



Supervisor's Reasonable Suspicion Testing Checklist

AWC
DRUG &
ALCOHOL
CONSORTIUM

An employer must refer an employee for testing when the employer has reasonable suspicion to believe that the covered employee has used a prohibited drug and/or engaged in alcohol misuse. A supervisor(s) who has been trained in detecting the signs and symptoms of drug use and alcohol misuse must make the observations.

The following checklist is designed to serve as a **guide** in the event you determine that such testing may be necessary. Please review this guide and follow up by completing the **Impaired Behavior Incident Report Form/Reasonable Suspicion Documentation**.

Name of Supervisor: _____ **Date:** _____

Name of Employee: _____ **Date:** _____

Inquire and observe:

- Ask the employee to describe the event(s) that took place (if any) or to explain his or her conduct.
- In talking to the employee, don't be accusatory. Explain that you are just gathering information.
- Note the names of other employees and supervisors who are present.
- If witnesses saw a specific event or behavior, ask them to describe it. (How far away were they? How long did they observe the person? What, if anything, caused them to believe the behavior observed was caused by substance abuse? Why?)
- Remember that observations must be specific and made at the time the suspicion is formed.
- Look for the signs of drug use and alcohol misuse (see attached list).
- If you suspect alcohol use; For a DOT alcohol test your observations must be made just before, during or just after the employee performs a safety sensitive function defined by DOT. Otherwise, conduct a non-DOT alcohol test under employer authority.
- If possible, take notes documenting your observations regarding physical signs and symptoms, emotional state, physical evidence and other related facts.

Make the reasonable suspicion determination:

- Do not rely solely on anonymous tips or hearsay.
- If possible, request that another supervisor confirm your observations.
- Remember that safety is the first priority.

Inform the employee of your request:

- Remove the employee from the vehicle or workplace.
- Explain that you believe the employee may not be fit for duty and that you are requesting him or her to accompany you to the collection site.
- Inform the employee of the consequences of refusal.
- Explain that the test will be handled with strict confidentiality.
- Avoid accusations. Remind the employee that you are merely requesting additional data.

If an employee refuses:

Remind the employee of the consequences:

- Refusal to take a drug or alcohol test is the equivalent of a verified positive result, necessitating removal from a safety-sensitive function and evaluation by a substance abuse professional.
- Ensure that the employee does not perform any safety-sensitive function.

Transport the employee:

- Do not let the employee transport himself or herself. Although this is not a legal requirement, an employee suspected of substance abuse may pose a danger to himself or herself and to others.
- Ensure that the employee does not have an opportunity en route to the collection site to ingest anything that could affect the test result.

At the collection site:

- If you are the supervisor who made the reasonable suspicion determination, someone else must conduct a breath test.
- If you are the employee's direct supervisor, you should not serve as the collection site person for a urine test.
- If you have not already done so, take a moment to document the observations supporting your reasonable suspicion determination.
- If an alcohol test is not performed within two hours of your determination of reasonable suspicion, document any reasons for the delay.
- If an alcohol test is not performed within eight hours of your determination of reasonable suspicion, do not conduct a test and document any reasons for the delay.

After the test:**For alcohol test:****Screen test**

- If screening test indicates AC of less than .02.
- Otherwise, conduct confirmation test.

Confirmation test

- If confirmation test indicates AC of less than .02, this is a negative result.
- If confirmation test indicates AC is between .02 and .039:
 - FTA/PHMSA: remove employee from duty for eight hours or until AC is less than .02.
 - FMCSA: remove the employee from duty until the next day or the start of the employee's next regularly scheduled duty period, but not less than 24 hours following the test.
- If confirmation test indicates that AC is over .04, ensure employee will not perform safety-sensitive function and refer employee to Substance Abuse Professional (SAP).

For drug test:

- The employee should not be permitted to return to a safety-sensitive duty unless test is verified as negative.

Employees should not be returned to duty until all test results have been received and the employee no longer exhibits behavior causing supervisor to question employee's fitness to duty.

Complete documentation:

- Ensure that you have recorded or collected the following – you may do this using the **Impaired Behavior Incident Report Form/Reasonable Suspicion Documentation**:
 - Date, time and place of observation
 - Name of employee referred for testing
 - Complete description of all relevant observations
 - Names of other employees and supervisors present
 - Corroborating statements from other supervisors, if any
 - A written record of observations leading to controlled substance and/or alcohol reasonable suspicion testing must be prepared and signed by the observing supervisor within 24 hours of observation or before the test results are released, whichever is earlier.

Common signs of alcohol and controlled substance abuse

Alcohol

- Depressant
- Initial stimulation, followed by depressed nervous system
- Flushed skin
- Glazed appearance of the eyes
- Odor on breath
- Slowed reaction time
- Impaired motor skills

Amphetamines (Stimulant)

- Hyperexcitability, restlessness
- Dilated pupils
- Increased heart rate and blood pressure
- Heart palpitations and irregular beats
- Profuse sweating
- Rapid respiration
- Confusion
- Panic
- Talkativeness
- Inability to concentrate
- Heightened aggressive behavior

Cocaine (Stimulant)

- Financial problems
- Frequent and extended absences from meetings or work assignments
- Increased physical activity and fatigue
- Isolation and withdrawal from friends and normal activities
- Secretive behaviors, frequent non-business visitors, delivered packages, phone calls
- Unusual defensiveness, anxiety, agitation
- Wide mood swings
- Runny or irritated nose
- Difficulty in concentration
- Dilated pupils and visual impairment
- Restlessness
- Formication (sensation of bugs crawling on skin)
- High blood pressure, heart palpitations and irregular rhythm
- Hallucinations
- Hyperexcitability and overreaction to stimulus
- Insomnia
- Paranoia and hallucinations
- Profuse sweating and dry mouth
- Talkativeness

Marijuana

- Reddened eyes
- Dilated pupils
- Rapid, loud talking
- Excessive laughter
- Sensory distortion
- Increased appetite
- Trance-like state
- Odor similar to burnt rope
- Giddiness
- Moodiness
- Erratic & volatile
- Slowed reflexes
- Reduced concentration
- Short-term memory loss
- Lackadaisical "I don't care" attitude

Opiates (Narcotics)

- Pinpoint pupils that do not respond to light
- Respiratory depression
- Drowsiness
- Nausea and vomiting
- Apathy; decreased physical activity
- Short-lived euphoria
- Vacillates from alert to drowsy states
- Impaired reaction time
- Visual distortion
- Lowered concentration
- Less inhibited, risk-taking
- React in anger to others
- High followed by stupor
- Difficulty focusing

Phencyclidine (PCP)

- Hallucinogen
- Severe confusion & agitation
- Jerky eye movements
- Delusions
- Anxiety, panicked behavior
- Increased blood pressure
- Seizures, convulsions
- Impaired coordination
- Risk-taking behaviors
- Severe disorientation