

# **THE CONSTRUCTION INDUSTRY SUBSTANCE ABUSE PROGRAM (CISAP)**

As Prepared By:

The Construction Industry  
Substance Abuse Program (CISAP)  
Committee

“The purpose of the substance abuse program is to establish and maintain a drug free, alcohol free, safe, healthy work environment for all of its employees.”

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## I. POLICY STATEMENT

The Parties recognize the problems created by drug and alcohol abuse and the need to develop prevention and treatment programs. ***"Unions & Contractors Associations"*** have a commitment to protect people and property, and to provide a safe working environment. The purpose of the following program is to establish and maintain a drug free, alcohol free, safe healthy work environment for all of its employees. All tests are for the sole purpose of drug and alcohol screening and cannot be used for any other screening or identifying medical information about the employee.

## II. DEFINITIONS

- A) Accident/Incident –For the purpose of the CISAP policy, an accident/incident is considered to be an unplanned or unintended event that occurs on company property, during the conduct of company's business, or during scheduled work hours, or which involves company supplied motor vehicles that are used in conducting business, or is within the scope of employment, and which results in any of the seven (7) situations:
- 1) A fatality of anyone involved in the accident/incident;
  - 2) Bodily injury to the employee and/or another person that requires off-site medical attention away from the company's designated place of employment/worksite;
  - 3) Any accident/incident in which the driver is cited and there is disabling damage to the vehicle(s) requiring tow-away;
  - 4) Any accident/incident in which the driver is cited and off-site medical attention is required;
  - 5) Vehicular damage in apparent excess of \$1000.00;
  - 6) Non-vehicular damage to any company property (i.e. – tools, materials, etc.) in apparent excess of \$750.00;
  - 7) Any event resulting, or could have resulted, in injury to a person or property to which an employee, or contractor/contractor's employees, contributed as a direct or indirect cause.
- B) Adulterated or Substituted Specimen – A urine screening, which has been substituted or tampered with to cover the true results. This will be considered a positive test.
- C) Collection Facility/Site – Approved location where participants can provide a specimen for testing.
- D) Company Premises – The term "Company Premises" as used in this policy includes all property, facilities, land, building, structures, automobiles, trucks and other vehicles owned, leased or used by the company. Construction job sites for which the company has responsibility are included.
- E) Computer Generated Selection Testing (CGST) – Third party administrator will randomly select participants to be tested through a computer generated selection process.
- F) CGST Testing Pool – All participating members (labor and management) will be subject to CGST selection.
- G) Construction Industry Substance Abuse Program (CISAP) – This policy in its entirety.
- H) Designated Representatives (DR's) - Are contact persons appointed by companies and unions to work directly with the program's Third Party Administrator (TPA). A company's DR

and union's DR are to work together for the successful management of the program. All DR's are to keep privileged substance abuse information confidential.

- I) Dilute Specimen - A dilute specimen with a valid, negative laboratory result shall be treated as a negative program test. A dilute specimen with a MRO confirmed positive laboratory result, shall be treated as a positive program test. Recollection of a dilute specimen shall be deemed necessary only when the creatinine concentration of the original specimen is equal to or greater than 2mg/dl but less than or equal to 5mg/dl.
- J) Drug Paraphernalia - Equipment, products and materials of any kind which are used, intended for use or designed for use in planting, propagating, cultivating, growing, harvesting, manufacturing, compounding, converting, producing, processing, preparing, testing, analyzing, packaging, repackaging, storing, containing or concealing, or ingesting, inhaling or otherwise introducing into the human body, any controlled substance.
- K) Eligible - Database system status referring to an employee who is validated as a participant in the Construction Industry Substance Abuse Program.
- L) Employee – Individuals, who perform work for (Company Name), including, but not limited to, management, supervision, engineering, craft workers and clerical personnel.
- M) Employee Assistance Program / Member Assistance Program (EAP/MAP) An EAP/MAP is intended to prevent or address substance abuse problems and may assist employees/union members and their eligible family members with interpersonal conflicts, family problems, workplace crises, eldercare stresses, psychological problems and financial management. The EAP/MAP is able to provide voluntary and confidential counseling services.
- N) Gas Chromatography/Mass Spectrometry (GC/MS) – A state-of-the-art test used to confirm the presence and amount of an identified drug/metabolite in a urine specimen.
- O) Inactive Status - A CISAP participant can request an inactive status when leaving the area or employment with a CISAP contractor. Inactive Status requires confirmation from a union Designated Representative or a CISAP Contractor Designated Representative.
- P) Incident – An event, which has all the attributes of an accident, except that no harm was caused to person or property.
- Q) Ineligible - Database system status referring to an employee who is not validated as a participant in the Construction Industry Substance Abuse Program. (An ineligible employee should contact the third party administrator or his or her Designated Representative.)
- R) Intoxicant – A substance that alters a person's mental and/or physical acuity.
- S) Medical Review Officer (MRO) – A licensed physician, qualified by either AAMRO or MROCF, who is responsible for receiving laboratory results and determining if there is a medical explanation for the presence of drugs/metabolites in the donor's urine. This physician must have knowledge of substance use disorders and appropriate medical training to interpret an individual's confirmed positive test result, together with his/her medical history and any other relevant medical information.

- T) Negative Drug Test – A test acceptable for employment.
- U) Positive Drug Test – A test, which exceeds the cut-off limits, within the established guidelines as defined under definition EE. Or a test that has been tampered with in any way (adulterated specimen). Medicines prescribed or purchased in a foreign country may cause a positive drug test.
- V) Prohibited Substances – Prohibited substances include illegal drugs (including controlled substances, look-alike drugs and designer drugs), and alcoholic beverages in the possession of or being used by an employee on the job.
- W) Reasonable Cause – When a trained supervisor has reason to believe that an employee has reported to work under the influence of alcohol, or an illegal/controlled substance.
- X) Re-analysis – A challenge of a positive drug test can be requested by the employee who is responsible for payment. A split sample of the original test can be examined by a SAMHSA certified laboratory of the employee's choice. If the re-analysis reverses the result, the program will absorb the cost and the employee will be reimbursed all costs associated with reanalysis. There is no appeal procedure for alcohol collected by a Breath Alcohol test.
- Y) Return-to-Duty Test – Testing required to reinstate eligibility in the program after a positive test. The Return-to-Duty Test is taken at the expense of the employee.
- Z) Split Specimen – Specimen taken at the collection site will be separated into two samples. Both samples will be appropriately marked with the employee's identification.
- AA) Substance Abuse Professional (SAP) – A qualified professional includes: licensed physicians, licensed/certified psychologists, social workers, employee assistance professionals and certified addiction counselors with knowledge of and clinical experience in the diagnosis and treatment of alcohol/drug-related disorders.
- BB) Synthetic / Designer Drugs - Synthetic substances that mimic legal or illegal drugs that are made in laboratories where the molecular structure is altered to create a drug that may or may not be specifically banned by law. These can cause seizures, hallucinations and death. Many states have banned the sale, use or possession of these substances, but the legality is not the determining factor
- CC) Third Party Administrator (TPA) - An independent entity that administers the CISAP's collections, analysis, reporting, maintenance of records and all confidential information for each participating group. The TPA is pre-qualified and determined by each union and its corresponding Contractor's Association.

DD) Under the Influence of a Prohibited Substance – “Under the influence of a prohibited substance” as used by this policy, means the following:

- 1) Alcohol – Blood or Breath alcohol level of .04 or as determined by the owner.
- 2) Other Prohibited Specimen – Positive results based on the following thresholds for urine split sample testing

\*NOTES

- Medicines purchased in a foreign country may cause a positive drug test.
- This program recognizes some state laws permit the use of marijuana either for medical or recreational purposes. However, the Federal Government continues to classify Marijuana as a Schedule 1 Controlled Substance, thereby making it illegal to use for any purpose under federal law. Therefore, any marijuana use is strictly prohibited under the terms of this program.

- a) Marijuana (Incl. Medical) 50 ng/ml initial screen and 15 ng/ml confirmatory test
- b) Cocaine (Metabolite)- 150 ng/ml initial screen and 100 ng/ml confirmatory test
- c) Opiates 300 ng/ml initial screen and 300 ng/ml confirmatory test  
     6-Acetylmorphine 10 ng/ml initial screen and 10 ng/ml confirmatory test
- d) Phencyclidine 25 ng/ml initial screen and 25 ng/ml confirmatory test
- e) Amphetamines 500 ng/ml initial screen and 250 ng/ml confirmatory test  
     Ecstasy 500 ng/ml initial screen and 250 ng/ml confirmatory test
- f) Barbiturates 300 ng/ml initial screen and 200 ng/ml confirmatory test
- g) Benzodiazepines 300 ng/ml initial screen and 300 ng/ml confirmatory test
- h) Methadone 300 ng/ml initial screen and 300 ng/ml confirmatory test
- i) Propoxyphene 300 ng/ml initial screen and 300 ng/ml confirmatory test
- j) Oxycodone 100 ng/ml initial screen and 100 ng/ml confirmatory test

k) Levels for other prohibited substances shall be according to accepted scientific standards.

EE) Initial Test vs. Confirmation Test -

There are two types of urine drug tests: an initial screening and a confirmatory test. The initial test uses an immunoassay to look for the parent drug and/or metabolite. The confirmatory urine drug test is done by gas chromatography/mass spectrometry (GC/MS); this test is highly specific and is typically used when testing for the presence of a specific drug is needed.

- 1) Initial test: an immunoassay screen to eliminate “negative” urine specimens from further consideration.
- 2) Confirmatory Test: a second analytical procedure to identify the presence of a specific drug which is independent of the initial drug test and which uses a different technique and chemical principle in order to ensure reliability and accuracy.

FF) Voluntary Drug/Alcohol Test-

The parties to this policy and program agree that under certain circumstances, the employer will find it necessary to conduct drug and alcohol testing. Program testing will be administered by a pre-qualified TPA determined by each union and its corresponding Contractor’s Association. Records of such tests shall be maintained by the Third Party Administrator. For all participants covered by the appropriate collective bargaining agreement, all costs for collection, analysis, reporting, maintenance of records, and notifications shall be borne by Union / Contractor’s Associations unless otherwise noted in this program. Securing the drug screen test shall be the applicant’s responsibility and shall be performed on his/her time. The primary testing methodology for the CISAP is urinalysis, alternative collection methods can be utilized on a case by case basis. The frequency of program testing may be increased based on requirements legitimately mandated by owners.

**III. PROGRAM TEST TYPES**

Testing may be initiated under the following circumstances. A refusal to test is considered a positive test and the individual will be subject to corrective actions. An additional drug and/or alcohol test(s) outside of the policy requirements may be administered at the cost of the owner. Each participant will be required to sign a consent and a chain of custody form, assuring proper documentation and accuracy.

A) Initial Test

An initial/pre-employment test is required to participate in the program.

B) Annual Test

In order to remain eligible, the participant must resubmit before his/her test expires. Negative tests are valid one year from test date.

C) Computer Generated Selection Testing (CGST)

Selection of employees for CGST Drug testing will be conducted through the use of a CGST number generator or other neutral selection process. The Third Party Administrator will randomly select and test a minimum of 25% of the participants annually by CGST.

- 1) Excused from Testing – A CISAP participant is allowed two (2) lifetime validated excuses for missing a Computer Generated Selection Test (CGST/Random), after which failure to show up for a CGST would be considered a policy violation (refer to VI Corrective Action, B) 5.)

- 2) Reason for missing a CGST must be validated and required documentation be provided to the Designated Representative to justify granting an excuse.

#### D) Post-Accident/Incident

An employer is required to conduct post-accident/incident alcohol and other drug testing for anyone who may have caused or contributed to an accident/incident. An employer does not have to conduct a post-accident/incident drug test if ALL of the following conditions exist:

- i) The accident/incident resulted in no injury or a minor injury
- ii) There was no violation of work rules
- iii) An accident/incident investigation determined there was no reasonable suspicion related to the accident/incident
- iv) The accident/incident is considered normal in relationship to the job functions of the injured employee

Post-accident/incident testing is at the cost of the employer.

#### E) Reasonable Cause

A test may be administered in the event a trained supervisor has reasonable cause to believe that an employee has reported to work under the influence, possesses drug paraphernalia, or is or has been under the influence while on the job; or has violated this drug policy. During the process of establishing reasonable cause for testing, the employee has the right to request his onsite union representative to be present. If on-site representation is not available, all efforts will be made to contact representation from the employee's union. For cause testing is at the expense of the employer. The Testing Procedures are:

- 1) Step 1: Preparation
  - i. Where appropriate remove employee away from safety-sensitive activity
  - ii. Complete documentation (for Reasonable Suspicion use Check List)
  - iii. Determine which test(s) to order (drug and/or alcohol)
  - iv. Gather necessary paperwork and supplies to give the employee
  - v. Call TPA to send authorization forms to the collection site
  - vi. Arrange for transportation
- 2) Step 2: Communicate with the appropriate persons present - Union Representative, Human Resources, Designated Representatives, etc.
- 3) Step 3: Inform the Employee
  - i. Give necessary forms and supplies to employee and be sure you are taking the employee to a CISAP TPA collection facility
  - ii. Inform employee that he/she must show photo ID
- 4) Step 4: Transportation: Union representative or employer shall provide transportation to and from collection facility then arrange transportation home
- 5) Step 5: Follow up
  - i. Ensure that the test was completed
  - ii. Monitor the confidential transmission of the test results
  - iii. Document any problems and proceed according to policy guidelines.



Note: The CISAP requires that a checklist report be completed and submitted within 24 hours to the TPA, as well as union & employer Designated Representatives for any Reasonable Cause test. A form is attached as Appendix A. Employers are responsible to request and pay for reasonable suspicion and post-accident/incident testing.

F) Return to Duty

The return to duty test is required for a participant to reinstate into the program after a positive test and completion of a prescribed treatment program. The employee is responsible for the cost of the Return-to-Duty test.

G) Accelerated Random Testing

Testing may be required as part of a follow-up to counseling or rehabilitation for substance abuse. Employees returning to work after successfully completing a rehabilitation program will be subject to additional drug/alcohol tests without prior notice. The participant will be subject to a minimum of four (4) additional random tests as prescribed by the Employee Assistance Program (EAP) for a period of one year as a condition of further employment.

H) Re-analysis

In the case of a positive test result, the employee shall have the opportunity to contest the result within 72 hours of the MRO notification by having an appropriate portion of the split sample reanalyzed at a SAMHSA certified laboratory selected by the employee. If a donor did not provide specimen quantities required for a split specimen (45-60ml) the donor will waive their right to have the "B" sample reanalyzed but may use the original "A" sample. There is no appeal procedure for alcohol collected by a Breath Alcohol test.

#### IV. TESTING PROCEDURES

A) Samples

All samples for testing will be taken by appropriately qualified personnel. Urine specimens taken will be split into two samples. Each sample will be appropriately marked with the employee's identification.

B) Privacy

To the greatest extent possible, the privacy of the employee will be preserved while the sample(s) to be tested are taken. However, some precautions will help to ensure that pure specimens are obtained.

C) Screening

The initial screening will be by immunoassay and require gas chromatography/mass spectrometry (GC/MS) for confirmation

D) Adulteration or Substitution

Adulteration or Substitution of a specimen shall be treated as a positive test. If a sample is unable to be analyzed by the laboratory (inadequate, dilute, lack of sample, , out of temperature, etc.) employees will have the option of having one additional test within 72 hours. A second sample unable to be analyzed by the laboratory may require another type of test; this will be at the employee's expense unless a valid medical reason by a medical professional for the inadequate samples is provided.

E) Reports

Reports shall be made in writing and sent to the single person designated by the employer and designated by the union after The Medical Review Officer (MRO) review.

F) Medical Review Officer (MRO)

The MRO is a licensed physician who has knowledge of substance abuse disorders. The MRO must be certified by either the American Association of Medical Review Officers (AAMRO) or the American College of Occupational and Environmental Medicine (ACOEM). The MRO shall:

- 1) Review and verify a laboratory positive test result.
- 2) Contact the individual within 24 hours to discuss the reasons why their test result might be positive.
- 3) Review the individual's medical record as provided by or at the arrangement of the tested individual as appropriate.
- 4) Confirm the laboratory result.
- 5) In the case of urine testing, only those specimens which show positive results on both the initial screening and the confirmatory test shall be reported as positive, pending MRO review and verification. The completed chain of custody form shall accompany any positive report, and copies of analytical reports shall be available to the employee.
- 6) Notify the Third Party Administrator (TPA) of all positive tests results. All records of test reviewed by the MRO and supporting documentation will be forwarded to and maintained by the TPA.

Samples shall be properly stored at all times. All samples reported as positive will be stored frozen for at least 365 days. All handling and transportation of each specimen will be properly documented through strict chain of custody procedures.

## V. CONFIDENTIALITY

All actions taken under this program will be strictly confidential and disclosed only to those with a "need to know".

## VI. RULES – CORRECTIVE ACTIONS – GRIEVANCE PROCEDURES

A) Rules

All employees must report to work in a physical condition that will enable them to perform their jobs in a safe and efficient manner. Employees shall not:

- 1) Use, possess, dispense or receive prohibited substances on or at the job site; or
- 2) Report to work while under the influence of an intoxicant, a prescription medication or a prohibited substance which may impair the performance of their job duties, either mental or physical.

B) Corrective Action

When the company has reasonable suspicion to believe an employee is under the influence of an intoxicant or a prohibited substance, for reasons of safety, the employee may be suspended until test results are available. If the test results prove negative, the employee shall be reinstated with back pay for all hours missed. In other cases:

- 1) Individuals testing positive for drug and/or alcohol use under III. A) may be suspended from consideration as required by the customer or facility owner.
- 2) Employees will be required to cooperate with testing requests, testing procedures, and to sign the required consent and chain of custody forms as a condition of continued employment or will otherwise be terminated.
- 3) Employees found in possession of drugs Synthetic/Designer, or Unauthorized Drugs on the work site shall be in violation of this policy and shall be subject to corrective action.
- 4) Employees found to be under the influence of a prohibited substance, including alcohol, while on duty or operating a company vehicle shall be subject to corrective action as provided by subsection 5 of this section.
- 5) The following stages of corrective action shall be imposed:
  - a) On the first violation of this policy, the employee will be ineligible to work under this program. To be eligible to return to work the employee must participate in a Substance Abuse Education/Treatment Program and provide a negative return to duty test. The SAP must provide written authorization for the return to duty test. The employee must complete the Substance Abuse Education/Treatment Program. The employee will be subject to CGST testing a minimum of four times or as recommended by the testing medical health professional over a one year period as a condition of further employment.
  - b) On the second violation of this policy, the employee will be suspended by the employer for thirty (30) days without pay. To be eligible to return to work the employee must complete a Substance Abuse Education/Treatment Program and provide a negative return to duty test. The SAP must provide written authorization for the return to duty test. The employee will be subject to CGST testing a minimum of four times or as recommended by the testing medical health professional during over a one year period as a condition of further employment.
  - c) On third and subsequent violations of this policy, the employer will terminate the employee. The employee shall be suspended from the program for one year. To be eligible to return to work the employee must complete a Substance Abuse Education/Treatment Program and provide a negative return to duty test. The SAP must provide written authorization for the return to duty test. The employee will be subject to CGST testing a minimum of four times or as recommended by the testing medical health professional over a one year period as a condition of further employment. After the one year period the employee can be considered for employment by participating employers.
- 6) The Corrective Action procedure will revert back to "first violation" described in Section VI, paragraph B) 5) following three consecutive years of negative tests providing the employee continually participated in the program.
- 7) Sale and Distribution - Any sale and/or distribution of a prohibited substance on Company property is grounds for immediate termination.
- 8) All aspects of this policy and program will be subject to the grievance procedure of the applicable collective bargaining agreements.

## **VII. REHABILITATION AND EMPLOYEE ASSISTANCE PROGRAM**

Employees are encouraged to seek help for a drug or alcohol problem before it requires corrective action. If an employee voluntarily notifies supervision that he or she may have a substance abuse problem, the company and/or union will refer the employee to their employee assistance program. In the absence of a current EAP contract, the company and/or union will assist in locating a suitable treatment provider and will counsel the employee regarding medical benefits available under the company or union health insurance program.

If treatment necessitates time away from work, the company shall provide the employee an unpaid leave of absence for purposes of participation in an agreed upon treatment program. An employee who successfully completes a rehabilitation program may be reinstated to his/her former employment status, if work for which he/she is qualified is available.

## **VIII. EMPLOYER AND EMPLOYEE TRAINING**

CISAP Training Programs are intended to meet the requirements of the Ohio Bureau of Workers Compensation Drug Free Safety Program (BWC-DFSP) initiative regardless of the size of the company. All CISAP Contractor and Worker participants will be required to meet BWC-DFSP requirement in the first year regardless of the BWC-DFSP participation Level. It is the responsibility of the contractor to meet the training requirement at the appropriate participation level.

For more information on educational and training materials call your TPA, your trade Designated Representative (DR), or [www.ohiobwc.com](http://www.ohiobwc.com).

## **IX. POLICY**

The Construction Industry Substance Abuse Policy and Program will be reviewed periodically by a joint Committee. The Committee will be comprised of equal representation from the participating unions and contractor association representatives. Any changes must be approved by the CISAP Drug, Alcohol Committee.

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**X. Appendix A – Reasonable Cause Checklist**

# CISAP SUPERVISOR'S CHECKLIST FOR MAKING REASONABLE CAUSE DETERMINATION & REPORTING FORM

Employee's name \_\_\_\_\_  
Local: \_\_\_\_\_  
Date(s): \_\_\_\_\_

Title: \_\_\_\_\_  
Location: \_\_\_\_\_  
Employer: \_\_\_\_\_

**KNOWING THE SIGNS:** The indicators listed below are "warning signs" of drug and/or alcohol abuse and may be observed by supervisors. Please check all observed indicators:

**Moods:**

- Depressed
- Anxious
- Irritable
- Suspicious
- Complains about others
- Emotional unsteadiness (e.g., outbursts of anger/frustration/crying)
- Mood changes after lunch or break

- Has exaggerated sense of self-importance
- Avoids talking with supervisor regarding work issues
- Weight Loss

**Accidents:**

- Taking of needless risks
- Disregard for safety of others
- Higher than average accident rate on and off the job – accident prone

**Absenteeism:**

- Acceleration of absenteeism and tardiness, especially Mondays, Friday, before and after holidays
- Frequent unreported absences, later explained as "emergencies"
- Unusually high incidence of colds, flus, upset stomach, headaches
- Frequent use of unscheduled vacation time
- Leaving work area more than necessary (e.g., frequent trips to water fountain and bathroom)
- Unexplained disappearances from the job with difficulty in locating employee
- Requesting to leave work early for various reasons

**Work Patterns:**

- Inconsistency in quality of work
- High and low periods of productivity
- Poor judgment/more mistakes than usual and general carelessness
- Lapses in concentration
- Difficulty in recalling instructions
- Difficulty in remembering own mistakes
- Using more time to complete work/missing deadlines
- Increased difficulty in handling complex situations

**Actions:**

- Withdrawn or improperly talkative
- Spends excessive amount of time on the telephone
- Argumentative; Displays violent behavior

**Relationship to Others on the Job:**

- Overreaction to real or imagined criticism (paranoid)
- Avoiding and withdrawing from peers
- Complaints from co-workers
- Borrowing money from fellow employees
- Persistent job transfer requests
- Complaints of problems at home such as separation, divorce and child discipline problems

**OBSERVING AND DOCUMENTING CURRENT INDICATORS**

Patterns of any of the above conduct or combinations of conduct may occur but must be accompanied by indicators of impairment in order to establish "reasonable cause." Please check all indicators listed below that are **currently** present:

**CISAP SUPERVISOR'S CHECKLIST FOR REASONABLE CAUSE (CONTINUED)**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Constricted pupils        | <input type="checkbox"/> Excessively active       | <input type="checkbox"/> Bizarre behavior  |
| <input type="checkbox"/> Drowsiness                | <input type="checkbox"/> Inability to verbalize   | <input type="checkbox"/> Violent behavior  |
| <input type="checkbox"/> Dilated pupils            | <input type="checkbox"/> Nausea or vomiting       | <input type="checkbox"/> Needle/Burn marks   |
| <input type="checkbox"/> Odor of alcohol           | <input type="checkbox"/> Irritable                | <input type="checkbox"/> Possession of paraphernalia (such as syringe, bent spoon, metal bottle cap, medicine dropper, glassine bag, paint can, glue tube, nitrite bulb, or aerosol can) |
| <input type="checkbox"/> Scratching                | <input type="checkbox"/> Flushed skin             |  |
| <input type="checkbox"/> Nasal secretion           | <input type="checkbox"/> Argumentative            |  |
| <input type="checkbox"/> Red or watering eyes      | <input type="checkbox"/> Sweating                 | <input type="checkbox"/> Possession of substance that appears to possibly be a drug or alcohol   |
| <input type="checkbox"/> Dizziness                 | <input type="checkbox"/> Difficulty concentrating |  |
| <input type="checkbox"/> Involuntary eye movements | <input type="checkbox"/> Yawning                  |  |
| <input type="checkbox"/> Muscular in-coordination  | <input type="checkbox"/> Slurred speech           |  |
| <input type="checkbox"/> Sniffles                  | <input type="checkbox"/> Twitching                |  |

Others: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**DETERMINING REASONABLE CAUSE**

If you are able to document one or more of the indicators above, ask yourself these questions to establish reasonable cause:

- | Y                        | N   | Y                        | N  |
|--------------------------|---|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/>   |
|                          | Has some form of impairment been shown in the employee's appearance, actions or work performance? |                          | Is the impairment current, today, now?   |
| <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/>   |
|                          | Does the impairment result from the possible use of drugs or alcohol?                             |                          | Are the facts reliable? Did you witness the situation personally, or are you sure that the witnesses are reliable and have provided firsthand information? |
| <input type="checkbox"/> | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/>   |
|                          | Are the facts capable of documentation?   |                          | Are the facts capable of explanation?  |

**TAKING ACTION**

- Reasonable cause established                       Reasonable cause NOT established
- Refer to Drug Test     Refer to Employee Assistance Program (EAP)     No Further Action Required

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Prepared by (Name & Position): \_\_\_\_\_

Also witnessed by (Name & Position): \_\_\_\_\_

Signature(s): \_\_\_\_\_  
 Date(s): \_\_\_\_\_

**Within 24 hours, email or fax to your TPA**  
 Mobile Medical Corp [dglazer@mobmed.com](mailto:dglazer@mobmed.com) or fax 440.356.9238    SCT [ggrueser@sct.us.com](mailto:ggrueser@sct.us.com) or fax 440.473.1586



<b>Signs and Symptoms of substance use</b>
--

**Alcohol**

Distinct smell on breath  
 Staggering or swaying  
 Slurred speech  
 Impaired judgment  
 Red face  
 Lowered inhibitions  
 Accident-prone  
 Risk taking  
 Missing work  
 Tardy  
 Loud, gregarious

**Amphetamines**

Agitation  
 Talkative - broken sentences  
 (brain moving faster than mouth  
 can keep up)  
 Aggressive  
 Moody  
 Falling asleep (coming off drug)  
 Needle marks (IV use)  
 Rapid weight loss  
 Accidents  
 Grinding jaw  
 Missed work  
 Lowered productivity

**Cannabinoids (THC, marijuana)**

Red eyes  
 Distinct smell on cloths/hair after  
 smoking  
 Difficulty taking direction  
 Dull slow response  
 Lack of motivation  
 Isolation  
 Quiet  
 Munchies - creates intense  
 appetite  
 Accidents  
 Lowered productivity

**Cocaine/Crack**

Agitation  
 Talkative  
 Huge mood swings  
 Financial problems  
 Things missing  
 Falling asleep (coming off drug)  
 Runny or Bloody nose  
 Rapid weight loss  
 Accidents  
 Grinding jaw  
 Missed work

**Opiates**

Isolation  
 Retarded motor skills  
 Nodding  
 Lots of MD apts and/or ER visits  
 Rubbing, scratching face/head  
 Vomiting/nausea  
 Flu like symptoms (withdrawal)  
Heroin  
 All of the above plus  
 Needle marks  
 Wearing long sleeves in hot weather  
 Illness  
 Abscesses or extensive scaring on  
 arms  
 Dealers around company property

**Phencyclidine (PCP)**

Crazy behavior!  
 Violent  
 Increased strength  
 Psychotic/delusional  
 Accidents  
 Interpersonal problems

**Barbiturates**

Falling asleep  
 Slow speech  
 Accidents  
 Trouble focusing  
 Droopy eyes  
 Missed work  
 Tardy

**Benzodiazepines (Valium, ProSom,  
Librium, Halcion, Ativan, Xanax)**

Looks very much like alcohol  
 without the smell  
 Lots of MD apts  
 Vague complaints  
 Moody  
 Emotional distress  
 Slurred speech  
 Absenteeism  
 Lowered productivity  
 Blackouts (does not remember  
 things)

**Methadone**

Same as opiates

**Propoxyphene (Darvon, Darvocet, etc.)**

Same as opiates