



pennsylvania

EMPLOYEE GUIDE TO CDL DRUG AND ALCOHOL TESTING

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Overview

In 1991 the federal government passed *The Omnibus Transportation Act*, which was intended to create a drug and alcohol free transportation industry. This act applies to individuals who are Commercial Driver's License (CDL) holders and who operate commercial motor vehicles (these individuals are called CDL-covered employees). The drug and alcohol testing that is conducted under this act is called federal or DOT (Department of Transportation) testing.

In addition to the federal requirements, the Commonwealth of Pennsylvania has established specific policies and practices for its CDL-covered employees. These policies and practices are outlined in [Management Directive 505.34, Commercial Driver License Drug and Alcohol Testing Requirements](#) and [Manual 505.5 Amended, Commercial Driver License Drug and Alcohol Testing and Related Procedures](#).

Drug and alcohol testing and education are a requirement of both the federal government and the commonwealth. This handbook serves to communicate the policies that apply to you as a CDL-covered employee for a commonwealth agency. This handbook addresses the rules and policies that apply to CDL-covered employees regarding the use of drugs and alcohol, required tests, testing procedures, and test results and their consequences. If you have questions about the information in this handbook you should ask your supervisor or your agency CDL Coordinator.

The information included in this handbook will also educate you to the potential effects drugs and alcohol can have on your (or your co-workers') ability to perform job duties in a safe manner. While the federal law was enacted to increase the safety of the public and prevent vehicular accidents caused by drugs or alcohol, the act also created opportunities for education and treatment for individuals struggling with addictions.

Drug and alcohol education, and testing for CDL-covered employees is not just the law; it is the right thing to do. The protection of commonwealth employees and those they serve is our utmost priority. It is everyone's responsibility to create a healthy, safe work environment.

Who is subject to federal DOT testing?

The federal DOT drug and alcohol testing rules apply to every person who operates a commercial motor vehicle (CMV) in interstate or intrastate commerce. This includes individuals who only operate a CMV occasionally or in an emergency.

A CMV is one used to transport passengers or property if it:

- 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
- Has a gross vehicle weight rating of 26,001 or more pounds; or
- Is designed to transport sixteen (16) or more passengers, including the driver; or
- Is of any size and is used in the transportation of materials found to be hazardous and is required to be placarded.

Note: Vehicles that are only utilized for fighting fires and non-placarded equipment that only operates in areas not open to public travel are not considered to be CMV's for the purpose of these testing regulations.

What are safety-sensitive duties?

The work duties associated with operation of a CMV are called "safety-sensitive." Safety-sensitive functions are defined as all the time from when a CDL-covered employee begins to work or is required to be in readiness to work until the time the employee is relieved from work and all responsibility for performing work. Safety-sensitive functions include:

1. All time at an employer or shipper plant, terminal, facility, or other property, or on 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 the Federal Motor Carrier Safety Regulations or otherwise inspecting, servicing, or conditioning any CMV vehicle at any time;
3. All time spent at the driving controls of a CMV in operation;
4. All time, other than driving time, in or upon any CMV (except time spent resting in a sleeper berth);
5. All time loading or unloading a CMV, 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.

What conduct is prohibited (also known as prohibited conduct)?

- You may not use any illicit (illegal) drug. *
- You may not possess any illicit drug while assigned to or performing safety-sensitive functions.
- You may not use any legal prescription which is a controlled substance (or possess it while assigned to or performing safety-sensitive functions), **unless** you are taking it in accordance with the instructions of a licensed medical provider, and that medical provider has advised you that it will not adversely affect your ability to safely operate a CMV.
- You may not use or possess alcohol while assigned to or performing safety-sensitive functions. This includes anything that contains alcohol, such as mouthwash and cough medication.
- You may not perform safety-sensitive functions within four (4) hours after using alcohol.
- You may not report for duty or remain on duty if you:
 - Are under the influence or impaired by alcohol
 - Have a blood alcohol concentration of .02 or greater
- You may not refuse to submit to any test for alcohol or controlled substances (refusal also means adulterating or substituting a specimen).

* Note: Medical marijuana, even if legally prescribed in a state, is an illegal drug under federal law. The use of medical marijuana is thus prohibited conduct for CDL-covered employees.

What about prescription medicine and over-the-counter (OTC) drugs?

These may affect your fitness for duty or ability to perform your duties safely. It is your responsibility to know how the medications you take for health reasons affect your ability to perform your job in a safe manner. You should always ask your medical provider how any medication you are taking will affect your ability to operate a CMV safely.

You may use prescribed medications and OTC drugs and still perform your safety-sensitive duties; however, you must meet the following standards:

- A **prescription medication** must be prescribed to you by a licensed medical provider, such as your personal doctor.
 - The medication must be used at the dosage prescribed or authorized.
 - The prescription must be valid (not expired).
 - If it is determined that a medication could cause impairment to the safe performance of your duties, you must have your medical provider complete the CDL Employee Prescription Medications form (Appendix B) and give it to your agency supervisor or human resource office.
- An **over-the-counter medication** must not prevent you from safely performing your job, and must be used at the dosage prescribed or authorized.

What substances will be tested for?

You will be tested for both drugs and alcohol.

Alcohol tests are conducted using only a breath or saliva specimen. The breath or saliva specimen is analyzed for its blood alcohol level.

Drug tests are conducted using only urine specimens. The urine specimen is analyzed for the following drugs and metabolites:

- Marijuana metabolites/THC
- Cocaine Metabolites (including crack)
- Amphetamines (including methamphetamine and MDMA, also known as Ecstasy)
- Opiates (including codeine, heroin, morphine)
- Phencyclidine (PCP)

When will tests be conducted?

Drug and alcohol tests will be conducted at the following times:

1) Pre-employment

Drug testing is required prior to the first time an employee performs safety-sensitive duties for an employer. This applies both to applicants and to current employees who are transferring into a CDL-covered position. No pre-employment alcohol testing is conducted.

If an employee has been unavailable for random testing for 30 calendar days or longer (usually due to an extended absence), a pre-employment test is required before he/she can be returned to safety-sensitive duties.

2) Random

The Federal Motor Carrier Safety Administration (FMCSA) annually determines what minimum percentage of the CDL-covered workforce must be tested on a random basis (currently, the annual percentage rates are 10% for alcohol and 50% for drugs).

The commonwealth's testing vendor uses a computer program to randomly select 1/12 of the required annual number of tests each month. Employees may be randomly selected for both a drug and alcohol test, or just a drug test. So that employees cannot anticipate when testing may happen, random testing may occur on any day of the month.

Employees randomly selected by the vendor for a test are immediately put back into the random test pool, so the chance of being picked is the same each time.

3) Reasonable Suspicion

Reasonable suspicion drug and alcohol testing is required whenever a supervisor observes that an employee may be unfit for duty. The supervisor will use his/her observation of the employee's current appearance, behavior, speech, and/or body odor in order to decide if a reasonable suspicion test must be conducted.

4) Post-Accident

If an employee operating a CMV is involved in an on-duty motor vehicle accident, post-accident testing is required in three specific circumstances:

- The accident involves a fatality (regardless of who the fatality is), or
- One of the vehicles involved in the accident must be towed from the scene **AND** the CDL-covered driver receives a moving violation citation arising from the accident, or
- An injury to one of the individuals involved in the accident requires treatment away from the scene **AND** the CDL-covered driver receives a moving violation citation arising from the accident.

The post-accident alcohol test must be done within 8 hours of the accident. You must remain available for testing and refrain from consuming alcohol for the entire 8 hour post-accident period or until you are tested, whichever comes first.

The post-accident drug test must be done within 32 hours of the accident. You must remain available for testing for the entire 32 hour period or until you are tested, whichever comes first.

Federal regulations are very clear about when a post-accident drug and alcohol test may be conducted. It may not be conducted unless one of the three specific circumstances described above exist, and can only be conducted within the above referenced time frames. A post-accident test cannot be conducted for any other reason, including in anticipation that an injured person will die, or in anticipation that an employee will receive a moving violation citation at a later time.

5) Return-to-Duty

Return-to-duty tests are only conducted after an employee has tested positive (which includes refusals to test and engaging in prohibited conduct), or has self-disclosed alcohol abuse or drug use. Return-to-duty tests are not conducted until the employee has been cleared by the State Employee Assistance Program (SEAP).

The employee will be tested for both drugs and alcohol. Urine specimen collections for return-to-duty drug tests are observed collections; a same gender employee of the collection site will conduct the observation.

6) Follow-up

Follow-up tests are only conducted after an employee has tested positive (which includes refusals to test and engaging in prohibited conduct).

Once the employee returns to safety-sensitive duties, s/he will be subject to a minimum of 6 follow-up alcohol and/or drug tests within the first 12 months, and the follow-up testing may continue for up to 5 years. The number, type and frequency of the follow-up tests are at the discretion of the Substance Abuse Professional (SAP) who evaluated the employee after the initial positive test. The employee is not permitted to know the contents of the follow-up testing schedule. Urine specimen collections for follow-up drug tests are observed collections; a same gender employee of the collection site will conduct the observation. Follow-up testing is in addition to all other federally required testing to which the employee is still subject.

How is a urine drug test administered?

The drug testing process consists of 3 components:

- the urine collection
- testing the urine at the laboratory
- review of the laboratory results by a Medical Review Officer (MRO)

1) The urine collection

Your agency will notify you of a required drug test, and provide you with a "Commonwealth of Pennsylvania Drug & Alcohol Testing Program Federal Cover Sheet" (completed by the supervisor), and a Federal Drug Testing Chain of Custody and Control form (CCF), both of which you will take to the collection site. During the collection process, the collector will:

- Verify your identity using a current valid photo ID, such as your CDL driver's license.
- Ask you to remove unnecessary garments (for example, your coat) and to empty your pockets. You will be allowed to keep your wallet.
- Instruct you to wash and dry your hands.
- Select (or have you select) a sealed collection kit and open it in your presence.
- Request that you provide a urine specimen (a minimum of 45 mL) by urinating into the provided collection container. You will be afforded privacy for urination, unless your collection must be observed. You will have an observed collection in the following circumstances:
 - The reason for your test is return-to-duty or follow-up.
 - The collector has reason to believe that you may attempt to adulterate or substitute the specimen.
 - The MRO has directed that you have an observed collection.
 - An observed collection means that a same gender observer will have you raise and lower your clothing so that s/he can observe you front and back, and s/he will then watch you urinate into the collection container.
- Require you to remain in the testing area for up to 3 hours, if you were unable to provide 45 mL of urine on the first attempt (this is called "shy bladder"):
 - The collector will offer you up to 40 ounces of fluid over the 3 hours and urge you to drink.
 - The collector will ask you to provide a new urine specimen into a new collection container (the urine from your first collection will be discarded).
 - If you do not provide a sufficient specimen within the 3 hours you must obtain a medical evaluation at your own cost within 5 days to determine if there is an acceptable medical reason and provide that documentation to the MRO. If the MRO determines that there is no legitimate medical or pre-existing psychological reason, this is considered a **refusal to test**.
- Check the color and temperature of the urine specimen.
- In your presence, pour the urine into 2 separate bottles (called Bottle A and Bottle B), seal them with tamper-evident tape, and ask you to sign the seals after they are placed on the bottles. You should keep the urine specimen in full view at all times until the bottles are sealed and you have signed the labels, to ensure that the bottles are not mislabeled and no tampering with your urine specimen has occurred.

- Ask you to provide your name (printed and signature), date of birth and daytime and evening phone numbers on the MRO copy (copy #2) of the Federal Drug Testing Custody and Control Form (CCF).
- Complete the necessary documentation on the Test Facility copy (copy #1) of the CCF.
- Give you the Employee Copy (copy #5) of the CCF.
- After you leave the collection facility, package and ship both sealed bottles of urine and the completed CCF to the laboratory.
- When you return to work, you are to show the Employee Copy of the CCF to your supervisor to verify that you completed the drug testing process.

Note: Once the collection process has started, if you leave the collection facility before it is completed it will be considered a **refusal to test**.

2) Testing at the laboratory

After your specimen is received at the laboratory, the laboratory staff will:

- Examine the bottles for flaws (for example, no urine in the bottles due to leakage or seals broken). Flawed specimens will be rejected for testing.
- Open Bottle A and conduct a screening test (which includes specimen validity testing):
 - If the screening test is negative, the specimen will be reported as negative to the MRO.
 - If the screening test determines that the specimen is adulterated or substituted, the specimen will be reported as adulterated or substituted to the MRO.
 - If the screening test is positive, the specimen will be analyzed again using a completely different testing methodology, called a confirmation test.
- If the confirmation test is negative, the specimen will be reported as negative to the MRO.
- If the confirmation test is positive, the specimen will be reported as positive to the MRO.
- If the lab result on Bottle A is positive, adulterated or substituted, the lab will store Bottle A and Bottle B for at least 12 months.

3) Review of the laboratory result by a Medical Review Officer (MRO)

The MRO is a licensed physician who works for the drug/alcohol testing vendor. The MRO has knowledge and clinical expertise in substance abuse disorders and must meet specific federal requirements. The MRO is an independent impartial gatekeeper to the accuracy and integrity of the CDL drug testing program. As a safeguard to quality and accuracy, the MRO reviews each laboratory test result and will rule out legitimate medical explanations before verifying any non-negative laboratory result. After receiving the laboratory report, the MRO will:

- Review the paperwork for accuracy.
- If the laboratory result was negative, report a negative result to the commonwealth.

- If the laboratory result was positive, conduct an interview with you to determine if there is a legitimate medical reason for the laboratory result:
 - If there is a legitimate medical reason, for example, you were taking a prescription medication that caused the laboratory result; the MRO will report a **negative** result to the commonwealth. You must provide acceptable medical documentation to the MRO to establish a legitimate medical reason.
 - If there is no legitimate medical reason, the MRO will report a **positive** result to the commonwealth.
- If the laboratory result is adulterated or substituted, conduct an interview with you to determine if there is a legitimate medical reason for the laboratory result:
 - Adulteration includes adding substances to the urine specimen.
 - Substitution includes submitting a specimen that is not your urine, such as another liquid or another individual's urine.
 - If there is a legitimate medical reason, the MRO will report a **cancelled** result to the commonwealth. You must provide acceptable medical documentation to the MRO to establish a legitimate medical reason.
 - If there is no legitimate medical reason, the MRO will report a **refusal to test** result to the commonwealth.
- If the laboratory result was non-negative (positive, adulterated or substituted), and you refuse to discuss the results with the MRO (including not returning phone calls to the MRO), the MRO will report that **non-negative** result to the commonwealth.
- Inform you that you have 72 hours from the time of the verified result to request that the MRO have your Bottle B (the split specimen) sent to another (different) laboratory for analysis for the same substance or condition that found in Bottle A.
 - You must make the request to have your split specimen tested personally to the MRO. Neither your agency nor your union representative may make that request for you.
 - The commonwealth will pay for the cost of having your split specimen tested.

How is an alcohol test administered?

Your agency will notify you of a required alcohol test, and provide you with a "Commonwealth of Pennsylvania Drug & Alcohol Testing Program Federal Cover Sheet" (completed by the supervisor) which you will take to the collection site. The collection site will use its own "U.S. Department of Transportation (DOT) Alcohol Testing Form."

A breath alcohol test has 2 parts: screening and confirmation.

1) Screening test. The Screening Test Technician or Breath Alcohol Technician (BAT) will:

- Verify your identity using a current valid photo ID, such as your CDL driver's license.
- Complete Step 1 on the Breath Alcohol Testing Form.
- Ask you to sign Step 2 on the form. Refusal to sign this certification is a **refusal to test**.
- Conduct the screening test using either saliva or an evidential breath testing (EBT) device.

- If after several attempts you are unable to produce an adequate amount of breath the testing will be stopped (this is called "shy lung"). You will be required to obtain a medical evaluation at your own cost within 5 days to determine if there is an acceptable medical reason and provide that documentation to your agency. If it is determined that there is no legitimate medical reason, this is considered a **refusal to test**.
- Show you the screening test result and record that result on the testing form.
- If the result is a breath alcohol concentration of less than 0.02, the result is **negative**.
 - The technician will date the form and sign the certification in Step 3 and provide you with a copy.
 - When you return to work you are to show your copy of the alcohol test result to your supervisor to verify that you completed the alcohol testing process.
- If the result of the screening test is an alcohol concentration of 0.02 or greater, you will be required to take a confirmation test.

2) Confirmation test. The confirmation test will be administered by a BAT using an EBT device.

- You will be required to wait at least 15 minutes, but not more than 30 minutes before the confirmation test is conducted.
- Leaving the test area without authorization or without completing the confirmation test is a **refusal to test**.
- You will not be permitted to eat, drink, smoke, belch, or put anything into your mouth during the waiting period. The confirmation test will be conducted at the end of the waiting period, even if you haven't followed these instructions.
- The BAT will:
 - Perform an "air blank" on the EBT device to ensure that there is no residual alcohol in the EBT or in the air around it.
 - Conduct the confirmation test, using a new mouthpiece.
 - Show you the confirmation test result on the EBT and the printout from the EBT.
- The confirmation test result is the "test of record" and is the final result. The technician will date the form and sign the certification in Step 3 and provide you with a copy.
- If the result is a breath alcohol concentration of less than 0.02, the result is **negative**. When you return to work you are to show your copy of the alcohol test result to your supervisor to verify that you completed the alcohol testing process.
- If the result is .02 or higher, the technician will contact your workplace. You will not be permitted to drive away from the testing facility or to return to work.
 - If the result is between .02 and .039, you must be removed from safety-sensitive duties for a minimum of 24 hours. Although this is not a positive test you may also be subject to disciplinary action.
 - If the result is .04 or higher, the result is **positive**.

What is a Refusal to Test?

Federal regulations prohibit you from refusing a test. The following are some examples of conduct that the regulations define as refusing a test:

- Failing to appear for any test after you were directed to do so by your agency.
- Failing to remain at the testing site until the testing process is completed.
- Failing to provide a urine or breath sample.
- Failing to permit the observation or monitoring of your providing a urine specimen.
- Failing to provide a sufficient urine or breath sample (when it has been determined through the required medical evaluation that there was not adequate medical explanation for the failure).
- Failing to take a second test when directed to do so.
- Failing to cooperate with any part of the testing process, including but not limited to:
 - Refusing to empty your pockets
 - Behaving in a confrontational manner with the collector
 - Failing to wash your hands when directed to do so.
- Failing to obtain a medical evaluation as part of a “shy bladder” or “shy lung” procedure.
- Failing to sign Step 2 of the Alcohol Test Form.
- Providing a urine specimen that is verified as adulterated or substituted
- Failing to follow the observer’s instructions during a directly observed urine collection.
- Possessing or wearing a prosthetic or other device that could be used to interfere with the collection process
- Admitting to the collector or MRO that you adulterated or substituted a specimen.

What are the consequences of a Refusal to Test?

A determination of refusal to test has the same consequences as those for a positive test.

What are the consequences of engaging in Prohibited Conduct (see page 3 for the list of Prohibited Conduct)?

Engaging in prohibited conduct has the same consequences as those for a positive test.

What are the consequences of a Positive Test?

You will be immediately removed from safety-sensitive duties, and you will not be permitted to return to safety-sensitive duties **for any employer** until you have completed the Substance Abuse Professional (SAP) process.

That process includes:

- An evaluation by a SAP.
- Successful completion of the education and/or treatment recommended by the SAP.
- Re-evaluation by the SAP to determine your readiness for return to safety-sensitive duties.
- Testing negative on a return-to-duty drug and alcohol test.

You may be subject to termination from your employment with the commonwealth. If you are terminated you must complete the SAP process at your own cost.

If you are not terminated from commonwealth employment you will be offered the opportunity to complete the SAP process through the State Employee Assistance Program (SEAP). You may also be subject to disciplinary action by your agency.

After completing the SAP process you will also be subject to follow-up testing.

What is a Self-Disclosure?

Self-disclosure occurs if you tell your supervisor, manager or human resources office that you are abusing alcohol, misusing prescription medication, or using an illegal drug. An employee who self-discloses is not subject to the SAP process provided that both of the following requirements are met:

- You have not self-disclosed after being notified of a required drug and/or alcohol test.
- You make the self-disclosure prior to performing any safety-sensitive duties during that work shift (this usually will mean before reporting for duty).

If the self-disclosure does not meet these requirements, you will be subject to the SAP process (in other words, it will be treated just as if you had a positive test result).

If the self-disclosure meets the above requirements, you will be required to complete a Self-Disclosure referral through SEAP. The following will occur:

- You will be immediately removed from safety-sensitive duties.
- You will be required to contact SEAP, be evaluated by a drug and alcohol expert, and successfully complete the evaluator's recommended course of treatment.
- You will be required to provide documentation from SEAP that you have been evaluated and successfully completed the recommended course of treatment.
- You will be required to pass return-to-duty drug and alcohol tests before being placed back on safety-sensitive duties.

The agency may not take adverse action (discipline) against you if you make a qualified self-disclosure, solely on the basis of that self-disclosure. An employee who makes a qualified self-disclosure is also not subject to follow-up testing upon return to safety-sensitive duties.

Effects of Drugs and Alcohol

Alcohol and drug use poses a major safety hazard in the commercial transportation industry. Almost 46% of all accidents involving large trucks can be attributed to either drugs or alcohol. Most significantly, the use or misuse of prescription drugs is the number one causation factor when the driver, as opposed to vehicle or environmental factors, was responsible for the accident. The Large Truck Crash Causation Study conducted by the Federal Motor Carrier Association and the National Highway Traffic Safety Administration released results which showed that for truck crashes where the driver was responsible for the accident:

- 26.3% were related to prescription drug usage
- 17.3% were related to over the counter drug use
- 2.3% were related to illegal drug use
- 0.8% was related to alcohol use.

Education is important to increase your awareness about the harmful outcomes of addictive substances in the work place. Appendix "A" lists common addictive substances, their short-term effects, potential consequences and effects on driving. Please become familiar with its contents.

Understanding the warning signs is the key to increasing your personal safety as well as your co-workers'. Symptoms of drug and/or alcohol dependency include but are not limited to:

- Failing to cut down or quit despite repeated tries.
- Increased tolerance levels.
- Blackouts.
- Sneaking, using alone or hiding the use of drugs/alcohol.
- Developing a growing need for drugs/alcohol.
- Finding excuses for drug/alcohol use.
- Avoiding family and friends who may express concerns about use of drugs/alcohol.
- Developing financial, legal, medical, family, and work problems.
- Inability to enjoy events or social gatherings without using drugs/alcohol.
- Loss of other interests and an increased preoccupation with using drugs/alcohol.
- Engaging in actions while under the influence that cause regret or shame later.
- Neglecting important responsibilities in order to use drugs/alcohol.
- Being willing to do almost anything to get the drugs/alcohol.
- Inability to discuss/being in denial about the seriousness of the addiction problem.
- Poor diet and neglecting hygiene.
- Engaging in risky behavior such as unsafe sex or driving while under the influence.

When you report to work, you have an obligation to be fit for duty and not under the influence of any substance which makes you incapable of safely operating a motor vehicle. If you feel that you are unfit for duty, you must immediately report this to your supervisor. This would apply to something as simple as feeling the effects of an over the counter cold medicine to a more serious substance abuse problem. Remember to review the section on self-disclosure and follow the steps outlined if you are sharing your problem.

Sometimes a coworker may appear to be under the influence of drugs or alcohol and you may be unsure about how to handle it. It is not recommended that you confront someone while he or she is under the influence because he or she may be unwilling or unable to listen to you. If you suspect that a coworker is unfit for duty, you have an obligation to report it to your supervisor. This may be uncomfortable for you but you must ask yourself this question: Does your coworker function in a capacity where he or she can pose a threat to his or her safety or the safety of others? If the answer is yes, then you must take action. Your actions could save your coworker's life.

Help for a drug or alcohol problem is available for all commonwealth employees and their families by calling the State Employee Assistance Program (SEAP). SEAP provides free consultation, information, evaluation and referral services. Working with SEAP, you have access to a large network of providers in convenient locations across the commonwealth, and these providers will help you develop a plan to overcome and resolve the problem. SEAP is available 24 hours a day, 7 days a week at 800.692.7459, and the hotline is always answered by master's level counselors. Additional benefits may also be available through your medical benefits plan; for information call the phone number listed on the back of your medical benefits card.

The commonwealth encourages you to seek help if you have a drug or alcohol problem. Commonwealth employees provide necessary services to the citizens of Pennsylvania. You have an important part in providing those services.

Appendix A

Consequences of Addictive Substances			
Addictive Substance	Short-term Effects	Potential Consequences	Effects on Driving
Alcohol	<ul style="list-style-type: none"> • Loss of inhibition • Sedation • Euphoric high followed by stupor • Accidental death (e.g. reckless driving) • Impotence 	<ul style="list-style-type: none"> • Depression • Heart Disease • Premature aging • Liver damage • Physical dependence • Withdrawal seizures • Memory loss • Hallucinations • Nutritional deficiencies • Sleeping problems • Digestive problems • Birth defects (alcohol consumption during pregnancy) 	<ul style="list-style-type: none"> • Impaired reaction time • Impaired motor coordination • Reduced concentration • Tendency to take unnecessary risks • Overreaction
Opiates (including codeine, heroin, morphine)	<ul style="list-style-type: none"> • Brief euphoric high followed by stupor • Vacillating between alertness & drowsiness • Slowed breathing rate • Heavy feeling in arms & legs • Nausea and/or vomiting • Severe itching 	<ul style="list-style-type: none"> • Loss of appetite • Restlessness • Rapid physical dependence (addiction) • HIV infection/Hepatitis B (from sharing needles) • Bacterial infection (from dirty needles) • Abscesses • Arthritis • Heart, lung, liver, kidney and/or brain damage • Spontaneous abortion (if pregnant) • Withdrawal symptoms: chills, nausea/diarrhea, muscle aches, runny nose/eyes, sweating, insomnia • Coma • Death (from depression of cardiovascular and respiratory systems) 	<ul style="list-style-type: none"> • Impaired reaction time • Impaired motor coordination • Reduced concentration • Tendency to take unnecessary risks • Overreaction • False sense of security • Visual distortion

Consequences of Addictive Substances			
Addictive Substance	Short-term Effects	Potential Consequences	Effects on Driving
Stimulants (including amphetamines, methamphetamine, cocaine, crack)	<ul style="list-style-type: none"> • Euphoria • Dilated pupils • Increases in blood pressure, heart rate, respiration rate and body temperature 	<ul style="list-style-type: none"> • Intensifies feelings of anger, restlessness, paranoia and fear • Short attention span • Irritability • Loss of appetite • Sleeplessness • Loss of sense of reality • Hallucinations • Anxiety & Depression • Loss of consciousness • Seizure • Heart attacks • Death (from depression of nervous system function) 	<ul style="list-style-type: none"> • Lapses in attention & concentration • Aggressive behavior • Over-stimulated reflexes • Impaired motor coordination • False sense of alertness and security • Distorted vision
Marijuana/THC	<ul style="list-style-type: none"> • Memory impairment • Rapid heartbeat • Increased blood pressure • Impaired concentration, reflexes, motor skills, judgment and perception • Accelerated and fragmented thought processes 	<ul style="list-style-type: none"> • Physical dependence • Depression • Lung problems • Impaired motor skills • Chronic fatigue • Lack of motivation • Impairment of short term memory • Can create or aggravate dysfunctions related to thinking, learning and recall 	<ul style="list-style-type: none"> • Impaired reaction time, • Impaired concentration • Impaired ability to track vehicles and objects • Distorted time and distance sense • Lack of control of vehicle velocity and positioning • Distorted visual and depth perception.

Consequences of Addictive Substances			
Addictive Substance	Short-term Effects	Potential Consequences	Effects on Driving
Phencyclidine (PCP)	<ul style="list-style-type: none"> • Increase in blood pressure, respiration and pulse rate • Sweating • Dizziness • Flushing of the face • Loss of coordination • Paranoia, fearfulness and anxiety (schizophrenia-like symptoms) • Dulled sense of touch • Dulled sense of pain • Impairment of time perception • Auditory and visual hallucinations 	<ul style="list-style-type: none"> • Speeding up or slowing down of body functions (reactions vary) • Change in perception of own body or other forms • Changes in speech, muscle coordination and vision • Slowing of body movements • Repeated convulsions • Coma • Heart and lung failure • Ruptured blood vessels in the brain • Death 	<ul style="list-style-type: none"> • A feeling of owning the road, sense of invulnerability and power • Aggressive behavior • Visual distortion • Impaired coordination and dulled senses
Sedatives (sleeping pills, anti-anxiety drugs, central nervous system (CNS) depressants, allergy medications)	<ul style="list-style-type: none"> • Sedation • Memory impairment • Poor coordination • Slowed breathing rate 	<ul style="list-style-type: none"> • Physical dependence • Seizures • Birth defects (pregnancy) • Death 	<ul style="list-style-type: none"> • Drowsiness • Slowed reactions • Diminished concentration and coordination • Tunnel vision • Impairment in the ability to follow, steer and stay in correct lane

CDL Employee Prescription Medications Form

This information is required to comply with *The Omnibus Transportation Employee Testing Act of 1991*.

Instructions:

- Employee completes Section 1 prior to giving form to treating physician.
- Treating physician completes Section 2, signs and dates, and returns completed form to employee.
- Employee submits completed form to supervisor, who immediately sends it to agency human resource office. Employee may also submit completed form directly to agency human resource office.

Section 1: Employee Information:

Employee Name	Employee Number	Name of Treating Physician	Today's Date
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Section 2: Medication Information

The above-named patient currently is taking the following prescription medication(s) which will impair his/her ability to operate Commercial Drivers License motorized vehicles/equipment.

Dates employee will be taking medication		Name of Medications	Dosage	Will medication impair patient's ability to operate motorized vehicles or equipment? (yes/no)	If yes, how will it impair the patient? (e.g., dizziness, fatigue, sleepiness, nausea, etc.)
From	To				

Physician Comments:

Physician signature _____ Date _____

Physician address _____ Telephone _____

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Appendix C

Employee Education/Training Acknowledgment

I have been provided information/**employee** training on the U.S. Department of Transportation, Federal Motor Carrier Safety Administration's alcohol and drug testing requirements for all Commercial Licensed Drivers.

Agency: _____

**Name
(Print):** _____

Employee Number: _____

Signature: _____

Date: _____

This form is to be permanently filed in the employee's Official Personnel File or other designated location consistent with agency policy.