

C.O.C. (Chain-of-Custody) Collection Procedure

Blood Alcohol Collection

Test may be performed at employer's laboratory of choice. If laboratory is not specified, specimen will be sent to Quest Diagnostics Laboratory in Lenexa, KS for testing.

The following information is **required** to process specimen:

- **Patient's complete name**
- **Phone number of patient's employer**
- **Name of Workman's Compensation Service they use, ie, MED ACCESS, MED SURG, MED PLUS, Complete Occupational Care**
- **Name of the employer's contact person who is to receive the report (if possible)**

Donor **must** be present and witness the following:

- **Specimen handling**
- **Placing of security barcode C.O.C. tape on tube(s)**
- **Bagging of specimen and C.O.C. form**
- **Sealing of bag containing specimen tube(s) and paperwork.**

DRAWING:

1. Obtain request for C.O.C. drug testing to verify required testing.
2. Make a copy of authorization form and driver's license to use in a later step (see "Form Distribution" [yellow collector copy] below).
3. Print **employer** name on appropriate line.
4. Medical Review Officer (M.R.O.) information is preprinted, since results will go back to them.
5. Indicate donor's Social Security number (SSN), obtained from driver's license (if available). (Use emergency room [ER] number as alternate identification [ID] number if driver's license or SSN is not available).
6. There may or may not be a Health Insurance and Portability Act (HIPPA) authorization area (if applicable, please have donor sign the appropriate area) on the back side of a drug screen form.
7. Indicate on the C.O.C. form with a check mark the appropriate reason for test, most often **post-accident**.
8. Indicate on the C.O.C. form with a check mark the appropriate panel tests being requested for C.O.C. drug testing (if not preprinted).
9. Prep patient's arm with Betadine.
10. Draw blood in a grey-top (potassium oxalate/sodium fluoride) tube(s).
11. Donor must date and initial the barcode C.O.C. tape found at the bottom the C.O.C. form.
12. Collector who drew the blood will indicate on the C.O.C. form:
 - Date and time of draw
 - Print and sign their name
 - Name of the appropriate courier in "released to" box
13. Collector will remove the barcode C.O.C. tape from the form and affix tape across top of tube(s). **Seals must be applied in a certain way (refer to C.O.C. request form for detailed instructions).**
14. Collector will turn to the second copy (pink), donor's section (lower portion) of form and request that donor provide his/her following information:
 - Printed name and signature
 - Date of draw
 - Daytime and evening phone number
 - Birth date
15. After specimen has been drawn and the donor has completed the donor's section of C.O.C. form, the collector will enter the time the specimen was collected into the computer.

BAGGING:

1. Place barcode sealed tube(s) in transport bag (side with absorbent material).
2. Fold completed C.O.C. form (white copy) and place in the pouch at back of transport bag.
3. Pull the blue protector strip, fold bag over pouch containing form, and seal.

SENDING:

1. Put bagged specimen in Reference refrigerator in the appropriate courier box. Specimen will be kept refrigerated until the lab courier pickup at which time specimen will be transported to Occupational Health Group (O.H.G.) at ambient temperature. O.H.G. will then forward the specimen(s) to the performing laboratory.
2. LabCorp must be notified Monday through Friday of a specimen to pickup (no pickup on Saturday or Sunday).

FORM DISTRIBUTION:

1. White (first copy) is folded and placed in the pouch at back of transport bag. Fold bag over this pouch, and seal.
2. Pink (M.R.O. copy) is forwarded to Occupational Health Group (O.H.G.).
3. Blue (employer copy) is forwarded to O.H.G. Also place a copy of the authorization form in this envelope.
4. Yellow (collector copy) gets stapled to the original authorization along with copy of driver's license.
5. Green (donor copy) is given to the donor.
6. Record the procedure in the Drug Screen Log Book, then place forms in tray under Drug Screen Log Book.

RESULTING:

1. Request for testing sent through computer is verified for the time test is done.
2. Release test in computer. The following comment will appear - "This test has been forwarded to a testing facility designated by the employer or Decatur Morgan Hospital. That facility will mail the results directly to the M.R.O. upon completion."
3. A couple times a day the previous message (#2) for drug screens drawn will be released by a laboratory technician.

Breath Alcohol Analysis Collection

The purpose is to accurately detect alcohol content of a donor's breath in a real-time situation, where point of care testing is

utilized for direct patient service. Only individuals that are certified, as breath alcohol technicians, (BAT), will perform alcohol breath tests. Testing must be performed following the United States Department of Transportation (U.S. DOT) regulations, and using a federal, National Highway Traffic Safety Administration (NHTSA) approved Breath Alcohol Testing Machine.

This is intended to only be an abbreviated collection instruction. For complete detailed instructions on the use of the Intoxilyzer 200 for specimen collection please see the "INTOXILYZER 200 FOR P.O.C.T. OF BREATH ALCOHOL" procedure.

This protocol is used only for "suspicion" or "on-demand" situations, related to workplace incident. The primary outlet for this service, during weekday work-hours, is O.H.G. The Decatur Morgan Hospital laboratory unit will only be utilized for after-hours or weekend episodes. The inquiring local business or governmental agency must present a legitimate request, to have this test performed on their employee. A representative of the company or agency is not permitted to witness the test. Donor privacy and confidentiality are maintained throughout the testing procedure. The company representative receives a copy of the documentation form with attached results printout. The laboratory will not be held liable for the outcome.

The following information is **required** to process specimen:

- **Photo identification (if no photo identification is available a designate employer representative [DER] can positively identify donor)**
- **Patient's complete name**
- **Phone number of patient's employer**
- **Signed consent form**
- **Name of Workman's Compensation Service they use, ie, MED ACCESS, MED SURG, MED PLUS, Complete Occupational Care**
- **Name of the employer's contact person who is to receive the report (if possible)**

COLLECTION/TESTING PROCEDURE:

1. Receive the subject, accompanied by the DER, in the front room of laboratory waiting room. Donor must register in the ER, whether he/she needs medical treatment or not. ER department orders the "Breath Alcohol Test" and the label will print out on the laboratories Stat Label Printer. Test will be billed to O.H.G. later.
2. Identify patient by photo identification (preferred) prior to testing or by 1 of the following (acceptable, but not preferred) methods:
 - Signature identification if no photo identification is available. Donor signs "Consent to Test" form and signature is then compared to signature on social security card or temporary drivers' license. Donor's employee identification number may be used if he/she has no driver's license.

- A positive identification can be given by a designated employer representative.
 - Verbal identification if an authorized representative from the company can accurately describe donor to the satisfaction of the BAT.
3. Establish whether donor has a Commercial Driver's License (CDL) or not. Find out from DER whether certain scenarios have taken place-this determines if a "D.O.T. Testing Form" or a "NON-D.O.T. Testing Form" is required. Prepare the appropriate 3-part report form indicating reason for test. Forms can be found with the Intoxilyzer 200 instrument.
 4. BAT **must** explain testing principles of device to donor and offer informed consent. BAT **must** then turn the form over for donor to see and read instruction. Consent form **must** be signed by donor prior to BAT administering test. If donor refuses to sign, document this and notify DER that this is a "Refusal to Test." See "Limitations Section" in the "INTOXILYZER 200 FOR P.O.C.T. OF BREATH ALCOHOL" procedure for advice on actions. Write this in the "Remarks" section of the form. Ask the DER to wait in waiting room. If donor signs the form proceed with the next testing steps. If donor doesn't sign the form, it is completed anyway.
 5. Obtain a new sterile mouthpiece before start of test. A new mouthpiece **must** be used for each donor test, even if the test is a repeat test on the same donor.

Note: Patient **must not** consume any alcohol for 15 to 20 minutes prior to test. This includes products that contain alcohol such as some mouthwashes and cold medicines. If this precaution is not followed, it is possible to attain an inordinately high alcohol reading due to residual alcohol in the mouth. Any violations must be recorded in the "Remarks" section of report form.
 6. Close doors surrounding exam area, expose the purple "Testing in Progress" signs on outside of each door, and draw privacy curtain around donor in exam area to assure privacy.

Note: No one else is permitted to be present during the testing period.
 7. Open device case, place it on exam bed, and plug the unit into nearest outlet.
 8. Sit donor in collection chair and inform donor that the instrument detects only alcohol in his breath, and that he must blow forcefully into the mouthpiece tube long enough to sample the correct amount of air from deep in the lungs.
 9. BAT must tell the donor their BAT Certification Number at this time.
 10. BAT will begin to perform breath collection using the calibrated Intoxilyzer 200 instrument and following the "INTOXILYZER 200 FOR P.O.C.T. OF BREATH ALCOHOL" procedure. Choose the first selection of the "MAIN MENU" (1 Donor Test), the operator will then be led through the test sequence by the messages on the display.
 - **If no alcohol is detected:** Go immediately to the "Alcohol Testing Form" to "Step 3" box and put a check mark in 15-Minute Wait? "NO" box. The BAT reviews results with the donor. Donor signs his name on the paper printout report. Operator prints and signs his name on the printout report. Each copy of the triplicate report printout is taped onto the 3 different pages of the "Alcohol Testing Form" pages in the area marked "Screening Results Here" using yellow tamper-evidential tape. Top copy of printout on page one, second on second, and third on third. BAT fills out and signs "Step 3" box of the "Alcohol Testing Form." If SHY LUNG, REFUSAL, or CANCELED circumstance was encountered during testing process, write this in the "Remarks" section of the "Step 3" box. Top copy of the paper printout (the original) is attached to the 3-part form, which is the employer's copy, and is put in an envelope and left in the laboratory courier's box to take to O.H.G. The second and third copies of the paper printout (carbons) are taped onto the 2nd and 3rd copies of the "Alcohol Report Form." The donor retains page 2. DGH keeps page 3. We write it in our "Drug Testing Logbook" in the front office. We file our copy of the Form and the requisition in the accordion folder for "Negative Tests" in the front office file cabinet #6. Later a laboratory clerk will charge O.H.G. for this activity.
 - **If alcohol is detected:** If the result is 0.02 or more, do not distribute forms yet. A confirmation test must be performed. As soon as a positive initial test is printed, look at the time printed on the initial test result to start the 15 minute waiting period for the confirmation test. Go immediately to the "Alcohol Testing Form" to "Step 3" box and put a check mark in 15-Minute Wait? "YES" box.
 - BAT **must** observe and **must remain in the presence** of the donor for no less than 15 minutes or >30 minutes. Tell the donor that he may not leave the front office area while he waits. Ask donor not to cough, belch, or burp or place anything in his/her mouth during the observation period. If done, it is written in the "Remarks" section of the form in Step 3 box. No one can observe or contact the donor during waiting period. If donor needs to go to the bathroom, the BAT **must** accompany the donor there.
 - If the time between screening test and confirmation test is >30 minutes, BAT should proceed to conduct confirmation test and note in the "Remarks" section of the A.T.F. reason for the delay.

Note: BAT may not test another employee during the observation period and prior to the confirmation test.
 - After observation period, BAT will perform confirmation test following the same procedures as initial test as described in the "INTOXILYZER 200 FOR P.O.C.T. OF BREATH ALCOHOL" procedure using a new mouthpiece. When meter assigns a test number, write this number down, preceded by a "C" under the "I" number that you wrote in "Step 3" box. Show it to donor.
 11. After any positive test, the meter must be calibrated. Perform this function and record the result on the "Log Sheet" for "Calibration Checks" following the "INTOXILYZER 200 FOR P.O.C.T. OF BREATH ALCOHOL" procedure. Put the form back in the folder behind foam in lid of case. Mark on the flag on the case, date that you confirmed meter is functional.

12. Press the ON/OFF button to shut down the instrument. Unplug power cord from wall outlet, stow components back in carrying case, close case, and return it to its designated location in laboratory. Reverse the purple "Testing in Progress" signs on outside of each of the doors.
13. Finish distribution and filing of forms and recording of test.
14. Affix chain-of-custody tape across top of printed results on corresponding chain-of-custody form copies.

FORM DISTRIBUTION:

1. White D.O.T (470-FS-C3) form.
2. Yellow NON-D.O.T. (471-FS-C3) form gets stapled to the original authorization along with copy of driver's license.
3. Record the procedure in the Drug Screen Log Book, then place forms in tray under Drug Screen Log Book.

RESULTING:

1. The company representative receives a copy of the documentation form with attached results printout. The laboratory will not be held liable for the outcome.
2. The standardized report form is completed and the result printout is attached to it in triplicate. One copy is forwarded to the employer, 1 copy goes to the donor, and 1 copy is kept by O.H.G. The employer copy of the form goes into an envelope and is carried to O.H.G. by the laboratory courier. Office clerk charges O.H.G. for the test at a later time.

Observed or Unobserved Urine Collection

Test may be performed at employer's laboratory of choice. If laboratory is not specified, specimen will be sent to Quest Diagnostics Laboratory in Lenexa, KS for testing.

Donor must remove coat or unnecessary bulky clothing before collection. O.H.G. collections are usually not observed; see original C.O.C. request form for verification. If observing the collection is necessary, the same gender must observe collection. Place blue dye into toilet bowl before proceeding with urine collection. Instruct donor to collect urine specimen, and give it to the appropriate person prior to flushing toilet or washing hands.

The following information is **required** to process specimen:

- **Patient's complete name**
- **Phone number of patient's employer**
- **Name of Workman's Compensation Service they use, ie, MED ACCESS, MED SURG, MED PLUS, Complete Occupational Care**
- **Name of the employer's contact person who is to receive the report (if possible).**

Donor **must** be present and witness the following:

- **Specimen handling**
- **Placing of security barcode C.O.C. tape on urine transport bottle(s)**
- **Bagging of specimen and C.O.C. form**
- **Sealing of bag containing urine transport bottle(s) and paperwork.**

COLLECTING:

1. For C.O.C. drug testing, use Drug Screen Kit supplied.
2. Obtain request for C.O.C. drug testing to verify required testing.
3. Make a copy of authorization form and driver's license to use in a later step (see "Form Distribution" [yellow collector copy] below).
4. Print **employer** name on appropriate line.
5. M.R.O. information is preprinted, since results will go back to them.
6. Indicate donor's Social Security number (SSN), obtained from driver's license (if available). (Use emergency room [ER] number as alternate identification [ID] number if driver's license or SSN is not available).
7. There may or may not be a HIPPA authorization area (if applicable, please have donor sign the appropriate area) on the back side of a drug screen form.
8. Indicate on the C.O.C. form with a check mark the appropriate reason for test, most often **post-accident**.
9. Indicate on the C.O.C. form with a check mark the appropriate panel tests being requested for C.O.C. drug testing (if not preprinted).
10. Collector is to open the collection kit (kit will contain 1-urine collection cup, 2-urine transport bottles, and a transport bag) in the presence of the donor. Collector gives donor the urine collection cup and asks that the donor fills collection cup with (minimum: 45 mL) of urine. If volume is insufficient, the specimen and collection cup should be discarded. Donor should drink up to 24 ounces of fluids and remain in the lab until the second attempt is successful. If donor can give 30 mL of urine only, send out as single bottle collection. If donor is still unable to obtain urine after 2 hours, the collection is discontinued and the employer is notified.

11. Collector must read the temperature strip on the side of urine collection cup within 4 minutes of collecting specimen and check appropriate box on the C.O.C. form.
12. For single transport bottle collection, place at least 30 mL of urine into bottle. For split transport bottle collections, place 30 mL of urine into first transport bottle and 15-30 mL into second transport bottle. Fill lines are molded into side of the transport bottle.
13. Collector must indicate on the C.O.C. form if collection is a single or split collection.
14. Close and latch lid tightly on bottle(s).
15. Donor must date and initial the barcode C.O.C. tape(s) (seal strip labeled "A" and/or "B") found at the bottom the C.O.C. form.
16. Collector of specimen will indicate on the C.O.C. form:
 - Date and time of collection
 - Print and sign their name
 - Name of the appropriate courier in "released to" box
17. Remove the barcode C.O.C. tape (seal strip labeled "A") from form and attach to top and down sides of first transport bottle so that the bottle will now have the same ID number as the paperwork. Remove the barcode C.O.C. tape (seal strip labeled "B") from form and attach to top and down sides of second transport bottle with "B" strip. **Seals must be applied in a certain way (refer to C.O.C. request form for detailed instructions).**
18. Collector will turn to the second copy (pink), donor's section (lower portion) of form and request that donor provide his/her following information:
 - Printed name and signature
 - Date of draw
 - Daytime and evening phone number
 - Birth date
19. After specimen has been collected and the donor has completed the donor's section of C.O.C. form, the collector will enter the time the specimen was collected into the computer

BAGGING:

1. Place barcode sealed urine transport bottle(s) into transport bag (side with absorbent material).
2. Fold completed C.O.C. form (white copy) and place in the pouch at back of transport bag.
3. Pull the blue protector strip, fold bag over pouch containing form, and seal.

SENDING:

1. Put bagged specimen in Reference refrigerator in the appropriate courier box. Specimen will be kept refrigerated until the lab courier pickup at which time specimen will be transported to Occupational Health Group (O.H.G.) at ambient temperature. O.H.G. will then forward the specimen(s) to the performing laboratory.
2. LabCorp must be notified Monday through Friday of a specimen to pickup (no pickup on Saturday or Sunday).

FORM DISTRIBUTION:

1. White (first copy) is folded and placed in the pouch at back of transport bag. Fold bag over this pouch, and seal.
2. Pink (M.R.O. copy) is forwarded to O.H.G.
3. Blue (employer copy) is forwarded to O.H.G. Also place a copy of the authorization form in this envelope.
4. Yellow (collector copy) gets stapled to the original authorization along with copy of driver's license.
5. Green (donor copy) is given to the donor.
6. Record the procedure in the Drug Screen Log Book, then place forms in tray under Drug Screen Log Book.

RESULTING:

1. Request for testing sent through computer is verified for the time test is done.
2. Release test in computer. The following comment will appear - "This test has been forwarded to a testing facility designated by the employer or Decatur Morgan Hospital. That facility will mail the results directly to the M.R.O. upon completion."
3. A couple times a day the previous message (#2) for drug screens collected will be released by a laboratory technician.