2018 Policy Addendum

Drug List Update - Department of Transportantion - Controlled Substance Testing

2018 "Final Rule" ADDENDUM:

Is in addition to those guidelines generally listed in section 1.5.2 of DOT policies. This addendum does not exclude any provisions or wording from this or any other section of your current policy and is only intended to add to the summation of your policy and takes effect retroactively to the 1st of January 2018.

"CONTROLLED SUBSTANCES" In accordance with FMCSA rules, urinalysis will be conducted to detect the presence of the following substances:

SUBSTANCE	SCREEN CUTOFF	CONFIRM CUTOFF	
AMPHETAMINE (Methamphetamine)	500	250	YEAMHEA
MDMA / MDA (ECSTASY)	500	250	Manusantina gara 1-817-828086-7 (1-877-738-9327)
COCAINE METABOLITE	150	100	a went of waylood
OPIATES (Codine, Morphine)	2000	2000	DEPA
6-ACETYLMORPHINE	10	10	THE STATE OF THE S
PHENCYCLIDINE (PCP)	25	25	STATES OF A
MARIJUANA (THC) METABOLITE	50	15	
OXYCODONE / OXYMORPHONE	100	100	
HYDROCODONE / HYDROMORPHONE	300	100	

Detection levels requiring a determination of a positive result shall be in accordance with the guidelines adopted by each DOT mode in accordance with the recommendations established by the Department of Health & Human Services. An initial drug screen will be conducted on each specimen. For those specimens that are positive, a confirmatory test consistent with federal regulations will be performed. The test will be considered positive if the amounts present are above the minimum thresholds established in 49 C.F. Part 40, as amended.

PRESCRIPTION DRUGS: Drivers taking legally prescribed medications issued by a licensed health care professional familiar with the driver's work-related responsibilities must report such use to their immediate supervisor or dispatcher. and may be required to present written evidence from the health care professional which describes the effects such medications may have on the driver's ability to perform his/her tasks. Under the Policy, the appropriate use of legally prescribed medication(s) is not prohibited. Appropriate use of a legally prescribed drug means that an individual has a prescription or other written approval from a physician for the use of a drug in the course of medical treatment. It must include the patient's name, the name of the substance, quantity/amount to be taken and the period of authorization. The misuse of a legal drug while performing business is prohibited. Using or being under the influence of any legally prescribed medication(s), or non- prescription medication(s) or drug(s) while performing business or while on property is prohibited to the extent that such use or influence affects job safety or effective and efficient job performance. Any driver who feels his/her performance of work- related duties may be impaired by the use of any legal substance which carries a warning label which indicates that mental functioning, motor skills and/or judgment may be adversely affected should report it to his/her supervisor/manager and medical advice should be sought before performing work-related duties. In the above instance, any driver using legally prescribed medication or non-prescription medication may continue to work if management determines that the driver does not pose a safety threat and that job performance is not affected by such use. At the sole discretion of the alcohol and drug program administrator, a driver may be temporarily removed from a safety-sensitive position if deemed appropriate.

In accordance with Federal law under 49 C.F.R. part 40 - Marijuana is a federally illegal substance and is not permitted medicinally or for recreational purposes to those in a DOT random testing program. THC is currently only allowed in the use of the prescribed drug known as Marinol (prescribed primarily to AIDS and Cancer patients).

A full copy of the "Final Rule from the DOT 2018" can be read at: https://www.gpo.gov/fdsys/pkg/FR-2017-11-13/pdf/2017-24397.pdf
This policy Addendum for our company has taken effect as of January 1, 2018. A copy of your signature is requested as a receipt to the transfer of this information.

RECORD OF RECEIPT | 2018 Policy Addendum

2018 "Final Rule" Addendum

2018 "Final Rule" RECORD OF RECEIPT

I certify that I have received a copy of, and have read the 2018 "Final Rule" Addendum to my company's DOT policy on Alcohol and Drug Testing Procedures. I understand that as a condition of employment in a safety-sensitive position, I must comply with these guidelines, and do agree that I will remain medically qualified by following these procedures and refraining from the use of any illegal or non-prescribed medications.

Employees Printed Name Signature Date	or occurres and remaining from	the use of any megal of hon-prese	any megai or non-prescribed medications.	
Signature Date				
	Employees Printed Name			
	Signature	 Date		
A complete copy of the guidelines of this agreement can be read at:	A complete copy of the guidelines of this	s agreement can be read at:		

A Letter to all DOT employees

RE: 2018 "Final Rule" Addendum https://www.transportation.gov/odapc/Part_40_DOT_Employee_Notice_2017

DOT Drug Testing: Part 40 - Employee Notice

This is a reminder that the U.S. Department of Transportation (DOT) drug testing program will soon require testing for four semi-synthetic opioids (i.e., hydrocodone, oxycodone, hydromorphone, oxymorphone). The change is effective January 1, 2018.

What does this mean for the employees?

Beginning January 1, 2018, in addition to the existing DOT drug testing panel (that includes marijuana, cocaine, amphetamines, phencyclidine (PCP), and opiates), you will also be tested for four semi-synthetic opioids (i.e., hydrocodone, oxycodone, hydromorphone, oxymorphone). Some common names for these semi-synthetic opioids include OxyContin®, Percodan®, Percocet®, Vicodin®, Lortab®, Norco®, Dilaudid®, Exalgo®.

If you test positive for any of the semi-synthetic opioid drugs, then as with any other drug test result that is confirmed by the laboratory, the Medical Review Officer (MRO) will conduct an interview with you to determine if there is a legitimate medical explanation for the result. If you have a valid prescription, you should provide it to the MRO, who will determine if the prescription is valid. If a legitimate medical explanation is established, the MRO will report the result to your employer as a 'negative'. If not, the MRO will report the result to your employer as 'positive'.

As it has been the requirement in the past, when your employer receives a 'positive' drug test result, your employer is to immediately remove you from performing safety-sensitive functions and provide you with a list of qualified Substance Abuse Professionals (SAP) available in your area. In order to return to performing safety-sensitive functions for any DOT-regulated employer, you must complete the return-to-duty process that will include an evaluation by a SAP, who will require education and/or treatment. The SAP will determine if you successfully completed the prescribed education and/or treatment. Before an employer could return you to safety-sensitive work, the employer must get a negative result on a directly observed return-to-duty drug test. After you return to safety-sensitive work, you must be subject to directly observed follow-up testing for 12-60 months depending on the SAP's recommendations.

Do I need to tell anyone about my prescribed medications?

Your employer may have a policy that requires you to report your prescribed medications to them. So check with your employer. If your job function has DOT-regulated medical standards (truck/bus driver, airline pilot, mariner), the DOT agency regulation may require you to report your prescribed medications to those who approved your medical qualifications.

What should I tell my prescribing physician?

If you are taking any prescription medications, consider this to be a reminder to have a conversation with your prescribing physician to discuss your safety-sensitive work. Be proactive in ensuring that your prescribing physician knows what type of transportation-related safety-sensitive work you currently perform. For example, don't just provide a job title but describe your exact job function(s) or ask your employer for a detailed description of your job function that you can give to your prescribing physician. This is important information for your prescribing physician to consider when deciding whether and what medication to prescribe for you. It is important for you to know whether your medications could impact your ability to safely perform your transportation-related work.

Will the MRO report my prescribed medication use/medical information to a third party?

Historically, the DOT's regulation required the MRO to report your medication use/medical information to a third party (e.g. your employer, health care provider responsible for your medical qualifications, etc.), if the MRO determines in his/her reasonable medical judgement that you may be medically unqualified according to DOT Agency regulations, or if your continued performance is likely to pose a significant safety risk. The MRO may report this information even if the MRO verifies your drug test result as 'negative'.

As of January 1, 2018, prior to the MRO reporting your information to a third party you will have up to five days to have your prescribing physician contact the MRO. You are responsible for facilitating the contact between the MRO and your prescribing physician. Your prescribing physician should be willing to state to the MRO that you can safely perform your safety-sensitive functions while taking the medication(s), or consider changing your medication to one that does not make you medically unqualified or does not pose a significant safety risk.

NOTE: This document informally summarizes some of the effects of recent changes to the Procedures for Transportation Workplace Drug and Alcohol Testing Programs that are important for transportation employees, but it should not be relied upon to determine legal compliance with those procedures.