

Washington Metropolitan Area Transit Authority  
**Board Action/Information Summary**

☒ Action ☐ Information

MEAD Number:  
202301

Resolution:  
☒ Yes ☐ No

**TITLE:**

Drug and Alcohol (D&A) Program Policy

**PRESENTATION SUMMARY:**

Amend the Drug and Alcohol (D&A) Program policy in accordance with recommendations and requirements of the Federal Transit Administration (FTA).

**PURPOSE:**

On behalf of WMATA's Occupational Health and Wellness (OHAW), management is seeking Board approval of the revised Drug and Alcohol Program policy in order to meet all federal drug and alcohol testing requirements.

**DESCRIPTION:**

Following FTA's scheduled audit of WMATA's Drug and Alcohol Program policy, OHAW incorporated the policy changes as required by FTA. WMATA also updated some of its non-Department of Transportation (DOT) policies. FTA found WMATA to be in compliance with the FTA-mandated Drug and Alcohol Testing Program provided that all policies and procedures implemented in response to the audit are fully adopted.

**Key Highlights:**

- In accordance with 49 CFR parts 40 and 655, FTA found WMATA to be in compliance with the FTA-mandated Drug and Alcohol Testing Program provided that all policies and procedures implemented in response to the audit are fully adopted.
- WMATA eliminated all non-DOT safety sensitive employee categories. As a result, WMATA will no longer require non-DOT random testing and physical exams for employees that are in this population. Non-DOT employees will continue to be subject to other categories of drug and alcohol testing and fitness for duty examinations as appropriate.

**Background and History:**

In November 2019, FTA conducted an audit of WMATA's drug and alcohol program. FTA's audit findings required the revision of some of the federal

components of WMATA's Drug and Alcohol Program policy. During the FTA audit, it was determined that OHAW's Prescription Reporting efforts should be a standalone policy. With that said, the Prescription Reporting language has been removed from this version of the Drug and Alcohol Program policy. Other changes include removing the published allocated travel times (Appendix C) from the Drug and Alcohol Program policy; and adding parameters on when applicants who have been unsuccessful with drug and alcohol requirements may reapply for employment with WMATA.

Additionally, WMATA's executive leadership approved a recommendation from the offices of Safety, Labor and Employee Relations and Occupational Health and Wellness to eliminate all non-DOT safety sensitive categories. This resulted in the abolishment of non-DOT random testing and decreased the number of employees required to obtain safety-sensitive physical examinations. These employees are still subject to fitness for duty evaluations and incidental testing (i.e., post-incident) when applicable. These changes will make WMATA's Drug and Alcohol Program policy more efficient and compliant.

#### **Discussion:**

OHAW's Drug and Alcohol Program office worked with FTA to ensure all federal requirements were met with the amendments to the Drug and Alcohol Program policy. OHAW's Drug and Alcohol Compliance Program, Clinical Services, and the Employee Assistance Program worked in conjunction to ensure all associated program policies were cohesive.

#### **FUNDING IMPACT:**

N/A	
Project Manager:	Pamela Mosby, Manager, Drug and Alcohol Compliance Program
Project Department/Office:	IBOP/OHAW/Drug and Alcohol Compliance Program

#### **TIMELINE:**

<b>Previous Actions</b>	FTA completed its drug and alcohol audit of OHAW's program in November 2019. OHAW has updated its D&A policy in accordance with FTA's recommendations.
<b>Anticipated actions after presentation</b>	The revised Drug and Alcohol Program policy will be approved by WMATA's Board.

#### **RECOMMENDATION:**

Approval to amend WMATA's revised Drug and Alcohol Program policy to ensure compliance with FTA regulations.

SUBJECT: REVISIONS TO THE DRUG AND ALCOHOL POLICY

RESOLUTION  
OF THE  
BOARD OF DIRECTORS  
OF THE  
WASHINGTON METROPOLITAN AREA TRANSIT AUTHORITY

WHEREAS, Federal Transit Administration (FTA) regulations (49 C.F.R. § 655.15) require the Board of Directors to adopt an anti-drug and alcohol misuse policy statement; and

WHEREAS, The Board has previously adopted a drug and alcohol policy, which current version is the Drug and Alcohol Policy and Testing Program, Policy/Instruction 7.7.3 ("Drug and Alcohol Policy"); and

WHEREAS, FTA conducted an audit on WMATA's drug and alcohol testing program and issued audit findings that require certain revisions to the Drug and Alcohol Policy; and

WHEREAS, Staff recommends revisions to the Drug and Alcohol Policy to address the FTA findings, as well as certain additional changes to clarify drug and alcohol processes and standards, all as shown in Attachment A;

NOW, THEREFORE, be it

*RESOLVED*, That the Board of Directors adopts the revised Drug and Alcohol Testing Program Policy, Policy/Instruction 7.7.3, set forth in Attachment A; and be it finally

*RESOLVED*, That this Resolution shall be effective 30 days after adoption in accordance with Compact Section 8(b).

Reviewed as to form and legal sufficiency,

/s/ Patricia Y. Lee

Patricia Y. Lee

Executive Vice President and General Counsel

**POLICY/INSTRUCTION:  
7.7.3/7****Drug & Alcohol Testing Program Policy****SUPERSEDES: 7.7.3/6****APPLICABLE TO: All Metro employees, applicants for Metro employment, and employees of Metro contractors & subcontractors.**

*A portion of Metro's drug and alcohol testing requirements exceed the DOT/FTA requirements set forth in 49 Code of Federal Regulations Parts 40 and 655. Provisions set forth under this policy that exceed the DOT/FTA regulations appear in **bold** print.*

**1.00 PURPOSE**

- 1.01 This Policy/Instruction (P/I) establishes Washington Metropolitan Area Transit Authority's (Metro) drug and alcohol testing program policy and incorporates the U.S. Department of Transportation and Federal Transit Administration (DOT/FTA) guidelines on drug and alcohol misuse, prevention and testing. Compliance with this P/I is a requirement of all Metro employees and applicants and is therefore a condition of employment. Employees, applicants, and employees of Metro contractors and subcontractors are required to submit to drug and alcohol testing as specified in this P/I.
- 1.02 Locations and contacts for Metro's Drug and Alcohol Testing Program Policy are in Section 5.10 of this P/I.
- 1.03 Metro is committed to maintaining an operation free of prohibited drugs and alcohol to protect the health and safety of employees, patrons, and the general public. To accomplish this, it is Metro's policy to maintain a workplace free from the misuse or influence of alcohol and drugs.
- 1.04 Drug and alcohol testing is mandated for Safety-Sensitive Employees and Safety-Sensitive Contractors by the FTA in 49 CFR Part 655, *Prevention of Alcohol Misuse and Prohibited Drug Use in Transit Operations*, as amended. The DOT has rules on how the testing must take place, set forth in 49 CFR Part 40, *Procedures for Transportation Workplace Drug and Alcohol Testing Programs*, as amended.

**2.00 SCOPE**

- 2.01 This P/I apply to all Metro employees and applicants for employment.
- 2.02 This P/I also apply to employees of Metro contractors and subcontractors ("contractors").

**3.00 DEFINITIONS**

- 3.01 **Accident** - is an occurrence associated with the operation of a vehicle by a Safety-Sensitive Employee or Safety-Sensitive Contractor if as a result:
- (a) An individual dies (fatal);
  - (b) An individual suffers bodily injury and immediately receives medical treatment away from the scene of the accident (non-fatal);
  - (c) With respect to an occurrence in which the public transit vehicle involved is a bus, electric

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By General Manager &amp; Chief Executive Officer Paul J. Wiedefeld

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bus, van, or automobile, in which one or more vehicles (including non-FTA funded vehicles) incurs disabling damage as the result of the occurrence and such vehicle or vehicles are transported away from the scene by a tow truck or other vehicle; or

(d) With respect to an occurrence in which the public transportation vehicle involved is a rail car, trolley car, trolley bus (on a fixed guideway or overhead wire), or vessel, and is removed from operation.

- 3.02 **Alcohol** - is the intoxicating agent in beverage alcohol, ethyl alcohol, methyl, isopropyl, and other low molecular weight alcohols.
- 3.03 **Alcohol Confirmation Test** - is a test using an evidential breath testing device, following a screening test with a result of 0.02 or greater, that provides quantitative alcohol concentration data.
- 3.04 **Breath Alcohol Technician (BAT)** - is a trained individual who instructs donors during the alcohol testing process and operates an evidential breath testing device (EBT).
- 3.05 **Cancelled Test** - is a drug or alcohol test that has a problem that cannot be or has not been corrected, or a drug or alcohol test that DOT/FTA and/or Metro otherwise requires to be cancelled. A cancelled test is neither a positive nor negative test result.
- 3.06 **Chain of Custody** - refers to the procedures used to document the handling of the urine specimen from the time the employee or contractor gives the specimen to the collector until the specimen is destroyed.
- 3.07 **Collection Site** - is a designated location selected by Metro where donors present themselves for the purpose of providing a specimen of urine and/or breath to be analyzed for the presence of drugs and/or alcohol.
- 3.08 **Confidentiality** - is the required non-disclosure of test results except to the donor, the Medical Review Officer (MRO), management, DOT/FTA, and as otherwise required by law.
- 3.09 **Cut-off level for Alcohol** - is the minimum alcohol level determined by blood alcohol concentration level as identified by the evidential breath testing device process facilitated by a breath alcohol technician.
- 3.10 **Cut-off level for Drugs** - is the current, standard minimum amount of drug or its metabolite presence in a urine sample as defined by the Substance Abuse & Mental Health Services Administration (SAMHSA) to determine whether a urine sample is positive for drugs or classes of drugs which include marijuana, cocaine, opioids, PCP, and amphetamines.
- 3.11 **Designated Employer Representative (DER)** - is a Metro-appointed employee authorized to remove an employee or contractor from performing Safety-Sensitive Functions.

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- 3.12 **DHHS-Certified Laboratory** - is a chemical testing laboratory that meets Department of Health & Human Services (DHHS) requirements to perform chemical analyses.
- 3.13 **Dilute Urine Drug Specimen** - is a urine specimen with creatinine and specific gravity values that are not within the expected concentrations for human urine.
- 3.14 **Disabling Damage** - is damage that precludes the departure of a motor vehicle from the scene of the accident in its usual manner in daylight after simple repairs, including damage to motor vehicles that could have been driven, but would have been further damaged if so driven. Disabling damage does not include:
- (a) damage that can be remedied temporarily at the scene of the accident without special tools or parts;
  - (b) tire disablement without other damage even if no spare tire is available;
  - (c) headlamp or taillight damage; and/or
  - (d) damage to turn signals, horn, or windshield wipers rendering them inoperable.
- 3.15 **Donor** - is an individual from whom a specimen is being collected for drug and alcohol testing purposes.
- 3.16 **Drug and Alcohol Testing Program** - is a program to detect and deter the misuse of alcohol and prohibited drugs.
- 3.17 **Employee Assistance Program (EAP)** - is a confidential program offering counseling and referral for employees who have substance abuse problems, marital, emotional, family, or financial concerns which may cause poor attendance, unsatisfactory job performance, or create safety hazards for the employee, co-workers, and/or the public.
- 3.18 **Evidential Breath Tester (EBT)** - is a device utilized to detect the presence and measure breath alcohol concentration.
- 3.19 **Medical Provider** - is a licensed healthcare professional, practicing within the scope of that licensure and is authorized to prescribe medications, i.e., medical doctors, dentists, nurse practitioners, and podiatrists.
- 3.20 **Medical Review Officer (MRO)** - is a licensed physician (Medical Doctor or Doctor of Osteopathy) responsible for receiving and reviewing laboratory results generated by an employer's drug and alcohol testing program and evaluating medical explanations for drug test results.

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- 3.21 **Monitored Urine Collection** - is a collection that is conducted using a multi-stall restroom. The site provides substantial visual privacy and the monitor secures all sources of water and other substances that could be used for adulteration and substitution. Only the monitor and the donor may be present; the monitor prevents unauthorized entry to the restroom during the collection. The donor is not observed urinating during a monitored urine collection.
- 3.22 **Negative-Dilute Urine Drug Test Result** - is a laboratory report indicating that there was no drug present at the screening cut-off level or higher and that the specimen was diluted based on the specific gravity and creatinine values.
- 3.23 **Non-Negative Drug Test Result** - is a report, after review by the MRO, with one or more of the following:
- (a) positive, with drug(s)/metabolite(s) noted;
  - (b) positive-dilute, with drug(s)/metabolite(s) noted, with numerical values for creatinine and specific gravity;
  - (c) adulterated, with adulterant(s) noted, with confirmatory test values (when applicable), and with remarks(s);
  - (d) substituted, with confirmatory test values for creatinine and specific gravity; and/or
  - (e) invalid result, with remark(s) - laboratories will report actual pH values.
- 3.24 **Non-Safety-Sensitive Contractor** - is an employee of a Metro contractor or subcontractor who does not perform a Safety-Sensitive Function as defined by DOT/FTA regulations and is not subject to random drug and alcohol testing. **However, all contractors are subject to Metro's post-incident testing when circumstances require such testing.**
- 3.25 **Non-Safety-Sensitive Employee** - is an employee who does not perform a Safety-Sensitive Function as defined by DOT/FTA regulations and is not subject to random drug and alcohol testing. **However, all Metro employees are subject to Metro's post-incident and follow-up drug and alcohol testing when circumstances require such testing.**
- 3.26 **Public Transportation Vehicle** - is a bus, electric bus, van, automobile, rail car or trolley car that is DOT-funded or unfunded, whether in or out of revenue service, used for public transportation or ancillary services.
- 3.27 **Refusal to Test** - constitutes a verified positive test result and occurs when a selected or required employee or contractor
- (a) Fails to appear for any test (except a pre-employment test) within a reasonable time, as determined by Metro, after being directed to do so by Metro;

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- (b) Fails to remain until the testing process is complete;
- (c) Possesses/wears a prosthetic or other device used to tamper with the testing process;
- (d) Fails to provide the required urine or breath specimen for any drug or alcohol test;
- (e) Fails to remain readily available for a post-accident or **Metro post-incident test** as determined by the DER; **or notify supervisor of whereabouts until testing is complete;**
- (f) Provides an MRO-verified adulterated or substitute specimen;
- (g) Refuses to comply with direct observation urine collection test procedures, including failing to follow the observer's instructions to raise clothing above the waist, lower clothing and underpants, and to turn around to permit the observer to determine if there is any type of prosthetic or other device that could be used to interfere with the collection process;
- (h) Refuses to comply with monitored urine collection test procedures;
- (i) Fails to provide a sufficient amount of urine or breath when directed and it has been determined, through a required medical evaluation, that there was no adequate medical explanation for the failure;
- (j) Fails to undergo a medical examination, as directed by the MRO, as part of the verification process or as directed by the DER;
- (k) Fails to take a directed second test;
- (l) Admits to the adulteration or substitution of a specimen to the collector or MRO;
- (m) Refuses to sign Step 2 of the alcohol test form; and/or
- (n) Refuses to cooperate with any part of the testing process, e.g., refusal to empty pockets when directed by the collector or displays behavior in a confrontational way that disrupts the collection process.

3.28 **Safety-Sensitive Applicant** - is an individual, under consideration for employment, including former employees, in a position that is classified as Safety-Sensitive as defined by DOT/FTA regulations.

3.29 **Safety-Sensitive Contractor** - refers to an individual who is the employee of a Metro contractor or subcontractor and who performs Safety-Sensitive Functions as defined by DOT/FTA regulations.

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- 3.30 **Safety-Sensitive Employee** - is an employee, including an applicant or transferee, who performs a Safety-Sensitive Function as defined by DOT/FTA regulations.
- 3.31 **Safety-Sensitive Function (DOT/FTA)** - is any of the following duties, when performed by employees or contractors:
- (a) Operating a revenue service vehicle, including when not in revenue service;
  - (b) Operating a non-revenue service vehicle, when required to be operated by a holder of a Commercial Driver's License;
  - (c) Maintaining (including repairs, overhaul, and rebuilding) a revenue service vehicle or equipment used in revenue service;
  - (d) Controlling dispatch or movement of a revenue service vehicle; and
  - (e) Carrying a firearm for security purposes.
- 3.32 **Substance Abuse Counselor (SAC)** - is a person who evaluates Metro employees who have violated a Metro (non-DOT) drug and alcohol policy requirement and makes recommendations concerning education, treatment, follow-up testing, and aftercare.
- 3.33 **Substance Abuse and Mental Health Services Administration (SAMHSA) Drug** - refers to the required substances for which testing is conducted, which includes cocaine, marijuana, amphetamines, opioids, and phencyclidine.
- 3.34 **Substance Abuse Professional (SAP)** - is a person who evaluates Metro employees who have violated a federal DOT drug and alcohol regulation and makes recommendations concerning education, treatment, follow-up testing, and aftercare.
- 3.35 **Split Specimen** - is a urine specimen that is divided between two separate collection vials to afford the donor an opportunity to have the sample tested at another DHHS laboratory in the event the donor questions the primary result and requests a secondary test following a verified positive test of the primary specimen or a verified adulterated or substitute test result
- 3.36 **Substitute Urine Drug Specimen** - is urine that has been submitted in place of the donor's urine as evidenced by creatinine and specific gravity values. A substituted specimen is a refusal to test.
- 3.37 **Transferee** - is a current Metro employee who has applied for or is being considered for employment in another position, including employees being promoted to or demoted from another position.
- 3.38 **Verified Test** - is a urine specimen that has been analyzed by a DHHS-certified laboratory and has undergone review and final determination by the MRO.

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- 3.39 **Workplace** - is any location, either permanent or temporary, where employees or contractors perform any act in connection with their Metro employment or contractual relationship. These locations can include, but are not limited to, all Metro owned or leased transit facilities, equipment locations, garages, depots, terminals, rail stations, offices, vehicles, buses, trains, or non-revenue vehicles whether owned or not owned, leased, or operated by Metro.

**4.00 RESPONSIBILITY**

- 4.01 The Metro Board of Directors (Board) is responsible for adopting this P/I as required by 49 CFR Part 655. The Board delegates to the GM/CEO full authority to implement a drug and alcohol testing program consistent with this P/I and all applicable federal laws, rules, or regulations relating to federal drug and alcohol testing. The GM/CEO shall not modify this P/I without authorization by the Board, except that the GM/CEO may update Occupational Health and Wellness (OHAW) employee contact information in section 5.10 and associated appendices without Board authorization.
- 4.02 General Manager/Chief Executive Officer (GM/CEO) is responsible for:
- (a) establishing employee standards of conduct and a system of accountability for performance;
  - (b) establishing a system for the timely review of drug and alcohol program elements;
  - (c) establishing a system for reporting information regarding drug and alcohol testing activities to the Board that, at a minimum, includes reporting information on the following activities to the Board at least twice annually in March and September for the prior 6-month period:
    - (1) report of drug and alcohol testing activity including trends and outcomes;
    - (2) report of drug and alcohol training activity of Safety-Sensitive Employees and supervisors;
    - (3) report on regulatory proceedings or litigation which relate or refer to any portion of the P/I; and
    - (4) report of the drug and alcohol program oversight conducted on contractors.
  - (d) ensuring proper drug and alcohol collection and testing procedures;

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- (e) maintaining an updated and accurate list of Safety-Sensitive job codes and Safety-Sensitive Employees to ensure that all employees are captured in Metro's drug and alcohol testing program;
- (f) maintaining accurate and timely drug and alcohol recordkeeping and reporting to FTA;
- (g) establishing a contractor oversight program, including establishing an updated and accurate list of contracting entities and contractor employees who perform Safety-Sensitive Functions for Metro and ensuring that all applicable Metro contracts include a DOT drug and alcohol testing program clause;
- (h) ensuring timely and comprehensive Safety-Sensitive Employee and supervisor drug and alcohol training;
- (i) enforcing consequences for employees who fail to comply with drug and alcohol policies, procedures, and DOT drug and alcohol regulations;
- (j) distributing this P/I to all employees;
- (k) ensuring proper oversight and administration of related policies, such as *P/I 7.7.1, Drug-Free Workplace*; and
- (l) complying with all other drug and alcohol requirements provided for in 49 CFR Parts 655 and 40 and Metro policy.

4.03 Delegation Authority. The GM/CEO is authorized to delegate management authority to qualified program officers and may authorize the re-delegation of authority to other qualified Metro employees for approving related implementing policies and procedures that augment this P/I.

## **5.00 POLICY AND PROCEDURES**

### **5.01 Overview of Drug and Alcohol Policy Requirements:**

- (a) Drug Testing:
  - (1) Employees and contractors are prohibited from being under the influence of illegal drugs and, **under Metro policy, illegal prescription medication, the presence of which may be detected by urinalysis.** As required by DOT regulations, Metro tests Safety-Sensitive Employees for cocaine, marijuana, amphetamines, opioids, and phencyclidine (PCP). All Safety-Sensitive Employees and Safety-Sensitive Contractors may be tested for these five drugs at any time while on duty. **Under Metro policy, all employees and contractors may also be tested for the other substances listed in Section 5.04 at any time while on duty.**
- (b) Alcohol Testing:

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- (1) Employees and contractors who perform Safety-Sensitive Functions may not consume alcohol under the following circumstances:
  - (i) four (4) hours before performing Safety-Sensitive Functions;
  - (ii) while performing any Safety-Sensitive Function; and
  - (iii) after an accident, until the employee/contractor has been tested or eight (8) hours have elapsed, whichever occurs first.
- (2) Alcohol Concentration Requirements:
  - (i) For both DOT and **non-DOT tests**, Metro will remove any employee or contractor from performing Safety-Sensitive Functions who is found to have an alcohol concentration of 0.02 or greater. **Non-represented employees who receive a non-negative test result are subject to discipline under Metro's Substance Abuse and Employee Assistance Program policy and any other applicable Metro policy. Represented employees who receive a non-negative test result are subject to discipline consistent with the applicable collective bargaining agreement.**
  - (ii) An alcohol concentration of 0.020 to 0.039 is not considered a DOT violation and therefore does not require employees or contractors to complete the DOT return to duty process. **Under Metro policy, however, an alcohol concentration of 0.020 to 0.039 for both DOT and non-DOT tests requires:**
    - a. **For employees, immediate removal from service and the requirement to complete Metro's return to duty process as specified in Section 5.02(h) of this P/I.**
    - b. **For contractors, and permanent removal from service and eligibility to provide service to Metro.**
  - (iii) An alcohol concentration of 0.040 or greater on a DOT test is a DOT violation. Employees are required to complete the DOT return to duty test before performing Safety-Sensitive Functions as specified in Section 5.02(h) of this P/I. **Contractors will be immediately and permanently removed from Metro service and will not be eligible to provide future service to Metro.**
- (3) On-Call Employees:
  - (i) Safety-sensitive employees and contractors shall not consume alcohol during their on-call hours. On-call employees and contractors can acknowledge their use of alcohol at the time they are called to duty.
  - (ii) If an employee or contractor acknowledges using alcohol and being unable to perform Safety-Sensitive Functions at the time he or she is called to duty, Metro

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will not allow that employee or contractor to perform Safety-Sensitive Functions.

- (iii) If an employee or contractor acknowledges using alcohol but claims that he or she can perform Safety-Sensitive Functions, Metro will not allow the employee to perform any functions.

(4) **Off Duty Employees:**

- (i) **Employees found on Metro property who exhibit signs of impairment will be required to submit to drug and alcohol testing. Any testing which produces a non-negative result will be referred to EAP as noted in section 5.03(b) of this policy.**

(c) **Prescription Medication Overview**

- (1) **Safety-Sensitive Employees are not prohibited from taking legally prescribed or over-the-counter medication. Under *P/I 7.7.6, Medication Reporting Policy*, however, Safety-Sensitive Employees are required to report all prescription medication to OHAW. Safety-Sensitive Employees are also required to report to OHAW over-the-counter medications that may impair job performance, mental function or motor skills. Employees will be held off from performing Safety-Sensitive Functions if Metro's Occupational Medicine Physician determines that the prescription or over-the-counter medication may impair the employee's job performance, mental function or motor skills. The Occupational Medicine Physician may refer an employee to a Substance Abuse Counselor (SAC) to determine when an employee may be cleared to perform Safety-Sensitive Functions. Metro's prescription and over-the-counter medication reporting procedures can be found in *P/I 7.7.6*.**

5.02 **Categories of Testing:**

*Safety-Sensitive Employees and Safety-Sensitive Contractors are required to submit to drug and alcohol testing administered in accordance with FTA regulations **and Metro policy**.*

**Note:** When both DOT/FTA and **Metro (Non-DOT)** drug testing is required, Metro will collect separate specimen voids. Metro will first collect the DOT/FTA specimen using DOT forms and will then collect the **Metro specimen using Non-DOT forms**.

**Note:** Travel times for employees who are allowed to arrive at the test site on their own accord via Metro Rail and/or Metro Bus for Random and Follow-up testing will no longer be published in this policy instruction. Employees are hereby advised to proceed immediately and directly, without detour or delay, to the test site indicated on the referral form upon notification. Travel times from each rail station to the test site noted on the referral form will be utilized for determining an employee's compliance with drug and alcohol testing reporting procedures. Arrival times will be

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verified by a Drug and Alcohol compliance technician prior to the commencement of the test. Failure to arrive on time will result in a refusal to test.

**Metro's OHAW is responsible for conducting all drug and alcohol tests listed below. The Drug and Alcohol compliance technician will conduct the tests and adhere to the testing and collection procedures established in Sections 5.05, 5.06, and 5.07 of this P/I. Contractors must be enrolled and subject to the contracting entity's drug and alcohol testing program. In addition, contractors must submit to Metro post-accident, reasonable suspicion, and post-incident testing.**

- (a) Follow-up Testing is conducted after any Metro employee has returned to duty following a mandatory EAP referral. The employee shall be subject to unannounced drug and alcohol testing for up to 60 months. The SAP/**SAC** shall determine the frequency and number of follow-up tests. The employee shall undergo a minimum of six drug and/or alcohol tests for the first 12 months after returning to duty. Metro will only conduct follow-up alcohol tests just before, during, or after an employee performs a Safety-Sensitive Function. Follow-up testing reporting procedures are provided on the *Random and Follow-up Referral Form (illustrated in Appendix C)*.
- (1) Follow-up testing plans that are delinquent due to a break in service will resume upon an employee's return to active pay status.
- (2) **Follow-up testing plans that are delinquent due to an employee's separation of employment will resume under Metro authority upon an employee's re-entry into the Metro workforce.**
- (b) Periodic Testing is conducted every two years unless otherwise indicated on the following **Safety-Sensitive Employees**:
- (1) **Employees required to maintain a commercial driver's license;**
- (2) **Train operators and interlocking operators as part of Metro's fitness for duty certification; and**
- (3) **Employees who are required to maintain police commission certification.**
- (c) Pre-employment Testing is conducted on all Safety-Sensitive Applicants and former employees under consideration for re-employment or reinstatement into a Safety-Sensitive position. Transferees and personnel being promoted to Safety-Sensitive positions who have neither performed a Safety-Sensitive Function nor have been in the Safety-Sensitive random selection testing pool for 90 calendar days or longer will be required to take a pre-employment test. Pre-employment testing will occur after a contingent offer of employment or transfer as follows:

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- (1) Pre-employment alcohol testing will be conducted after a contingent offer of employment or transfer, subject to the donor passing the pre-employment alcohol test.
  - (2) Metro must receive a verified negative drug result and alcohol result of less than 0.02 prior to the applicant's/employee's performance of Safety-Sensitive Functions. Cancelled tests must be recollected.
  - (3) Prior to the first performance of a DOT safety sensitive function but no more than 30 days of employment, applicants are required to cooperate with Metro's efforts to obtain their drug and alcohol test history from DOT-regulated employers who have employed the employee during any period within the two years before the date of the employee's application or transfer. Employees must provide written consent authorizing the release of information from the prior employer.
- (d) Post-Accident Testing is conducted for DOT Safety-Sensitive Employees and Safety-Sensitive Contractors under the following circumstances:
- (1) Fatal Accidents: When an accident results in the death of an individual, any surviving Safety-Sensitive Employee or Safety-Sensitive Contractor who operated the public transportation vehicle at the time of the accident must be tested even if the operator can be completely discounted as contributing to the accident. OHAW will also test any other Safety-Sensitive Employee or Safety-Sensitive Contractor whose actions could have contributed to the accident.
  - (2) Non-Fatal Accidents: Any Safety-Sensitive Employee or Safety-Sensitive Contractor who operated the public transportation vehicle at the time of the accident must be tested unless the operator can be "completely discounted", as a contributing factor to the accident. Any other Safety-Sensitive Employee or Safety-Sensitive Contractor whose actions could have contributed to the accident will also be tested. Non-fatal accidents occur when:
    - (i) An accident results in an individual suffering bodily injury and immediately receives medical treatment away from the scene of the accident;
    - (ii) An accident involves disabling damage to a vehicle (e.g., a bus) and the vehicle is transported away from the scene by another vehicle; or
    - (iii) The public transportation vehicle involved is a rail car, trolley car, trolley bus, or vessel is removed from operation.
  - (3) Drug and Alcohol Testing Protocols:
    - (i) Alcohol tests should be administered as soon as practicable but within two

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(2) hours following the accident. An alcohol test can be administered within eight (8) hours following an accident, but any test not administered within two (2) hours must include a record stating the reason the alcohol test was not promptly administered.

- (ii) Drug tests are administered as soon as practicable but within 32 hours of the accident. **Under Metro policy, the employee is required to be escorted to the collection site by a supervisor or manager.**
- (iii) Identified employees and contractors are required to abstain from consuming alcohol for eight (8) hours or until tested, whichever occurs first.
- (iv) Identified employees and contractors must remain available for urine drug testing for 32 hours.
- (v) All Metro employees and contractors are required to notify their supervisors of their location if they leave the scene of the accident prior to submission of a drug and alcohol test.

*Note: Nothing in this P/I shall be construed to require the delay of necessary medical attention for the injured following an accident or to prohibit a Safety-Sensitive Employee from leaving the scene of an accident for the period necessary to obtain assistance in responding to the accident or to obtain necessary emergency medical care.*

- (e) **Post-Incident Testing** may be performed on employees and contractors whose performance cannot be “completely discounted,” (applying 49 CFR 655.44 post-accident standard to Metro’s post-incident policy), as the cause or a contributing factor to an incident. A post-incident test may be triggered when the employee or contractor is not designated as DOT/FTA Safety-Sensitive or where the incident failed to meet the criteria of a DOT/FTA post-accident test.
  - (1) **An example of a circumstance that may require post-incident testing is as follows:**
    - (i) **Accidents where the mass transit vehicle is not disabled to the extent that it must be transported away from the scene by another vehicle.**
  - (2) **Post-Incident Testing is administered as soon as practicable but no later than eight (8) hours for alcohol or 32 hours for drugs from the time of the incident.**
- (f) **Random Testing** is performed on Safety-Sensitive Employees who are identified using software generating the random selection. Random testing will be conducted at all days and hours during which Safety-Sensitive Functions are performed. Testing is unannounced, unpredictable, and spread reasonably throughout the year. Metro can conduct drug testing any time while employees are on duty. Metro will only conduct random

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alcohol tests just before, during, or after a Safety-Sensitive Employee performs Safety-Sensitive Functions. Random testing reporting procedures are illustrated in *Appendix C*.

- (g) Reasonable Suspicion Testing is a DOT test performed when a Metro supervisor with the appropriate training has reason to believe that any Safety-Sensitive Employee or Safety-Sensitive Contractor has used a prohibited drug and/or engaged in alcohol misuse based on specific, contemporaneous articulable observations concerning appearance, behavior, speech, or body odors. The employee's supervisor, a Street Operations Manager (SOM), or another member of management must escort the employee or contractor to the designated collection site when reasonable suspicion testing is requested. Metro will only conduct reasonable suspicion alcohol tests just before, during, or after a Safety-Sensitive Employee performs Safety-Sensitive Functions. **Under Metro policy, Non-Safety-Sensitive Employees and Non-Safety-Sensitive Contractors are also subject to a drug and alcohol test when reasonable suspicion exists that the employee or contractor may have used a prohibited drug and/or engaged in alcohol misuse. OHAW will categorize the test as a post-incident for Non-Safety-Sensitive Employees and Non-Safety-Sensitive Contractors.**
- (h) Return to Duty Testing:
- (1) Employees must complete a DOT return to duty test if the employee has:
    - (i) a verified DOT positive drug test result;
    - (ii) a DOT alcohol result of 0.04 or greater;
    - (iii) a refusal to submit to a DOT test; or
    - (iv) any other violation of the prohibition on the use of alcohol or drugs under a DOT regulation.
  - (2) **An employee who does not need to complete the DOT return to duty process must still complete Metro's return to duty process if that employee has:**
    - (i) **a verified Metro positive drug test result;**
    - (ii) **a Metro alcohol result of 0.02 or greater;**
    - (iii) **a DOT alcohol result of 0.02 to 0.039;**
    - (iv) **a Metro refusal to submit to a test; or**
    - (v) **any other violation of the prohibition on the use of alcohol or drugs under Metro policy.**

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- (3) Required on-duty surveillance testing by EAP due to a reported citation/arrest for driving under the influence (DUI) or driving while intoxicated (DWI) at any time.
- (4) The following return to duty procedures apply:
  - (i) Employees and contractors who must complete the DOT return to duty process must be evaluated by a Substance Abuse Professional (SAP). **Employees who must complete the Metro return to duty process must be evaluated by a Substance Abuse Counselor (SAC).** The SAP/SAC will determine whether the employee has successfully completed the SAP/SAC's treatment recommendation and can undergo a return to duty drug and alcohol test.
  - (ii) For both the DOT and **non-DOT** return to duty process, employees will not be cleared to perform Safety-Sensitive Functions, or any other function until:
    - 1) they have a return to duty drug test with verified negative results; and/or
    - 2) **under Metro policy**, an alcohol test with a negative alcohol concentration of less than **0.02**.
- (i) **Surveillance Testing is performed on employees who are enrolled in Metro's Substance Abuse Program and are held off from returning to duty in accordance with the applicable collective bargaining agreement and/or Metro policy and/or employees who have a reported DUI/DWI.**

**5.03 Consequences of Verified Positive Drug Test or Confirmed Alcohol Test:**

- (a) Applicants for Employment (including former employees under consideration for reinstatement/rehire). Metro will reject any applicant who receives a verified non-negative drug or alcohol (**with a concentration of 0.02 or greater**) pre-employment test.
    - (1) **The applicant may re-apply after a one-year waiting period.**
- AND**
- (2) The applicant must provide documented evidence of having successfully participated, completed, and complied with the requirements of an alcohol or drug treatment program acceptable to Metro. Applicants must provide proof of SAP/SAC referral and participation, including successful completion of a minimum of six SAP/SAC required follow-up tests within one year of the return-to-duty test.
- (b) Employees and Contractors
    - (1) As set forth below, Drug and Alcohol compliance technicians are responsible for informing the DER, and employee's supervisor or contractor's supervisor (supervisor) that the employee or contractor must be held off from performing Safety-Sensitive Functions if the employee or contractor has refused to take a drug

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or alcohol test. If the employee or contractor receives a non-negative test result, the DER is responsible for informing the supervisor that the employee or contractor cannot perform Safety-Sensitive Functions. The supervisor is then responsible for ensuring that the individual is removed from performing Safety-Sensitive Functions. The DER will refer an employee who receives a non-negative test result to the SAP (for DOT violations) **or SAC (for non-DOT violations)** for evaluation.

- (i) Transfer Employees under consideration for a DOT Safety-Sensitive position who receive a non-negative drug test result, an alcohol concentration of **0.02 or greater**, or refuse to test are immediately removed from performing Safety-Sensitive Functions and will undergo evaluation by a SAP (for DOT violations) **or SAC (for non-DOT violations)**. **If the employee fails to successfully complete the substance abuse program, he or she will be subject to disciplinary action up to and including termination.** The employee must successfully complete the recommended counseling and/or rehabilitation program and receive a return to duty drug test with verified negative results and/or return to duty alcohol test with an alcohol concentration of **less than 0.02** before being cleared to perform Safety-Sensitive Functions. The SAP (for DOT violations) **or SAC (for non-DOT violations)** has discretion on which tests the employee must complete.
- (ii) Probationary employees who receive a non-negative drug test result, an alcohol concentration of **0.02 or greater**, or refuse to test are immediately removed from performing Safety-Sensitive Functions **and their employment will be terminated.**
- (iii) Non-probationary employees who receive a non-negative drug test result, an alcohol concentration of **0.02 or greater**, or refuse to test are immediately removed from performing Safety-Sensitive Functions **and will be disciplined** and referred to the SAP (for DOT violations) **or SAC (for non-DOT violations)** as specified in the applicable CBA and/or Substance Abuse and Employee Assistance Program policy. **If the employee fails to successfully complete the substance abuse program, he or she will be subject to disciplinary action up to and including termination.** The employee must successfully complete the recommended counseling and/or rehabilitation program and receive a return to duty drug test with verified negative results and/or return to duty alcohol test with a confirmed alcohol concentration of **less than 0.02**. The SAP (for DOT violations) **or SAC (for non-DOT violations)** has discretion on whether to require a drug test, an alcohol test, or both.
- (iv) Safety-Sensitive Contractors who receive a non-negative drug test result, an alcohol concentration of **0.02 or greater**, or refuse to test will be immediately and permanently **removed from Metro service and will not be eligible to provide future service to Metro.**

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Metro screens employees and contractors to the confirmatory standards listed below. Employees who exceed the following confirmatory levels will be subject to disciplinary action. **Safety-Sensitive Contractors who exceed the confirmatory levels will be immediately and permanently removed from Metro service and will not be eligible to provide future service to Metro.**

DRUG CLASS & ALCOHOL	DOT/FTA		METRO	
	SCREEN	CONFIRM	SCREEN	CONFIRM
Cocaine	150 ng/mL	100 ng/mL	150 ng/mL	100 ng/mL
Codeine/Morphine	2000 ng/mL	2000 ng/mL	300 ng/mL	300 ng/mL
Hydrocodone/Hydromorphon	300 ng/mL	100 ng/mL	300 ng/mL	100 ng/mL
Oxycodone/Oxymorphone	100 ng/mL	100 ng/mL	100 ng/mL	100 ng/mL
Marijuana (THC)	50 ng/mL	15 ng/mL	20 mg/mL	10 ng/mL
Phencyclidine (PCP)	25 ng/mL	25 ng/mL	25 ng/mL	25 ng/mL
Amphetamines	500 ng/mL	250 ng/mL	500 ng/mL	250 ng/mL
MDMA (Ecstasy)	500 ng/mL	250 ng/mL	500 ng/mL	250 ng/mL
6-Acetylmorphine	10 ng/mL	10 ng/mL	10 ng/mL	10 ng/mL
Barbiturates			300 ng/mL	200 ng/mL
Benzodiazepines			300 ng/mL	300 ng/mL
Methadone			300 ng/mL	300 ng/mL
Alcohol – Removal from Duty	0.02%	0.02%	0.02%	0.02%
Alcohol - Violation	0.02%	0.04%	0.02%	0.02%

**Note: When required by federal regulations or when advised by authoritative sources, Metro will amend screen/confirm drug and alcohol levels.**

**5.05 Drug and Alcohol Testing Collection Procedures:****(a) Alcohol Testing**

- (1) The collector will perform the breath alcohol testing in strict accordance with 49 CFR Part 40 Subparts J, K, L, M, and N. Outlined below is the general alcohol testing procedure, however, any technical interpretation will be based on the actual regulation.
- (2) The collector shall begin the testing process when the donor enters the collection site without undue delay. When alcohol testing is required, the collector conducts and completes the alcohol test prior to drug testing. Collector instructs the donor to present photo identification and/or be identified by his/her supervisor.
- (3) After the collector explains the testing procedures to the donor, the collector

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prepares and completes the alcohol testing form (ATF) with the donor's identifying information, requires the donor to certify and sign that he/she is submitting to an alcohol test confirming the information is true and correct. A donor's refusal to sign step 2 of the ATF is a refusal to test and carries the maximum consequences of a positive test.

- (4) The donor or collector selects a wrapped mouthpiece; the collector connects the mouthpiece to the EBT and verbally instructs the donor in providing an adequate breath sample. The collector displays the result to the donor, records the result of the alcohol test on the ATF and provides a copy to the donor.
- (5) Should the alcohol result be 0.020 or greater, the collector performs a confirmation breath analysis after a waiting period of 15 minutes but not more than 30 minutes after the completion of the initial test. The confirmation breath analysis serves as the final alcohol report. If the confirmation result is 0.020 or greater, the donor is instructed to certify by signature that he/she has submitted to the alcohol test, the results are accurately recorded on the ATF, and that he/she understands that they must immediately cease to perform Safety-Sensitive Functions.
  - (i) Should the donor refuse to sign this statement, the collector indicates this on the ATF with a copy provided to the donor. Refusal to sign the statement in Step 4 of the ATF is not a refusal to test.
- (6) Should the donor fail to provide an adequate amount of breath for the test (shy lung), the compliance collector will make a second attempt. If the second attempt fails to produce a sample, the collector indicates the failure in the remarks section of the ATF and the donor is then removed from all Safety-Sensitive Functions. Within 5 business days of the test, the donor can provide the MRO with documented medical proof from an approved, licensed physician that justifies the insufficient breath sample. Failure to provide sufficient medical documentation is a refusal to test.

**(b) Drug Testing:**

- (1) The collector will perform urine specimen collections in strict accordance with 49 CFR Part 40 Subparts C, D, E, and I. Outlined below is the general collection procedure, however, any technical interpretation will be based on the actual regulation.
- (2) The collector shall begin the testing process when the donor enters the collection site without undue delay. Collector instructs the donor to present photo identification and/or be identified by his/her supervisor. The collector will explain the collection process to the employee.
- (3) The donor removes any unnecessary outer garments, displays the contents of his/her pockets, washes and dries hands and selects a sealed collection kit.

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- (4) Prior to the collection of the specimen, the collector will complete Step 1 of the *Custody and Control form (CCF)* (illustrated in Appendix D).
- (5) Collector instructs the donor to provide a urine specimen in the privacy of a stall and immediately exit the stall after providing the specimen without flushing the toilet. The collector inspects the specimen to ensure there is no evidence of contamination; the temperature is within acceptable range; and there is sufficient specimen volume.
- (6) If there is reason to believe that the donor altered or substituted the specimen, the collector will conduct an immediate direct observation specimen collection on the donor.
- (7) The collector splits the urine specimen into two specimen bottles with the minimum volume required. The specimen bottles are sealed and dated by the collector. The donor verifies both seals' unique identification number with the CCF and initials both seals verifying that the bottles contain his/her urine specimen.
  - (i) Split testing affords the employee an opportunity to contest the results of the primary specimen. Upon a donor's timely notification to the MRO, the employer must ensure that split testing occurs regardless of an employee's ability to pay. The employer may seek reimbursement for this testing. **Metro will seek reimbursement when the split test confirms the results of testing on the primary specimen, consistent with applicable wage and hour laws.**
- (8) The donor certifies and signs the CCF indicating that his/her urine specimen was provided to the collector, that the specimen container was sealed in the donor's presence and that the information on the form and on the seals affixed to the specimen container are correct. The collector completes the CCF, places the sealed urine specimen bottles and the laboratory copy of the CCF in a shipping bag and seals the bag. The donor is provided with the donor copy of the CCF. MRO and Metro also retain copies of the CCF.
- (9) If the donor is unable to provide an adequate urine specimen (shy bladder) at the initial time of the collection, the collector will advise the donor to consume up to 40 ounces of water and to remain in the designated collection site waiting area. The donor has up to 3 hours to provide an adequate urine specimen. If the donor is unable to provide an adequate urine specimen at the end of the 3 hours, the donor can, within 5 business days of the test, provide the MRO with documented medical proof from an approved, licensed physician that justifies the insufficient urine sample. Failure to provide sufficient medical proof is a refusal to test.

**5.06 Direct Observation Procedures:**

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- (a) The collector shall perform the direct observation under DOT requirements **and/or Metro authority** when:
- (1) the original specimen appears to have been tampered with;
  - (2) the collector identifies a donor's attempt to alter or tamper with the specimen;
  - (3) a specimen test result is reported as invalid because there is no adequate medical explanation for the result;
  - (4) a positive, adulterated or substituted test result is reported as a cancelled test because testing on the split specimen could not be performed;
  - (5) the temperature of the specimen falls outside of the acceptable range; and/or
  - (6) the test is a return to duty or a follow-up.
- (b) The observer must be the same gender as the donor. If the collector is not the observer, the collector instructs the observer on the procedures for checking the donor for prosthetic or other devices capable of carrying "clean" urine and urine substitutes.
- (c) The observer will instruct the donor to raise his/her garments, as appropriate, above the waist just above the navel and lower clothing and underpants to mid-thigh and demonstrate by turning around, that the donor does not have such a device.
- (1) If the donor does not have a device, the donor is permitted to return clothing to the proper position for the observed collection. The observer observes the urine specimen going from the donor's body into the collection container. The observer must watch the donor deliver the specimen to the collector.
  - (2) If the donor has a device, the observer must immediately notify the collector. The collector must stop the collection and thoroughly document the circumstances surrounding the event in the remarks section of the CCF. The collector must notify the DER. This is a refusal to test.
- (d) When a donor fails or declines to permit any part of the direct observation procedure, the donor has refused to test.

**5.07 Dilute Specimen Procedure:**

- (a) When a positive drug test is dilute, the test will be treated as a verified positive test. The collector shall not direct the donor to provide another test.
- (b) A donor will be retested if he or she receives a negative-dilute drug test result. Laboratory

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reports indicating a negative-dilute urine specimen will be first evaluated by the MRO to determine whether or not a retest should be conducted as follows:

- (1) If a donor receives a negative-dilute test result with a creatinine concentration greater than or equal to 2mg/dL but less than or equal to 5mg/dL, the donor will be required to do a second collection immediately by direct observation. If the second collection is also negative-dilute, the test result will stand as negative- dilute.
- (2) If a donor receives a negative-dilute with a creatinine concentration greater than 5mg/dL but less than 20 mg/dL, the donor will be required to do a second collection immediately not under direct observation. If the second collection is also negative-dilute, unless directed by the MRO to perform a direct observation in accordance with (b)(1) of this section, the test result will stand as negative- dilute.
- (3) When a retest is required, Metro's DER requires that the donor be escorted immediately by a supervisor to the testing site; or, in the case of an applicant, instructed to report to Metro OHAW immediately. The escort must not allow the donor to drink any fluids, eat or take anything by mouth. A donor's failure to cooperate with the immediate retest requirement or leaving the collection site after receiving notification to retest is a refusal to test.

**5.08 Education and Training Program:**

- (a) Metro's education and training program includes notices on official bulletin boards, informational brochures and educational material on the misuse of alcohol and the effects of prohibited drug use, coordination with community referral programs and hot-line telephone numbers.
- (b) All employees shall attend at least one 60-minute training session on the effect and consequences of prohibited drug use on personal health, safety, and the work environment, and on the signs and symptoms that may indicate prohibited drug use (Employee Drug and Alcohol Training). Employees will receive Metro's Drug and Alcohol Testing Program policy materials.
- (c) Metro supervisors must complete at least one instructor led training session that includes at least 60 minutes of training on making objective determinations about physical, behavioral, speech, and performance indicators of probable drug use and at least 60 minutes of training on the physical, behavioral, speech, and performance indicators of probable alcohol misuse (*Reasonable Suspicion Training for Supervisors*). **Refresher training is required every 3 years via computer-based-training (CBT). This training is recommended for all employees.**
- (d) **Metro supervisors must complete at least one training on the criteria regarding decision making for post-accident testing. Refresher training is required every 3 years via computer-based-training (CBT). This training is recommended for all**

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- (e) The common effects of alcohol misuse, signs and symptoms, and methods of intervention are included in *Appendix A* of this P/I.

**5.09 Reporting, Record Retention, and Confidentiality:**

- (a) The DER is responsible for notifying the employee's or contractor's supervisor when an employee or contractor is removed from duty due to a non-negative drug and/or alcohol test.
- (b) The Drug and Alcohol Program Manager is required to submit annual reports to the FTA by March 15 for the previous calendar year (January 1 – December 31) summarizing the results of its anti-drug and alcohol misuse programs for DOT Safety-Sensitive Employees and Metro's DOT Safety-Sensitive Contractors.
- (c) Employees may obtain copies of their drug and alcohol records by submitting a request in writing to OHAW's Drug and Alcohol Compliance Program.
- (d) Except as required by law or authorized by *P/I 9.2, Metro's Privacy Policy*, OHAW's Drug and Alcohol Compliance Program shall not disclose test results to a third party absent the employee's written authorization.
- (e) OHAW shall retain records of drug/alcohol test results as follows:
- (1) Non-negative results and refusal to test – five (5) years;
  - (2) Records of negative drug and/or alcohol (<0.02) tests – one (1) year; and
  - (3) Training documentation records that include specimen collection, collector training, employee and supervisor training – two (2) years.
- (f) DOT drug and alcohol testing records are maintained securely and separately from **non-DOT drug and alcohol testing records**. The Drug and Alcohol Program Manager is responsible for maintaining these records at OHAW.

**5.10 Locations and Contacts for Metro Drug and Alcohol Policy and Testing Program:**

Primary Collection Site (24 Hours):  
Jackson Graham Building (JGB - Headquarters)  
600 5<sup>th</sup> Street, NW, Room B3-10  
Washington, DC 20001  
Telephone: 202-962-5674  
Secure Fax: 202-962-6198

Additional Services and Staff:

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**POLICY/INSTRUCTION:**  
**7.7.3/7****Drug & Alcohol Testing Program Policy****SUPERSEDES: 7.7.3/6****APPLICABLE TO: All Metro employees, applicants for Metro employment, and employees of Metro contractors & subcontractors.**

Occupational Health and Wellness  
8200 Professional Place, Suite 109  
Landover, MD 20785  
Telephone: 202-636-7144  
Secure Fax: 202-636-7180

Additional Services/Programs	Point of Contact	Telephone	Email
Designated Employer Representative (DER)	Pamela Mosby	202-636-7144	<a href="mailto:OHAW_DrugandAlcohol_Compliance Program@wmata.com">OHAW_DrugandAlcohol_Compliance Program@wmata.com</a>
Drug and Alcohol Compliance Program			
Employee Assistance Program	Kimberly Gillespie	202-636-7181	<a href="mailto:EAP@wmata.com">EAP@wmata.com</a>
Medical Review Officer	Amy Espy-Smith, MD	202-636-7141	<a href="mailto:AEEspySmith@wmata.com">AEEspySmith@wmata.com</a>
Substance Abuse Professional	Employee Assistance Program	202-636-7181	<a href="mailto:EAP@wmata.com">EAP@wmata.com</a>

**6.00 ENFORCEMENT**

Failure to comply with the provisions of this P/I will result in disciplinary action up to and including termination.

**7.00 EXCEPTIONS**

None.

**8.00 RELATED POLICIES, REGULATIONS & RESOLUTIONS**

- 8.01 Prevention of Alcohol Misuse and Prohibited Drug Use in Transit Operations, 49 *Code of Federal Regulations* Part 655.
- 8.02 Procedures for Transportation Workplace Drug and Alcohol Testing Programs, 49 *Code of Federal Regulations* Part 40.

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**POLICY/INSTRUCTION:  
7.7.3/7****Drug & Alcohol Testing Program Policy****SUPERSEDES: 7.7.3/6****APPLICABLE TO: All Metro employees, applicants for Metro employment, and employees of Metro contractors & subcontractors.**8.03 P/I 7.7.1, *Drug Free Workplace*.8.04 P/I 7.7.2, *Substance Abuse and Employee Assistance Program*.8.05 P/I 7.7.6, *Medication Reporting Policy*.

8.06 Negotiated substance abuse/employee assistance program agreements

**9.00 LIST OF APPENDICES, ATTACHMENTS OR FORMS**

9.01 Appendix A - Effects, Signs, and Symptoms of Alcohol Misuse and Methods of Intervention

9.02 Appendix B - Metro Job Titles List

9.03 Appendix C - Random and Follow-Up Referral Form

9.04 Appendix D - Custody and Control Form

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**POLICY/INSTRUCTION: 7.7.3/7**  
**Drug & Alcohol Testing Program Policy****APPENDIX A: Effects of Alcohol Misuse on Individuals; Signs and Symptoms of Alcohol Misuse; and Methods of Intervention****EFFECTS OF ALCOHOL MISUSE ON INDIVIDUALS**

Effects on Health	Effects on Work	Effects on Personal Life
<ol style="list-style-type: none"><li>1. Alcohol tolerance</li><li>2. Alcohol-related illnesses:<ol style="list-style-type: none"><li>a. Hepatitis</li><li>b. Cerebral degeneration</li></ol></li><li>3. Psychological manifestations<ol style="list-style-type: none"><li>a. Anxiety</li><li>b. Insomnia</li><li>c. Depression</li><li>d. Suicide Attempts</li></ol></li><li>4. Physiologic Dependence (withdrawal signs/symptoms)<ol style="list-style-type: none"><li>a. Gross tremor</li><li>b. Hallucinations</li><li>c. Withdrawal seizures</li><li>d. Delirium tremors</li></ol></li></ol>	<ol style="list-style-type: none"><li>1. Tardiness</li><li>2. Absenteeism</li><li>3. Interpersonal problems with supervisor and colleagues</li><li>4. Decreased productivity</li><li>5. Deterioration in the amount of work accomplished and quality of work</li><li>6. Increase in incidents/accidents</li></ol>	<ol style="list-style-type: none"><li>1. Preoccupation with recreational drinking</li><li>2. Social isolation</li><li>3. Frequent job changes</li><li>4. Frequent moves to new areas</li><li>5. Complaints by family members about behavior related to alcohol</li><li>6. Marital difficulties - divorce or separation</li><li>7. Child or spouse abuse</li><li>8. Loss of interest in non-drinking activities</li><li>9. Drinking before a party (in case there is not enough to drink at the party)</li><li>10. Blackouts (not remembering what happened during a drinking spell)</li><li>11. Drinking-related arrests or citations for driving under the influence</li></ol>

**SIGNS AND SYMPTOMS OF ALCOHOL MISUSE**

<ul style="list-style-type: none"><li>- Alcohol breath</li><li>- Ruddy face</li><li>- Unsteady gait</li><li>- Tremors</li><li>- Poor psychomotor coordination</li></ul>	<ul style="list-style-type: none"><li>- Blackout spells</li><li>- Behavioral difficulties resulting in interpersonal problems with spouse, children and co-workers</li></ul>	<ul style="list-style-type: none"><li>- Withdrawal signs such as gross tremor (alcohol-related), hallucinations and seizures</li><li>- Alcohol-related anxiety, insomnia, depression and suicide attempts</li></ul>
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**POLICY/INSTRUCTION: 7.7.3/7**  
**Drug & Alcohol Testing Program Policy**

**APPENDIX A: Effects of Alcohol Misuse on Individuals; Signs and Symptoms of Alcohol Misuse; and Methods of Intervention**

**METHODS OF INTERVENTION WHEN AN ALCOHOL PROBLEM IS SUSPECTED**

When alcohol misuse is suspected, the employee is approached by his/her supervisor in private and is then immediately escorted to the Medical Office or designated Collection Facility for breath alcohol testing. In accordance with Metro policy, a breath alcohol concentration of **0.02 or greater** requires immediate removal from safety-sensitive duties and referral to a SAP (for DOT violations) **or SAC (for non-DOT violations)**. The SAP **or SAC** directs the employee to enroll in Metro's Employee Assistance Program (EAP) in accordance with Metro's Substance Abuse Policy. The basic principles of intervention include: (1) Assessment, (2) Referral, (3) Treatment (1) Relapse Prevention, and (5) Education.

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**DOT SAFETY-SENSITIVE POSITIONS**

Org	Dept	Office	Job Code	Job Title	REG MODE	SAFETY SENSITIVE CATEGORY	MEDICAL CATEGORY
COO	MTPD	ADM	0038	VP & CHIEF, MTPD	FTA	ARMED SECURITY	MEDICAL2
COO	MTPD	ADM	0261	DEPUTY CHIEF, METRO TRANSIT PO	FTA	ARMED SECURITY	MEDICAL2
COO	RAIL	RIME	0339	MANAGER, WAYSIDE WORK COORD	FTA	CONTROL AND DISPATCH	MEDICAL2
COO	OBPP	OPMS	1093	SUPERVISOR RAIL TRANS TRAINING	FTA	CONTROL AND DISPATCH	MEDICAL2
COO	SCM	SCWL	1280	STOREROOM CLERK A	FTA	CDL NON-REVENUE	MEDICAL1
COO	SCM	SCWL	1288	WAREHOUSE TECHNICIAN	FTA	CDL NON-REVENUE	MEDICAL1
EXRL	CSCM	MKTG	1293	DISTRIBUTION & WAREHOUSE CLK	FTA	CDL NON-REVENUE	MEDICAL1
COO	BUS	BTRA	1711	SUPT SERVICE OPERATIONS	FTA	CONTROL AND DISPATCH	MEDICAL1
COO	MTPD	SVCS	1724	CAPTAIN, METRO TRANSIT POLICE	FTA	ARMED SECURITY	MEDICAL2
COO	MTPD	ADM	1725	LIEUTENANT, METRO TRANSIT POLI	FTA	ARMED SECURITY	MEDICAL2
COO	MTPD	ADM	1727	SERGEANT, MTPD	FTA	ARMED SECURITY	MEDICAL2
COO	MTPD	SVCS	1745	SPECIAL POLICE CAPTAIN	FTA	ARMED SECURITY	MEDICAL2
COO	MTPD	SVCS	1746	SPEC POLICE OFF-LT	FTA	ARMED SECURITY	MEDICAL2
COO	MTPD	SVCS	1747	SPECIAL POLICE SERGEANT	FTA	ARMED SECURITY	MEDICAL2
COO	MTPD	SVCS	1766	REVENUE GUARD	FTA	ARMED SECURITY	MEDICAL1
COO	BUS	BMNT	1904	GARAGE FLEET SERVICER AA	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1905	GARAGE FLEET SERVICER A	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1906	GARAGE FLEET SERVICER B	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1907	GARAGE FLEET SERVICER C	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1908	GARG FLT SERVICER D	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1909	GARAGE FLEET SERVICER E	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1916	GARAGE PAINT BODY LEAD	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1917	GARAGE INSPECTION LEAD MECH	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1918	GARAGE HVAC LEAD MECHANIC	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1920	WHEELCHAIR LIFT MECHANIC AA	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1922	SHOP FLEET SERVICER AA	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1925	SHOP FLEET SERVICER C	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1926	SHOP FLEET SERVICER D	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1928	HVYBUS COM OVHLR AAL	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1929	HVY BUS COM OVHLR AA	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1930	HVY BUS COM OVHLR A	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1931	HVY BUS COM OVHLR B	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1932	HVY BUS COM OVHLR C	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1935	BUS MACHINIST AA LEAD	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1936	BUS MACHINIST AA	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1943	BUS WELDER AA	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1950	SML UT COM OVHLR AA	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1952	SML UT COM OVHLR B	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1953	SML UT COM OVHLR C	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1954	SML UT COM OVHLR D	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	1990	ELECTR EQMT REPR AAL	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	BUS	BMNT	1991	ELECTR EQMT REPR AA	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	BUS	BMNT	1998	REV EQMT REPR AA	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2004	S/V PT/BDY MECH AAL	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2005	S/V PT/BDY MECH AA	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2007	S/V PT/BDY MECH B	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2011	AUT/LT TRCK MECH AAL	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2012	AUT/LT TRCK MECH AA	FTA	VEHICLE MAINTENANCE	MEDICAL1

COO	BUS	BMNT	2013	AUT/LT TRCK MECH A	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2014	AUT/LT TRCK MECH B	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2015	AUT/LT TRCK MECH C	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2018	HV TRCK EQT MECH AA LEAD	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2019	HV TRCK EQT MECH AA	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2021	HV TRCK EQT MECH B	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2025	SR AUTO PARTS SPEC	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2033	BUS RELIABILITY TECH	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2045	BUS MAINTENANCE SUPERVISOR	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2054	GARAGE FLEET SERVICER AA	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2055	GARAGE FLEET SERVICER A	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2056	GARAGE FLEET SERVICER B	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2057	GARAGE FLEET SERVICER C	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2059	GARAGE FLEET SERVICER E	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2060	GEN TRANSIT BUS GARAGE MECHA	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2061	GENERAL TRANSIT BUS GARAGE MEC	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2062	GEN TRANSIT BUS GARAGE MECH	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2063	GEN TRANSIT BUS GARAGE MECH	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2064	GEN TRANSIT BUS GARAGE MECH	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2066	GARAGE BODY LEAD MECHANIC	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2067	GARAGE INSPECTION LEAD MECHANI	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2068	GARG HVAC LEAD MECH	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2069	GARG SHIFT LEAD MECH	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2070	WHEELCHAIR LIFT MECHANIC	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2071	HVY OVH SH PAINT BODY MECH AAL	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2072	HVY OVH SH PAINT BODY MECH AA	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2073	HVY OVH SH PAINT BODY MECH A	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2074	HVY OVH SH PAINT BODY MECH B	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2075	HVY OVH SH PAINT BODY MECH C	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2076	HVY OVH SH PAINT BODY MECH D	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	RAIL	TRST	2084	ERT SPECIALIST (TRACK)	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	BUS	BMNT	2087	GEN TRAN BUS SHOP MECH A	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2088	GEN TRAN BUS SHOP MECH AA	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2089	GEN TRAN BUS SHOP MECH AAL	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2090	GEN TRAN BUS SHOP MECH B	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2091	GEN TRAN BUS SHOP MECH C	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2092	GEN TRAN BUS SHOP MECH D	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2094	GEN TRAN BUS GARAGE MECH A	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2095	GEN TRAN BUS GARAGE MECH AA	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2096	GEN TRAN BUS GARAGE MECH AAL	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2097	GEN TRAN BUS GARAGE MECH B	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2098	GEN TRAN BUS GARAGE MECH C	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	2099	GEN TRAN BUS GARAGE MECH D	FTA	VEHICLE MAINTENANCE	MEDICAL1
CAPD	PICO	IRPG	2642	CONS ENGR-MECH	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRPM	2643	CONSTRUCTION ENGINEER,ELECTRIC	FTA	VEHICLE MAINTENANCE	MEDICAL2
CAPD	TSPM	ADMN	2644	CONS ENGR-CIVIL	FTA	VEHICLE MAINTENANCE	MEDICAL2
CAPD	PICO	IRPG	2645	CONS ENGR-COMM	FTA	VEHICLE MAINTENANCE	MEDICAL2
CAPD	PICO	IRPG	2647	CONS ENGR-ATC	FTA	VEHICLE MAINTENANCE	MEDICAL2
CAPD	PICO	IRPG	2722	CONS INSP-TRAC PWR	FTA	VEHICLE MAINTENANCE	MEDICAL2
CAPD	PICO	IRPG	2723	CONSTRUCTION INSP (TCS)	FTA	CONTROL AND DISPATCH	MEDICAL2
CAPD	PICO	IRPG	2724	CONS INSP-MEEIT	FTA	VEHICLE MAINTENANCE	MEDICAL2

CAPD	PICO	IRPG	2725	CONS INSP-COMM/ELECT	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	RIME	2793	MOW TACTICAL COORDINATOR	FTA	CONTROL AND DISPATCH	MEDICAL2
COO	RAIL	CENV	2828	VEHICLE ENGINEER - RAIL	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	2838	ASSOCIATE PROJEC COORDINATOR	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CENV	2840	ASSISTANT VEHICLE ENGR - RAIL	FTA	VEHICLE MAINTENANCE	MEDICAL2
CAPD	ENGA	ATCE	2845	ATC ENGINEER	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	MOWE	2910	ASSOCIATE TRACK ENGINEER	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	MOWE	2913	SENIOR TRACK ENGINEER	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	MOWE	3408	MANAGER CORROSION CONTROL ENGI	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	OBPP	OPMS	3711	CAR EQUIP TRNG INST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	BUS	BTRA	3712	TRAINING AND SAFETY INSTRUCTOR	FTA	VEHICLE OPERATOR	MEDICAL1
COO	OBPP	OPMS	3713	SYSTEMS TRNG INST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	BUS	BMNT	3714	BUS TRAINING MAINT INSTRUCTOR	FTA	VEHICLE OPERATOR	MEDICAL1
COO	OBPP	OPMS	3720	SUPV, TECH SKLS TRNG	FTA	VEHICLE OPERATOR	MEDICAL2
COO	OBPP	OPMS	3722	MAINTENANCE TRAINEE RAIL CAR C	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	OBPP	OPMS	3724	TRK & STR TRNG INST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	OBPP	OPMS	3748	RAIL TRANS TRG INSTR	FTA	VEHICLE OPERATOR	MEDICAL2
COO	BUS	BOCC	3772	ASST SUPER BUS OPS COMM CTR	FTA	CONTROL AND DISPATCH	MEDICAL2
COO	BUS	BOCC	3773	ASST SUPT TRAN FIELD OPS	FTA	VEHICLE OPERATOR	MEDICAL1
COO	BUS	BMNT	3816	BUS RELIABILITY SUPERVISOR	FTA	VEHICLE OPERATOR	MEDICAL1
COO	BUS	BMNT	3836	SERVICE LANE SUPERVISOR	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	3840	HEAVY OVERHAUL SHOP SUPERINTEN	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	BUS	BMNT	3842	SUPT, SER VEH SHOPS	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	3861	MECHANIC AA LEADMAN	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	OBPP	OPMS	3923	MAINTENANCE TRAINEE RAIL CAR B	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	OBPP	OPMS	3924	MAINTENANCE TRAINEE RAIL CAR A	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RTRA	ADM	4459	RTRA QUALITY CONTROL OFFICER	FTA	VEHICLE OPERATOR	MEDICAL2
COO	RAIL	CMNT	4614	SUPERVISOR CAR MAINTENANCE	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4615	SHIFT SUPV CAR MAINTENANCE	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4625	SUPERVISOR, CAR INSPECTION	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4634	REGIONAL SHOP SUPERVISOR	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RTRA	ROCC	4640	MNTN OPER CENT SUPV	FTA	CONTROL AND DISPATCH	MEDICAL2
COO	RAIL	TRST	4647	TRACK & STRUCTURES MECHANIC AA	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4648	MECH HLP A PI RCAR	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4649	MECH HLP B PI RCAR	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4653	MECHANIC A (ELECTRONIC)	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4655	MECHANIC C (ELECTRONIC)	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4657	MECH AA - MECHANICAL	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	SMNT	4662	MECH AA ELECT-RAIL	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4665	MECHANIC, HVAC (RAIL) AA	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4666	MECHANIC, HVAC (RAIL) A	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4667	MECHANIC, HVAC (RAIL) B	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4668	MECHANIC, HVAC (RAIL)	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4669	MECHANIC, HVAC (RAIL) HELPER	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4674	MECH A - MECHANICAL	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4675	MECH B - MECHANICAL	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4676	MECH C - MECHANICAL	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4677	MECH HELP - MECHANIC	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4725	MECH AA ELECT-CMNT	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4726	MECH A ELECT-CMNT	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4727	MECH B ELECT-CMNT	FTA	VEHICLE MAINTENANCE	MEDICAL2

COO	RAIL	CMNT	4728	MECH C ELECT-CMNT	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	4729	MECH HELP ELECT-CMNT	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	PLNT	4810	VEHICLE LIFT MECHANIC AA LEAD	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	PLNT	4811	VEHICLE LIFT MECHANIC AA	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRPM	5014	SUP AREA ELCL POWER	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRPM	5015	SHIFT SUP ELCL POWER	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRPM	5019	SUPV, EPT & CALIB	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	SMNT	5027	MECH AA ELCN PWRLV	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRPM	5051	MECH HELP ELEC PWRHV	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRPM	5052	MECH AA ELCL PWRHV	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRPM	5053	MECH A ELCL PWRHV	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRPM	5054	MECH B ELCL PWRHV	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRPM	5055	MECH C ELECT-PWRHV	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRPM	5056	MECH ELECTRICAL MNT & TEST AA	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRPM	5057	MECH ELECTRICAL MNT & TEST A	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRPM	5058	MECH ELECTRICAL MNT & TEST B	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRPM	5059	MECH ELECTRICAL MNT & TEST C	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRPM	5060	MECH ELECTRICAL MNT & TEST D	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	SMNT	5062	MECH ELEC BNCH TECH HELPER	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	SMNT	5065	SH SUP SYS MNTN SHOP	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	SMNT	5067	MECH ELEC BNCH TECHNICIAN AA	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	SMNT	5070	MECH AA EL-MECH TECH	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RTRA	ROCC	5084	COORD TRACK ACCS MAINT CONSTRC	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	ATCM	5105	SH SUP ATC	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	ATCM	5107	MECH AA ATC TECH	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	ATCM	5108	MECH A ATC TECH	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	ATCM	5109	MECH B ATC TECH	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	ATCM	5110	MECH C ATC TECH	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	ATCM	5111	MECH HELPER ATC	FTA	VEHICLE MAINTENANCE	MEDICAL2
IBOP	IT	ITSS	5133	RAIL OPERATIONS SYS TECHNICIAN	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	SMNT	5186	SH SUP COMM SYS MNTN	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	SMNT	5188	MECH A GEN COM IN/RP	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	SMNT	5189	MECH B GEN COM IN/RP	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	SMNT	5195	MECH AA, COMM RADIO SYST TECH	FTA	CONTROL AND DISPATCH	MEDICAL2
COO	FSVT	SMNT	5199	MECH C GEN COM IN/RP	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	SMNT	5200	MECH HELPER GEN COM	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRPM	5340	SUPV TRACK ACCESS ESC SUPPORT	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	PLNT	5380	FIRE EQUIPMENT TECHNICIAN AA	FTA	CONTROL AND DISPATCH	MEDICAL1
COO	FSVT	PLNT	5383	FIRE EQUIPMENT TECHNICIAN C	FTA	CONTROL AND DISPATCH	MEDICAL1
COO	RAIL	TRST	5413	LABORER, 0689	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	PLNT	5433	EQMT OPER AA PLNT	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	FSVT	PLNT	5436	EQMT OPER C PLNT	FTA	VEHICLE MAINTENANCE	MEDICAL1
COO	RAIL	TRST	5456	MGR, T & S MAINT	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5460	EQMT OPER AA TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5461	EQMT OPER A TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5462	EQMT OPER B TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5463	EQMT OPER C TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5464	EQMT OPER D TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5466	TRACK REPAIR AA TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5467	TRACK REPAIR A TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5468	TRACK REPAIR B TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2

COO	RAIL	TRST	5469	TRACK REPAIR C TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5470	TRACK REPAIR D TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5471	TRACK WALKER AA PLNT	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5473	TRACK WALKER B PLNT	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5474	TRACK WALKER C PLNT	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5475	TRACK WALKER D PLNT	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	5476	MECH AA CTEM	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	5477	MECH A CTEM	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	5478	MECHANIC B CTEM	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	5479	MECHANIC AA LEAD CTEM	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5484	STRUCT REP LEAD-TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	5490	MECHANIC C CTEM	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	5491	MECHANIC HELPER CTEM	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5493	STRUCT REP AA-TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5494	STRUCT REP A-TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5495	STRUCT REP B-TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5496	STRUCT REP C-TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5497	STRUCT REP D-TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5503	STRUC EVAL TECHNICIAN A	FTA	CDL NON-REVENUE	MEDICAL1
COO	RAIL	TRST	5504	STRUC EVAL TECHNICIAN AA	FTA	CDL NON-REVENUE	MEDICAL1
COO	RAIL	TRST	5567	SUPERVISOR TRACK MAINTENANCE	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5568	SUPV STRUCTURE MAINT INSPECTIO	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5569	SUPERVISOR TRACK INSPECTION	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	5655	MECH AA MACHIN-RAIL	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	5658	MECH C MACHIN-RAIL	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	CMNT	5659	MECH HELPER MACH-R	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	PLNT	5660	WELDER AA LEAD	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	PLNT	5661	WELDER AA	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	FSVT	PLNT	5664	WELDER C	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5673	TRUCK DRIVER AA	FTA	CDL NON-REVENUE	MEDICAL1
COO	FSVT	PLNT	5675	TRUCK DRIVER AA	FTA	CDL NON-REVENUE	MEDICAL1
COO	RAIL	TRST	5691	WELDER AA - TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5692	WELDER A - TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5693	WELDER B - TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	TRST	5695	WELDER D - TRST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	BUS	BOCC	6428	SUPERVISOR, TRANSIT FIELD OPS	FTA	VEHICLE OPERATOR	MEDICAL1
COO	BUS	BOCC	6428	SUPERVISOR, TRANSIT FIELD OPS	FTA	VEHICLE OPERATOR	MEDICAL1
COO	BUS	BTRA	6430	BUS OPERATIONS MANAGER	FTA	VEHICLE OPERATOR	MEDICAL2
COO	BUS	BTRA	6438	ASST SUPT, BUS SERV OPER	FTA	VEHICLE OPERATOR	MEDICAL1
COO	BUS	BOCC	6450	BUS CONTROL COMM SPEC	FTA	CONTROL AND DISPATCH	MEDICAL2
COO	BUS	BTRA	6500	BUS OPERATOR	FTA	VEHICLE OPERATOR	MEDICAL1
COO	BUS	BTRA	6501	STUDENT BUS OPERATOR	FTA	VEHICLE OPERATOR	MEDICAL1
COO	BUS	BTRA	6508	STUDENT BUS OPERATOR	FTA	VEHICLE OPERATOR	MEDICAL1
COO	BUS	BTRA	6509	BUS OPERATOR	FTA	VEHICLE OPERATOR	MEDICAL1
COO	RTRA	RSTO	6749	RAIL OPERATIONS SUPERVISOR	FTA	VEHICLE OPERATOR	MEDICAL2
COO	RTRA	ROCC	6750	RAIL TRAFFIC CONTROLLER	FTA	CONTROL AND DISPATCH	MEDICAL2
COO	RTRA	RSTO	6759	TRAIN OPERATOR	FTA	VEHICLE OPERATOR	MEDICAL2
COO	RTRA	RSTO	6761	INTERLOCKING OPERATOR	FTA	CONTROL AND DISPATCH	MEDICAL2
COO	RTRA	RSTO	6770	TEST TRAIN OPERATOR	FTA	VEHICLE OPERATOR	MEDICAL2
COO	RAIL	MOWE	6781	ASSOCIATE TGV SPECIALIST	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	RAIL	MOWE	6783	SPECIALIST, TGV OPER & INSP	FTA	VEHICLE MAINTENANCE	MEDICAL2

COO	RAIL	TRST	6787	LARGE TELESCOPIC CRANE OP AA	FTA	CDL NON-REVENUE	MEDICAL1
COO	RAIL	CMNT	7457	DEPARTMENT SAFETY COORDINATOR	FTA	VEHICLE MAINTENANCE	MEDICAL2
COO	MTPD	PTRL	8722	METRO TRANSIT POLICE OFFICER	FTA	ARMED SECURITY	MEDICAL2
COO	MTPD	PTRL	8723	METRO TRANSIT POLICE OFFICER	FTA	ARMED SECURITY	MEDICAL2
COO	MTPD	PTRL	8724	METRO TRANSIT POLICE OFFICER	FTA	ARMED SECURITY	MEDICAL2
COO	MTPD	HLSC	8730	METRO POLICE DET S	FTA	ARMED SECURITY	MEDICAL2
COO	MTPD	SVCS	8738	SPECIAL POLICE OFFICER	FTA	ARMED SECURITY	MEDICAL 2
COO	BUS	BTRA	8923	BUS TRAINING SUPERVISOR	FTA	VEHICLE OPERATOR	MEDICAL1

**POLICY/INSTRUCTION: 7.7.3/7**  
**Drug & Alcohol Policy and Testing Program****APPENDIX C: Random and Follow-up Referral Form****OCCUPATIONAL HEALTH AND WELLNESS'  
DRUG AND ALCOHOL COMPLIANCE PROGRAM  
RANDOM AND FOLLOW-UP TESTING REFERRAL FORM****GENERAL INFORMATION (Please Print)**

1.     
Employee Name I.D. Number Job Title
2.   /    
Supervisor Superintendent Phone No. Dept./Location

**TEST NOTIFICATION INFORMATION**

The above employee is being referred to the test site at

3. As the notifying manager, I attest that I have confirmed that this employee has proper photo ID and has been instructed to **immediately** report for testing as follows: *(Manager must read below to employee.)*

"You are required to report for drug and alcohol testing. You must stop what you are doing and **proceed immediately** to the test site noted above. You are advised not to drive your personal vehicle or delay reporting for testing as directed. You are advised to travel by Metro Bus, Metro Rail, or managerial escort. Upon arrival at the test site, you must promptly time stamp the back of this form and wait for an OHAW technician to assist you. You must **not** leave the waiting area. Failure to fully comply with any of these instructions may result in a **REFUSAL** to test."

4.   ☐ a.m. ☐ p.m. Manager **NOTIFIED** employee of testing requirement and ensured employee had appropriate **photo ID**.  
Date Time

5. The manager **MUST** instruct the employee to immediately and directly depart for the test site upon notification.

Departure Rail Station

Indicate departure location if employee is being escorted by a manager. *(Manager must escort all the way to the test site.)*

Departure Location

Manager's Signature:

Date:

**EMPLOYEE UNAVAILABILITY & DOCUMENTATION**

WMATA policy requires employees unavailable for testing on the scheduled test date to be tested immediately upon return to work. If the above named employee is unavailable for testing, please complete the section below and email to **OHAW\_DrugandAlcohol\_24HOURTesting@wmata.com**.

Select **one** of the following and indicate employee's expected date of return:

- |                                          |                                              |                                                               |                                   |
|------------------------------------------|----------------------------------------------|---------------------------------------------------------------|-----------------------------------|
| <input type="checkbox"/> AWOL            | <input type="checkbox"/> Day Off             | <input type="checkbox"/> Deceased                             | <input type="checkbox"/> Vacation |
| <input type="checkbox"/> LWOP (approved) | <input type="checkbox"/> Retired or Resigned | <input type="checkbox"/> Sick                                 | <input type="checkbox"/> Inactive |
| <input type="checkbox"/> Suspended       | <input type="checkbox"/> Terminated          | <input type="checkbox"/> Transferred to: <input type="text"/> |                                   |

Revised Mar. 2020

**APPROVED BY****DATE APPROVED****CLASS****LEAD****DATE OF  
LAST REVIEW****PAGE****A P P R O V E D**

09/20/2021

OHAW

IBOP

09/20/2021

1 of 1

By General Manager &amp; Chief Executive Officer Paul J. Wiedefeld



Washington Metropolitan Area Transit Authority

## POLICY/INSTRUCTION: 7.7.3/7, Drug & Alcohol Testing Program Policy

### APPENDIX D: Custom and Control Form

FEDERAL DRUG TESTING CUSTODY AND CONTROL FORM

Quest Diagnostics®  
800-877-7484  
www.questdiagnostics.com/mydrugtest

42007812 9745870 SPECIMEN ID NO. 42007812 9745870

LAB ACCESSION NO. RD4500020

**STEP 1: COMPLETED BY COLLECTOR OR EMPLOYER REPRESENTATIVE**

A. Employer Name, Address, I.D. No.  
HMTA  
8200 PROFESSIONAL PL 109  
LANDOVER MD 20785  
PH: 202-636-7144 FAX: 202-636-7180

B. MRO Name, Address, Phone No. and Fax No.  
ANY ESPY-SMITH MD  
SOLAIDE AKINTADE MD  
8200 PROFESSIONAL PL #107  
LANDOVER MD 20785  
PH: 202-636-7141 FAX: 202-636-7180

C. Donor SSN, Employee I.D., or CDL State and No.  
D. Specify Testing Authority: ☐ HHS ☐ NRC Specify DOT Agency: ☐ FMCSA ☐ FAA ☐ FRA ☐ FTA ☐ PHMSA ☐ USCG  
E. Reason for Test: ☐ Pre-employment ☐ Random ☐ Reasonable Suspicion/Cause ☐ Post Accident ☐ Return to Duty ☐ Follow-up ☐ Other (specify)  
F. Drug Tests to be Performed: ☐ THC, COC, PCP, OPI, AMP ☐ THC & COC Only ☐ Other (specify)

( ) 65307N DDT DRUG PANEL W/TS

G. Collection Site Name: OHAW - PROFESSIONAL PLACE  
Address: 8200 Professional Pl. Ste 109  
City, State and Zip: Landover MD 20785  
Collection Site Code: Collector Contact Info: 202-636-7144  
Phone: 202-636-7180  
Fax: Other:

**STEP 2: COMPLETED BY COLLECTOR (make remarks when appropriate)** ☐ URINE ☐ ORAL FLUID  
Collection: ☐ Split ☐ Single ☐ None Provided, Enter Remark.  
URINE: Collector reads urine temperature within 4 minutes. Temperature between 90° and 100° F? ☐ Yes ☐ No, Enter Remark ☐ Observed, Enter Remark  
ORAL FLUID: Split Type: ☐ Serial ☐ Concurrent ☐ Subdivided Each Device Within Expiration Date? ☐ Yes ☐ No ☐ Volume Indicator(s) Observed  
REMARKS:

**STEP 3: Collector affixes seal(s) to bottle(s) / tube(s). Collector dates seal(s). Donor initials seal(s). Donor completes STEP 5 on Copy 2 (MRO Copy)**  
**STEP 4: CHAIN OF CUSTODY - INITIATED BY COLLECTOR AND COMPLETED BY TEST FACILITY**  
I certify that the specimen given to me by the donor identified in the certification section on Copy 2 of this form was collected, labeled, sealed, and released to the Delivery Service noted in accordance with applicable Federal requirements.

X  
Signature of Collector Date (Mo./Day/Yr.) Time of Collection AM PM  
(Print) Collector's Name (First, Mi, Last)

**RECEIVED AT LAB OR IITF:**  
X  
Signature of Accessioner Date (Mo./Day/Yr.)  
(Print) Accessioner's Name (First, Mi, Last)

Primary / Single Specimen Device Expiration Date: Split Specimen Device Expiration Date:

**STEP 5a: PRIMARY SPECIMEN REPORT - COMPLETED BY TEST FACILITY**  
☐ NEGATIVE ☐ DILUTE ☐ REJECTED FOR TESTING ☐ ADULTERATED ☐ SUBSTITUTED ☐ INVALID RESULT  
☐ POSITIVE for: Analyte(s) in ng/mL  
REMARKS:  
Test Facility (if different from above):  
I certify that the specimen identified on this form was examined upon receipt, handled using chain of custody procedures, analyzed, and reported in accordance with applicable federal requirements.

X  
Signature of Certifying Technician/Scientist's Name (Print) Certifying Technician/Scientist's Name (First, Mi, Last) Date (Mo./Day/Yr.)

**STEP 5b: COMPLETED BY SPLIT TESTING LABORATORY**  
☐ RECONFIRMED ☐ FAILED TO RECONFIRM - REASON  
I certify that the split specimen identified on this form was examined upon receipt, handled using chain of custody procedures, analyzed, and reported in accordance with applicable federal requirements.

X  
Laboratory Name Signature of Certifying Scientist (Print) Certifying Scientist's Name (First, Mi, Last) Date (Mo./Day/Yr.)  
Laboratory Address

Place Over Cap Spec. ID  
42007812 - 9745870  
Date (Mo./Day/Year) Donor Initials  
Place Over Cap  
Date (Mo./Day/Year) Donor Initials  
Spec. ID  
42007812 - 9745870

QUEST DIAGNOSTICS

APPROVED BY

DATE APPROVED

CLASS

LEAD

DATE OF  
LAST  
REVIEW

PAGE

APPROVED

By General Manager & Chief Executive Officer Paul J. Wiedefeld

09/20/2021

OHAW

IBOP

09/20/2021

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## POLICY/INSTRUCTION: 7.7.3/7, Drug &amp; Alcohol Testing Program Policy

## APPENDIX D: Custom and Control Form

**FORENSIC DRUG TESTING CUSTODY AND CONTROL FORM**

**Quest Diagnostics**  
800-877-7484  
www.questdiagnostics.com/mydrugtest

**42012765 9746408** SPECIMEN ID NO.

**STEP 1: COMPLETED BY COLLECTOR OR EMPLOYER REPRESENTATIVE** LAB ACCESSION NO.

A. Employer Name, Address, I.D. No.  
WMATA  
8200 PROFESSIONAL PL 109  
LANDOVER MD 20785  
PH: 202-636-7144 FAX: 202-636-7180

B. MRO Name, Address, Phone and Fax No. FORM ID: CS04500020  
RAY ESPY-SRITH MD  
SOLAIDE AKINTADE MD  
8200 PROFESSIONAL PL #107  
LANDOVER MD 20785  
PH: 202-636-7141 FAX: 202-636-7180

C. Donor SSN or Employee I.D. No. \_\_\_\_\_

D. Donor Name: Last: \_\_\_\_\_ First: \_\_\_\_\_

E. Donor ID Verified: ☐ Photo ID ☐ Emp. Rep. \_\_\_\_\_

F. Reason for Test: ☐ Pre-employment (1) ☐ Random (3) ☐ Reasonable Suspicion/Cause (5) ☐ Post-Accident (2) ☐ Promotion (22)  
☐ Return to Duty (6) ☐ Follow-up (23) ☐ Other (specify) (99) \_\_\_\_\_

G. Drug Tests to be Performed:  
( ) 31302M SAP7-20/300 P25/25/T ( ) 31303M SAP7-20/300 P25/25/T  
( ) 31415M SAP 9-20/UP14+S CANN ( ) 21640M ETG-250 (U)  
( ) 21341M SAP 9-20 H/DPI/WIT ( ) 51413M WPP COMP UI-LDD

H. Collection Site Name: Occupational Health & Wellness Collection Site Code: \_\_\_\_\_  
Address: 8200 Professional Pl, Ste 107  
City, State and Zip: Landover MD 20785 Collector Phone No.: 202-636-7144  
Collector Fax No.: 202-636-7180

**STEP 2: COMPLETED BY COLLECTOR**  
Read specimen temperature within 4 minutes. Is temperature between 90° and 100° F? ☐ Yes ☐ No, Enter Remark \_\_\_\_\_  
Specimen Collection: ☐ Split ☐ Single ☐ None Provided (Enter Remark) \_\_\_\_\_ ☐ Observed (Enter Remark) \_\_\_\_\_

REMARKS \_\_\_\_\_

**STEP 3: Collector affixes bottle seal(s) to bottle(s). Collector dates seal(s). Donor initials seal(s). Donor completes STEP 5.**

**STEP 4: CHAIN OF CUSTODY - INITIATED BY COLLECTOR AND COMPLETED BY LABORATORY**  
I certify that the specimen given to me by the donor identified in the certification section on Copy 1 of this form was collected, labeled, sealed, and released to the Delivery Service noted in accordance with applicable requirements.

☒ Signature of Collector \_\_\_\_\_ Time of Collection \_\_\_\_\_ AM PM  
(Print) Collector's Name (First, MI, Last) \_\_\_\_\_ Date (Mo./Day/Yr.) \_\_\_\_\_

**SPECIMEN BOTTLE(S) RELEASED TO:**  
☐ Quest Diagnostics Courier ☐ FedEx  
☐ Other \_\_\_\_\_ Name of Delivery Service Transferring Specimen to Lab \_\_\_\_\_

**RECEIVED AT LAB:** ☒ Signature of Accessioner \_\_\_\_\_  
(Print) Accessioner's Name (First, MI, Last) \_\_\_\_\_ Date (Mo./Day/Yr.) \_\_\_\_\_

**Primary Specimen Bottle Seal Intact:** ☐ Yes ☐ No, Enter Remark \_\_\_\_\_

**SPECIMEN BOTTLE(S) RELEASED TO:** \_\_\_\_\_

**STEP 5: COMPLETED BY DONOR**  
I certify that I provided my specimen to the collector; that I have not adulterated it in any manner; each specimen bottle used was sealed with a tamper-evident seal in my presence; and that the information and numbers provided on this form and on the label affixed to each specimen bottle is correct.

☒ Signature of Donor \_\_\_\_\_ (PRINT) Donor's Name (First, MI, Last) \_\_\_\_\_ Date (Mo./Day/Yr.) \_\_\_\_\_  
Daytime Phone No. ( ) \_\_\_\_\_ Evening Phone No. ( ) \_\_\_\_\_ Date of Birth: Mo. / Day / Yr. \_\_\_\_\_

**CENTER OVER CAP**  
Date (Mo./Day/Yr.) \_\_\_\_\_  
Donor's Initial's \_\_\_\_\_  
**(A)**

**CENTER OVER CAP**  
Date (Mo./Day/Yr.) \_\_\_\_\_  
Donor's Initial's \_\_\_\_\_  
**(B)**

**SPECIMEN ID NUMBER**  
42012765 - 9746408  
**42012765 - 9746408**  
**SPECIMEN ID NUMBER**

**PRESS HARD - YOU ARE MAKING MULTIPLE COPIES**

APPROVED BY

DATE APPROVED

CLASS

LEAD

DATE OF  
LAST  
REVIEW

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By General Manager &amp; Chief Executive Officer Paul J. Wiedefeld