and shall be required to submit to retesting at least once within the 90 day period.

Second violation Any employee who has at any time been found to have committed a prior violation of this policy and who fails to report for testing when required or tests positive for abuse of drugs or alcohol shall be immediately terminated from employment.

C. POST-ACCIDENT TESTING

1. Test Type

Urine Drug Screen and/or Breathalyser.

2. Covered Group

Any employee who:

- a) Is involved in an accident while operating a moving vehicle; or
- b) Causes an accident which results in injury to any person requiring treatment by a medical professional; however, if the resulting injury is minor, drug screen or breathalyser testing is required only at the discretion of the employee's supervisor with the approval of one member of Primary Management.

3. Procedure

Collection An employee involved in an accident as described above shall be transported to the Collection and Testing Facility, or administered a breathalyser test, as appropriate.

Reporting Drug Screen results are sent from the Collection and Testing Facility to the Risk Manager who, within 24 hours, notifies the Primary Management. Breathalyser test results are immediately available at Sunrise Park Resort.

4. Test Findings

A positive test result or a Breathalyser reading of .05% or more shall result in the immediate termination from employment of any employee required to take a drug screen or breathalyser test pursuant to this Subsection. A breathalyser reading of more than .02%, but less than .05% shall result in a two week suspension from employment without pay and mandatory drug and alcohol abuse screening and treatment. Failure to complete the prescribed treatment shall result in the employee's termination of employment.

D. TESTING FOR CAUSE

1. Test Type

Urine Drug Screen and/or Breathalyser.

2. Covered Group

All employees, subject to the selection criteria provided below.

3. Procedure

Selection If a supervisor observes conduct sufficient to establish reasonable

suspicion to believe an employee is using illegal drugs, whether on or off work, or is under the influence of drugs or alcohol at work, the employee can be required to submit to a drug screen, provided that two members of Primary Management also authorize the test. In addition to or in lieu of a drug screen, a supervisor having reasonable suspicion to believe an employee is under the influence of alcohol at work, may require that the employee submit to a breathalyser test.

Collection An employee identified for testing under this Section shall be transported to the Collection and Testing Facility, or administered a breathalyser test, as appropriate.

Reporting Test results are sent to Risk Manager who notifies Primary Management. Breathalyser test results are immediately available at Sunrise Park Resort.

4. Test Findings

First violation A positive test result or a breathalyser reading of .10% or more shall result in the immediate termination from employment of any employee required to take a drug screen or breathalyser test pursuant to this Subsection. A breathalyser reading of less than .10%, but more than .02% shall result in a two week suspension from employment without pay and mandatory drug and alcohol abuse screening and treatment. Failure to complete the prescribed treatment shall result in the employee's termination of employment.

Second violation Any employee who has at any time been found to have committed a prior violation of these Policies and who tests positive for abuse of drugs and alcohol or who obtains a breathalyser reading of .02% or more shall be terminated from employment.

SECTION FIVE COLLECTION AND TESTING

A. Collection

All employees shall sign a letter indicating their agreement to abide by the provisions of these Policies. The parent or guardian must sign for any employee who is under age 18. When selected for testing, the employee or applicant shall report to office of Sonora Laboratory, the Collection Facility, in Pinetop, except for breathalyser tests and random testing conducted at Sunrise Park Resort. The employee must provide picture identification to the Facility personnel, sign the Chain of Custody Requisition Form and abide by the collection procedures established by Facility. At the end of the day the specimen is sent by air to the testing facility in Phoenix.

B. Testing

Samples shall be tested for indications of the drugs identified in Attachment A. Any

sample which tests positive is retested by the Facility to verify the results. Test results are provided to the Risk Manager within 48 hours. The Facility will freeze and store for one year the remaining portion of any positive sample, should retesting become necessary.

C. Inconclusive Test Results

In the event a specimen is unreadable, the employee shall be required to immediately return the Collection and Testing Facility. In the event a second consecutive test is also unreadable, the employee, at the employee's own expense, shall be required to report to the Collection and Testing Facility for testing. If after three weeks the employee can not provide medically certified documentation verifying the employee's compliance with these Policies, the employee shall be terminated from employment.

SECTION SIX POLICY VIOLATIONS

The disciplinary actions resulting from a violation of these Policies are set forth in the description of the specific testing programs in Section Four. In addition, the failure to abide by the conditions of these Policies shall be grounds for termination from employment. Any employee who is terminated from employment pursuant to these Policies shall be ineligible for consideration for employment for a period of twelve months.

SECTION SEVEN EMPLOYEE ASSISTANCE

A. Evaluation and Treatment

Drug and alcohol abuse evaluation and treatment at the Rainbow Treatment Center is available for employees who are required to seek such treatment under these Policies. Subject to approval by Primary Management, employees may, at their own cost, arrange for evaluation and treatment at other licensed facilities. Approval for any alternate treatment program and facility shall be subject to the sole discretion of Primary Management.

B. Grievance Procedures

Employees who seek to appeal a drug screen result or resulting disciplinary action may file a grievance pursuant to the White Mountain Apache Tribe Grievance Procedures. For the sole and limited purpose of appeals arising from these Policies, the Grievance Procedures shall also be available to probationary employees. All grievance appeals, upon proper filing, shall be transferred to Step Two of the Grievance Procedures.

SECTION EIGHT CONFIDENTIALITY

Files or records reporting any test result provided pursuant to these Policies shall be considered CONFIDENTIAL and kept separate from personnel and business records. Access to confidential drug test records shall be strictly limited to only those personnel having authorization and an essential need for such records, as provided under these Policies. Test results shall be used for employment purposes only and shall not be provided to any law enforcement agency, except if ordered under a valid court order. No medical information, other than the screen for the identified substances and breathalyser results, shall be obtained from the testing authorized under these Policies. The Sunrise Park Resort Personnel Office shall be permitted to maintain a personnel file on any disciplinary action or other action affecting employment which occurs pursuant to these Policies.



SONORA LABORATORY SCIENCES

CHAIN OF CUSTODY COLLECTION PROCEDURE FOR URINE DRUG SCREENS

1. Call the patient by first and last name and ask for IDENTIFICATION. The following methods are acceptable for identifying the patient:
 - A. Any picture identification (i.e., driver's license, school I.D., employment badge, etc.)
 - B. Temporary (blue) driver's license with signature. Have patient sign on a separate paper and compare the signatures. Note on req. "NO PHOTO I.D., TEMP. ADL".
 - C. Accompanied by their supervisor. Note in the comment section that patient was identified by supervisor and give the supervisor's name. The supervisor must have photo I.D. and sign in the "Comment" section of the requisition as well. DO NOT phone employer for identification. (If the patient is a minor without photo I.D., you may use Method "C" with a parent or guardian making the identification.)

If the patient does not have any of the above, you should refer the patient to their employer. Let them phone from the PSC. Do not collect until I.D. is verified by one of these three methods. Phone I.D. by employer is not acceptable.

2. Explain to the patient that they must produce 50ml of urine for a valid specimen. Show the patient the sample cup. If the patient expresses the inability to give this amount, have them drink 8 oz. of water and wait until they feel they can give the required amount.
3. For patients who can give a specimen, obtain a preprinted requisition for account or hand write account information if there is not a preprinted requisition available. Verify the EXACT employer name (several accounts have similar names and test(s) requested).
4. Have the patient remove all outer garments (jackets, sweaters, coats, etc.) and leave purses, briefcases, etc. outside of the collection room. HAVE THEM TAKE THEIR WALLET INTO THE COLLECTION ROOM WITH THEM. No one is permitted in the collection room with the patient. Sonora employees do not do observed collections.
5. Instruct the patient to wash their hands with plain water.
6. Prepare the bathroom. Color toilet water, tape sink and toilet handle, turn off water, remove or lock up soap and/or chemicals.
7. Open the chain of custody kit, give urine cup to the patient and escort them to the collection room. Show the patient again how full the cup must be for a valid 50ml collection.
8. Instruct the patient not to run water or flush the toilet until after the specimen has been handed to you. TELL THE PATIENT THAT IF THEY FLUSH THE TOILET, THE COLLECTION WILL BE INVALID AND THEY WILL HAVE TO RECOLLECT THE SPECIMEN. Give the patient a 5 minute time limit to complete the collection. Advise the patient to put the lid on the specimen immediately after collection to prevent temperature loss.
9. Wait in the immediate area outside of the bathroom while the patient collects the specimen. Listen to make sure the patient does not flush the toilet or run the water in the sink. After 5 minutes, ask the patient to leave the bathroom and try to recollect later.

PERFORM STEPS 10 THROUGH 14 IN THE PRESENCE OF THE PATIENT

10. **Make sure you are wearing gloves.** When the patient hands you their specimen, enter the bathroom and observe the contents of the waste basket and toilet bowl for signs of contaminants or tampering agents. If evidence of either is found, the specimen **MUST** be discarded. Collector flushes the toilet and lets the patient wash their hands.
11. Upon receipt of the specimen from the patient, observe the specimen for signs of contamination (i.e., cloudy, discolored, etc.) and make sure the temperature is within the acceptable range of 90F-100F by reading the temperature strip located on the lower half of the specimen container. **RECORD TEMPERATURE** in the space provided. Specimen appearance, if suspect, should be noted in the comments section of the chain of custody form. If the temperature is not within the acceptable range the specimen must be discarded. If possible, new specimen should be collected within a short period of time. Match the specimen volume with the sample cup and discard any specimens that are less than 50ml in volume. If the specimen is not obtainable within the 24 hour notification period, the patient may need to call their supervisor.
12. Check lid tightness to prevent leakage. Have the patient initial and date the evidence seal at the bottom of the requisition. Remove the evidence seal at the bottom of the requisition and place over the container so that the donor initials and date are at the center of the container lid. Remove one of the individual numbers on the right side of the evidence seal and place on the side of the specimen container. As you are placing the seal on the cup, explain to the patient that the I.D. number on the seal matches the number on the requisition. Place the specimen in the sealable portion of the specimen bag. Remove the blue strip and press to close.
13. Ask the patient to read the "Donor Affidavit" paragraph at the top of the requisition. Have the patient sign their name in the "Donor Signature" space and print their name, put the date, their birthdate, social security number and daytime phone number in the designated spaces.
14. The collector must sign and print their name in the "Collector Instruction" section and check off all the boxes for steps 1-7 when complete. Fold the requisition and place in the side pocket of the specimen bag. Send all copies of requisition with specimen to Main Lab. Patient may be given a xerox copy if needed.

SPECIMENS WILL BE REJECTED ON THE FOLLOWING CRITERIA:

1. Temperature outside of 90F-100F or not recorded.
2. Chain of custody form not correctly filled out.
3. Collector or Donor signature is missing.
4. Chain of custody form not with sample.
5. Seal is missing on specimen container or broken.
6. Seal is incorrectly placed and does not cover the cap.
7. Specimen I.D. missing from bottle or cap.
8. I.D. doesn't match bottle or cap.
9. Insufficient volume (i.e. <50ml)
10. Obvious observed adulteration (i.e., smell, color).

I.D. MAY BE REJECTED FOR THE FOLLOWING CRITERIA:

1. Photograph does not resemble patient.
2. Signatures do not match.
3. I.D. appears altered, unreadable, or otherwise suspect.

CHAIN OF CUSTODY REQUISITION FORM

DONOR INSTRUCTIONS

***** IDENTIFICATION IS REQUIRED AT TIME OF COLLECTION *****

DONOR AFFIDAVIT

I certify that the specimen identified by the ID number on this form was provided by me on this date and is not adulterated. In my presence, the specimen was sealed with an evidence seal from this form that had the same I.D. number as the form. The seal was initialed by me. By my signature I consent to the release of laboratory test results to the doctor, facility, individual or company shown on this form.

Jane Smith Donor Signature Jane Smith Name (Print Clearly) 1/10/93 Date

Parent/Guardian Signature (if donor is under the age of 18) Name (Print Clearly) / / Date

2/2/65 Birthdate 496-98-3100 Social Security Number 461-1027 Phone

COLLECTOR INSTRUCTION

(Failure to complete any portion of this section could invalidate chain of custody.)

✓ When Completed

- 1. Check donor identification (preferably a picture I.D.)
- 2. Check and record the specimen temperature. → SPECIMEN TEMP: 95° (90° - 100°)
- 3. Insure this form is completed and signed by donor.
- 4. Insure specimen lid is tight, sealed properly with evidence seal, and initialed by donor.
- 5. Insure I.D. number on specimen and form match.
- 6. Place specimen in tamper-proof bag and seal in the presence of the donor.
- 7. Collector signs this form and indicates date.

- Pre-Employment
- Random
- For Cause

I certify that the specimen identified by this form was collected according to specified procedures, was properly identified and prepared for transport to the laboratory.

Helen Johnson Collector Signature Helen Johnson Printed Name 1/10/93 Date
59th Street Collection Center Collection Site

COMMENTS: _____

LABORATORY USE ONLY

I CERTIFY THAT I RECEIVED A PROPERLY SEALED AND IDENTIFIED SPECIMEN AND THAT I WILL HANDLE IT ACCORDING TO APPLICABLE HANDLING REQUIREMENTS FOR STORAGE OR TESTING.

Recipient Signature Printed Name Date

***** SPECIMEN I.D. NUMBER 133212 *****

EVIDENCE SEAL



EVIDENCE SEAL

SPECIMEN I.D. NUMBER

133212

Donor Initials

J.S.

1/10/93

Date

EVIDENCE SEAL



EVIDENCE SEAL

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PROCEDURE FOR DIGITAL D.U.I. CHECK

It is an established medical fact that the amount of alcohol in a person's breath is directly proportional to the amount of alcohol the bloodstream. The Digital D.U.I. Check is designed to accurately determine the level of alcohol in a person's bloodstream by analyzing exhaled breath.

Step One: Preparation

The employee selected for testing shall not be allowed to smoke, eat or drink liquids until the test is completed. Do not administer the test until 15 minutes after the last drink, and one minute after smoking.

The supervisor or Primary Management official will retrieve the Digital D.U.I. Check which shall be located in a secured area.

***** For optimum efficiency and accuracy, the battery compartment of the instrument is left empty and the AC adapter is left plugged in. This allows the instrument to be left on even when not in use.

Step Two: Operation

The supervisor/Primary Management official will insert a new mouthpiece into the unit and, following the directions on the unit, will instruct the employee to exhale into the mouthpiece.

The GREEN Test indicator light will activate; the employee continues to exhale until the GREEN Test indicator light turns RED and stops.

For conclusive results, a second test will be given. Both results will be listed on the form that is completed.

Step Three: Test Results

After the test results are available, the supervisor/Primary Management official, the employee, and any witnesses shall complete the EMPLOYEE SOBRIETY TEST FORM. This form identifies the personnel who are involved in the testing, the test results, the witnesses, and any disciplinary action.

The original copy is forwarded to the Primary Management official who will forward it to the Personnel Department to be placed in the employee's drug and alcohol testing program file. A photocopy shall be given to the employee.

EMPLOYEE SOBRIETY TEST

EMPLOYEE
NAME _____

DEPT. _____

EMPLOYEE
SIGNATURE: _____

SCHEDULED
SHIFT: _____

DATE
ADMINISTERED _____ TIME _____ BY _____

TEST REQUESTED BY: _____

REASON FOR TEST: _____

WITNESSES:

TEST RESULTS:

TEST #1: _____% BLOOD ALCOHOL

TEST #2: _____% BLOOD ALCOHOL

COMMENTS: _____

IS EMPLOYEE ABLE TO
WORK SCHEDULE SHIFT? YES _____ NO _____

DISCIPLINARY ACTION TAKEN? YES _____ NO _____

IF YES, DESCRIBE ACTION TAKEN: _____

