

From: Rick Hiltman
Sent: Thursday, January 07, 2010 11:59 PM
To: LoDico, Charles P. (SAMHSA/CSAP)
Cc:
Subject: Proposed changes to CCF forms

Mr. Lodico,

I operate a collection site in Colorado. Our company also provides 24 hour mobile and emergency Alcohol and Drug Testing services to approximately 4500 companies within the Denver Metropolitan area. We currently maintain ACL, DrugScan, eScreen, Kroll, LabCorp, MedTox, Quest and other lab forms.

Clearly some of the proposed changes would benefit us in that we would not have to carry so many different forms. However, the current CCF has proven more effective than other sources. In its present form, each sheet of the CCF provides very specific but limited information for each on the entities involved. Under the "Laser Printer" proposal, this would require us to print 5 different sheets containing different information on each sheet.

This would certainly require more time at the collection site and certainly drive up the costs both in time and materials. Given the present environment that would not be advantageous to the Collection Site, the Donor being tested nor the Employer who would be paying for the increased costs and increased labor dollars.

For example, Page 1(Lab) of the CCF is submitted to the Lab. That page has the Employer information, MRO information, Donor ID, Specimen criteria, Collector Certification, the reason for testing and specimen bottle seals. Page 2 (MRO) contains the same information as page 1 **and** the Donor Certification which contains his signature, name, contact information and Birth Date. Page 3 (Collector) may or may not display the Donor Birth date. Page 4 (employer) is the same as page 3 and page 5 (Donor Copy) is the same as page 3, with some regulatory information on the back of the page.

Under the proposed "Laser Printer" version, all five pages would have to be printed separately; the Collector Certifications, Donor Certifications, and any remarks would have to be entered on each page. Clearly this increases the risk of error and transposition of information. Under the Rules of Evidentiary Procedure, both the collector and the donor would have to sign off on each page in order to maintain proper chain of custody, otherwise the document and the attached "chain of custody" would be questionable. I do not see how this could benefit the industry on either side of the testing process.

In addition to these issues, many of the labs have incorporated the Employer Account/ID number into the CCF number. For example, eScreen, Quest and a couple of others directly incorporate the account number into the CCF number. Most of these accounts have a DOT account and a different NON DOT account. The collection site usually has no idea what part of the CCF number is the account number.

If the collection site does not know what that number is, it can not be incorporated into the CCF. If the specimen is submitted to the Lab, without that information, who knows how the results will be reported, if at all. In other cases the Lab may have a separate location designator for the specimen. Quest for example will assign certain account codes to certain labs. We know, we found out the hard way when we sent a specimen to the lab in Lenexa KS, which unknown to us, was designated for the Van Yves facility. Lenexa received the specimen then shipped it to Van Yves. It took me three days to track down the specimen. In this case, we needed to issue a Memoranda For Record (MFR) to correct the reason and type of test to be conducted. Since we sent the MFR to Lenexa, it did not arrive in time to make the corrections. Any one of these issues can result in an unnecessary delay in the testing process. In the

case of a positive submission, this would certainly delay in identification and removal of that individual from safety sensitive functions.

There is hardly a week that goes by where we do not receive a call from a Lab, MRO or Employer looking for documentation. Their reports range from their copy was damaged in transit, it is not legible, it was lost, it can't be found etc. Our company policy is to maintain these documents for no less than three years, or in the case of regulated retention requirements, no less than five years. These are original documents, executed at the time of the collection; they are admissible as evidence and are generally not questioned beyond the necessary vetting for introduction as an item of evidence. Handwriting and Signatures can easily be corroborated.

It is my belief that a simple standardized 5 part form is by far the easiest way to improve accuracy and efficiency. Presently, each lab has one or more forms, (variables in Quest, MedTox, LabCorp) each of these forms has minor variations to them. All are OMB approved. One form that is used consistently across the board could alleviate several problems, improve accuracy and reduce confusion. A uniform and consistent form could easily be printed on a dot-matrix printer, which would reduce the number of different documents needing to be maintained by the Collection Site. It would also reduce the wasted paper when an Employer changes Labs or MRO's. We would simply need to edit that information; we would not have to discard the form(s). We currently employ a similar practice for support documents we use in our testing process.

Respectfully

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