



TransPro Drug and Alcohol Policy

CONTROLLED SUBSTANCE & ALCOHOL USE AND TESTING

Introduction

This section provides an overview of the Department of Transportation rules on alcohol abuse and drug use. A review of the effects of alcohol and certain drugs on the body is included. Questions regarding the DOT regulations and the administration of the alcohol/drug testing program should be directed to the DOT Compliance Manager, TransPro Intermodal Trucking, Inc. Bensalem, PA.

The DOT regulations establish specific restrictions and prohibitions regarding the performance of the safety-sensitive functions by persons who drive commercial motor vehicles. The terms 'restrictions' and 'prohibitions', 'drivers' and 'safety-sensitive functions' are defined elsewhere in this section; however, any person who is employed by or under TransPro Intermodal Trucking, Inc. and operates a commercial vehicle is subject to these regulations.

Functions performed by TransPro Intermodal Trucking, Inc. drivers that are considered safety-sensitive function include, but are not limited to, the following.

- (a) Time spent at the controls of a commercial vehicle in operation.
- (b) All time at a carrier or shipper facility waiting to be dispatched.
- (c) All time inspecting, servicing, or conditioning any commercial vehicle at any time.
- (d) All time, other than driving time, in or upon a commercial vehicle, except time spent resting in a sleeper berth.
- (e) All time loading or unloading a vehicle, supervising or assisting in the loading or unloading, attending a vehicle being loaded or unloaded, remaining in readiness to operate the vehicle or in giving or receiving receipts for shipments.

- (f) All time performing driver duties related to accidents, and time repairing, obtaining assistance, or remaining in attendance of a disabled vehicle.
- (g) All time spent pre-loading and spotting trailers or moving empty trailers to assist over-the-road operations.
- (h) All time spent road testing vehicles or driving vehicles to or from repair facilities.

An explanation of the required tests is presented elsewhere in this section to identify those circumstances under which drivers will be tested for alcohol and/or substance abuse. Required tests include:

- Pre-employment (Drug screen only);
- Random;
- Post-accident;
- Reasonable suspicion;
- Return-to-duty;
- Follow - up

Every driver, to whom this regulation applies, must submit to alcohol and controlled substance testing when required and administered in accordance with the regulations. The procedures that will be used are explained elsewhere in this section; however a breath-testing device is used to test for alcohol and analysis of a urine sample is used to test for controlled substances.

- Does not proceed directly to the collection or test site; or
- Clearly obstructs the testing process.

The consequences of a violation are explained further in this section. However, the immediate effect of an identified violation is the disqualification of that individual as an operator for TransPro Intermodal Trucking, Inc. Re-qualification, if any, must be in accordance with procedures established in the regulations.

Any driver who is found to have an alcohol concentration of 0.02 but less than 0.04 cannot return to duties involving a safety-sensitive function until his/her next scheduled duty period, but not less than 24 hours.

An explanation of the effects of alcohol and controlled substance, and the methods of interviewing when a problem is suspected, are presented elsewhere in this section.

Definitions

Unless specifically defined elsewhere in this section, the following terms and definitions have the meaning indicated.

Alcohol. The intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohol including methyl and isopropyl alcohol.

Alcohol Concentration (or content). Alcohol in a volume of breath (shown as grams of alcohol/210 liters of breath) as indicated by an evidential breath test.

Alcohol Use. Consumption of any beverage, mixture, or preparation, including medications containing alcohol.

(BAT) Breathe Alcohol Technician. An individual who instructs and assists individuals in the alcohol testing process and operates an evidential breath testing (EBT) device.

(CMV) Commercial Vehicle. A motor vehicle or combination of motor vehicles used in commerce to transport passengers or property if the vehicle.

- (a) Has a gross combination weight rating of 26,001 or more pounds inclusive of a towed unit weight with a gross vehicle weight rating of more than 10,000 pounds.
- (b) Has a gross vehicle weight rating of more than 26,000 pounds.
- (c) Is designed to transport 16 or more passengers, including the driver; or
- (d) Is of any size and is used to transport hazardous materials which require the vehicle to be placarded.

(CDL) Commercial Driver's License

Confirmation test. In alcohol testing: a second test, following a screening test with a result of 0.02 or greater, that provides quantitative data of alcohol concentration. In controlled substances testing: a second test to identify the presence of a specific drug or metabolite. In order to ensure reliability and accuracy, this is separate from the screening test and uses a different technique and chemical principle.

Controlled Substances. In this regulation, the term's 'drugs' and 'controlled substances' are interchangeable and have the same meaning. Unless otherwise provided, these terms refer to:

- Marijuana
 - Cocaine - Opiates
 - Amphetamines, including methamphetamines
 - Phencyclidine (PCP)
- (DHHS) Department of Health and Human Services.**

(DOT) Department of Transportation.

Driver. Any person who operates a commercial motor vehicle (CMV), including:

- (a) Full time, employed drivers;
- (b) Casual, intermittent or occasional drivers;
- (c) Leased drivers;
- (d) Independent, owner-operator contractors; or
- (e) A person applying for employment to operate a CMV.

(EAP) Employee Assistance Program

(EBT) Evidential Breath Testing Device. A device uses for alcohol breath testing that has been approved by the National Highway Traffic Safety Administration.

(MRO) Medical Review Officer. A licensed physician (medical doctor or doctor of osteopathy) responsible for receiving laboratory results generated by an employer's drug testing program. The MRO must have knowledge of substance abuse disorders and appropriate medical training to interpret and evaluate an individual's confirmed positive test, medical history and other relevant biomedical information.

Performing (a safety-sensitive function). A driver is considered to be performing a safety-sensitive function when he or she is actually performing, ready to perform, or immediately available to perform any safety-sensitive function.

Screening Test (initial test). In alcohol testing: a procedure to determine if a driver has a prohibited concentration of alcohol in his or her system. In controlled substances testing: a screen to eliminate 'negative' urine specimens from further consideration.

Substance Abuse. Refers to patterns of use that result in health consequences or impairment in social, psychological, and occupational functioning.

Substance Abuse Professional. A licensed physician (medical doctor or doctor of osteopathy). Licensed or certified psychologist, social worker, employee assistance professional, or verified addiction counselor with knowledge of and clinical experience in the diagnosis and treatment of alcohol and controlled substances-related disorders.

Overview of Requirements.

Restrictions for the use of both alcohol and controlled substances are referred to as prohibitions.

- (a) A driver is prohibited from reporting to duty or remaining on duty requiring the performance of safety-sensitive functions while having an alcohol concentration of 0.04 or greater.
- (b) No driver shall be on-duty or operate a commercial vehicle while the driver possesses alcohol is manifested and transported as part of a shipment.
- (c) No driver shall perform safety-sensitive functions within four hours after using alcohol.
- (d) No driver required to take a post-accident alcohol test shall use alcohol for 8 hours after the accident or until he/she undergoes the post-accident
- (e) test, whichever comes first.
- (f) No driver shall refuse to submit to a required alcohol or controlled substance test required by the Federal Motor Carrier Safety Regulations.
- (g) No driver shall report for duty or remain on duty requiring the performance of safety-sensitive functions when the driver uses any controlled substance, except when the use is pursuant to the instructions of a physician who had advised the driver that the substance does not adversely affect the safe operation of a commercial vehicle.

Application

The Federal Highway Administration, Department of Transportation Alcohol and Drug ruling applies to every person who operates a commercial motor vehicle (CMV) in interstate or intrastate commerce, and is subject to the CDL requirements of 49 CFR Part 383.

Safety-sensitive Function.

Safety-sensitive functions for operators of commercial motor vehicles (CMVS) are under 49CFR Part 395.2, On-duty time, paragraphs (1)-(7).

Required Tests

There are five situations where testing can be done to determine the presence of alcohol and /or drugs.

- (a) A drug screen will be required before a new hire can perform any safety-sensitive duties or when a person transfers into safety-sensitive function.
- (b) A test is required following an accident in which a life was lost or the driver was cited for a moving violation.
- (c) A random test is an unannounced test on a certain percentage of drivers each year. The random selection process used will ensure that each driver has an equal chance of being tested each time selections are made. Drivers are randomly selected from a pool. Random testing for alcohol must be completed just before, during or immediately after performing safety-sensitive work. Random testing for drugs can be done any time you are at work for your employer. Once you are notified that you have been selected for testing, you must proceed immediately to the test site.
- (d) A reasonable suspicion test is required if the employer has reason to believe that a driver's behavior or appearance indicates alcohol or drug use. Testing for reasonable suspicion must be based on:
- (e) Return-to-duty testing and follow-up testing are required for drivers who violate prohibitions and are returning to work. In order to return to work an alcohol concentration of less than 0.02 or a negative test is required. Follow-up testing is required when a driver returns to safety-sensitive function. The ruling calls for a minimum of six (6) tests during the first year back in a safety-sensitive position. However, follow-up testing can continue for up to five (5) years.

Refusals

As part of the alcohol and drug rule, you must submit to alcohol and drug testing. If you refuse to be tested, you cannot continue on the job. Refusal to test is any time a driver:

- Fails to provide enough breath for alcohol testing or urine for controlled substances testing without a valid medical reason after being notified of the testing requirements;
- Does not proceed directly to the collection or test site for a random test; or
- Clearly obstructs the testing process.

Alcohol Testing

All alcohol testing is done by a certified Breath Alcohol Technician, or BAT, in a private setting. An evidential breath testing device (EBT) approved by the National Highway Safety Administration must be used.

- A screening test is done first. If the reading is less than 0.02 the testing is complete.
- If the reading is 0.02 or over, a confirmation test must be done after 15 minutes but within 20 minutes of the first test. You will be asked not to eat, drink, belch, or put anything in your mouth, so there is no build-up of mouth alcohol, which could lead an artificially high result.
- If the screening and confirmation test results are not the same, the confirmation test result is used.
- If you refuse to be tested or sign the testing form, **BAT will immediately notify your employer.**
- Drug Testing
- Drug testing is done by analyzing a urine sample, which is collected in a private location. Urine specimens are divided into two containers by the collection site person---in your presence. These two samples, called 'primary' and 'split' are sent to a testing laboratory certified by DHHS.
- At the laboratory, a **screening** test is performed. If this test is positive for drugs, a confirmation test is required.
- The **confirmation** test must use a specialized procedure called gas chromatograph/mass spectrometry, to insure that over-the-counter drugs are not reported as positive.
- If the test is positive, the Medical Review Officer (MRO) will notify you to find out if there is a medical reason for the drug use. If you can document why the substance is being taken and if the MRO finds it's a legitimate medical use, the test may be reported as negative to the employer.
- If you are notified that the first test was positive, you have 72 hours to request a test of the 'split' specimen. If you make this request, the split specimen is sent to another DHHS-Certified laboratory for the test.
- If you do not contact the MRO within 72 hours but can prove to the MRO that you had a legitimate reason for not doing so, the MRO can order a 'split' specimen test.

- If the analysis of the 'split' sample does not confirm the presence of a drug, the MRO cancels the test and reports this to the DOT, the employer and to you.
- **(Removal from safety-sensitive duty as required by the DOT following a positive drug test will not be delayed to await the result of the split specimen test.)**

Consequences of violations

If a driver is determined to be in violation of any of the alcohol prohibitions:

- He/she must be removed from safety-sensitive functions.
- He/she cannot return to a safety-sensitive function until an evaluation has been done and any recommended treatment has been completed.
- He/she must undergo a return-to-duty-test.

Anyone with an alcohol concentration of 0.02, but less than 0.04 cannot return to safety-sensitive duties until his/her next schedule duty period, but in no case less than 24 hours.

If a driver is determined to be in violation of any of the controlled substances prohibitions:

- He/she must be removed from safety-sensitive functions.
- The driver cannot return to a safety-sensitive job until an evaluation has been done, recommended therapy is completed, and a verified negative drug test is produced.

Where Can I Go For Help?

If you have not violated alcohol or drug prohibitions but would like information or assistance on alcohol or drug issues, you can do so on a confidential basis—through your Employee Assistance Program.

If your employer does not provide an employee assistance program, programs for assistance in dealing with alcohol or drug problems are available through public or private agencies.

The alcohol and drug rule requires that an opportunity for treatment be made available to drivers. The ruling does not require the employer to pay for this treatment or keep a job open for you. If you violate an alcohol or drug prohibition you must be evaluated by a substance abuse professional to determine what help is needed. Before you can return to a safety-sensitive job you must:

- Have an alcohol test of 0.02 or less, or a verified negative drug test (depending on the violation).
- Complete recommended treatment.
- Complete a minimum of six (6) follow-up tests within the first year back to work.
- Testing can be done for up to five (5) years after return to work.

Effects of Alcohol and Drugs and Alcohol, a central nervous system depressant, is the most abused drug. About half of all auto accident fatalities in this country are related to alcohol abuse.

FACTS

- A 12-ounce can of beer, a 5 ounce glass of wine and a 1-1/2 ounce shot of hard liquor all contain the same amount of alcohol.
- Coffee, cold showers and exercise do not quicken sobriety.
- Each one-half ounce of alcohol takes the average body about one hour to process and eliminate.
- Consumption greatly impairs driving ability.
- Use of alcohol produces coordination's and reflexes.
- Alcohol adversely affects vision and judgment.

Alcohol acts on those parts of the brain that effect self-control and other learned behaviors. Low self-control often leads to the aggressive behavior associated with some people who drink. In large doses, alcohol can dull sensation and impair muscular coordination, memory, and judgment. Taken in larger quantities over a long period of time alcohol can damage the liver and heart and can cause permanent brain damage. On the average, heavy drinkers shorten their life span by about ten years.

Other effects that result from the use of alcohol includes an inability to concentrate and the lowering inhibitions. Overindulgence can result in a hangover with headaches, nausea, dehydration, aches, and indigestion.

Marijuana is also called 'grass', 'pot', 'Mary Jane', 'Acapulco Gold', 'joint', 'roach', among other street names.

Facts

- While alcohol dissipates in a matter of hours, marijuana stays in the body for 28 days.
- Driving ability is impaired after use.
- Use leads to reduction to temporary loss of fertility.

Marijuana alters sense of time and reduces the ability to perform tasks requiring concentration, swift reaction, and coordination. The drug has a significant effect of judgment, caution, and sensory/motor abilities.

Other effects that may result from the use of marijuana include: restlessness, inability to concentrate, increased pulse rate and high blood pressure, rapidly changing emotions, erratic behavior, altered sense of identity, impaired memory, dulling of attention, hallucinations, fantasies, and paranoia.

Cocaine is a stimulant drug, which increases heart rate and blood pressure. As a powder cocaine is inhaled (snorted), ingested, or injected. It is known 'coke', 'snow', 'nose candy', and 'lady'. Cocaine is also used as free-base cocaine known as 'crack' or 'rock' which is smoked. It acquired its name from the popping sound heard when it is heated.

FACTS:

- Many people think that because crack is smoked, it is 'safer' than other forms of cocaine use.
- The crack 'high' is reached in 4-6 seconds and lasts about 15 minutes.
- Use of cocaine in any form results in impaired driving ability.
- Consumption of cocaine can trigger mental disorders.

The most dangerous effect is that it can cause vomiting, rapid heartbeat, tremors and convulsive movements. All of this muscle activity increases the demand for oxygen, which can result in a cocaine-induced heart attack. Since the heart-regulating center in the brain is also disrupted, dangerously high blood temperatures can occur. With high doses, brain functioning, breathing and heartbeat are depressed—leading to death.

Other effects which could result from the use of cocaine include: a 'rush' pleasurable sensations, heightened, but momentary, feeling of confidence, strength and endurance; accelerated pulse, blood pressure and respiration; irritation of the nostrils and nasal membrane, mood swings, anxiety; reduced sense of humor; and compulsive behavior such as teeth grinding or repeated hand washing.

Amphetamines are drugs that stimulate the central nervous system and promote a feeling of alertness and an increase in speech and general physical activity. Some common street names for amphetamines are 'speed', 'uppers', 'black beauties', 'bennies', 'wake-ups', 'footballs'.

FACTS:

People with a history of sustained low-dose use quite often become dependent and believe they need the drug to get by.

- Users frequently keep taking amphetamines to avoid the 'down' mood they experience when the 'high' wears off.
- Usage can result in loss of appetite.
- Users have difficulty in focusing eyes.
- Heavy, frequent doses can produce brain damage.

Even small, frequent doses can produce toxic effects in some people. Restlessness, anxiety, mood swings, panic, heartbeat disturbances, paranoid thoughts, hallucinations, convulsions, and coma have been reported. Long-term users often have acne resembling measles, trouble with their teeth, gums, and nails, and dry dull hair.

Other effects that could result from the use of amphetamines include; irritability, anxiety, apprehension, increased heart rate and blood pressure, exaggerated reflexes, distorted thinking, perspiration, headaches, dizziness and short term insomnia.

Opiates, including heroin, morphine, and codeine are narcotics used to relieve pain and induce sleep. Common street names are 'horse', 'hard stuff', 'morpho', 'M', 'brown sugar', 'harry', and 'Mr. H'.

FACTS:

- Heroin also called 'junk' or 'smack' accounts for 90% of the narcotic abuse in this country.
- Use results in impaired driving ability.
- Use could result in death.

Sometimes narcotics found in medicines are abused. This includes pain relievers containing opium and cough syrups containing codeine. Heroin is illegal, and cannot even be obtained with a physician's prescription.

Most medical problems are caused by the uncertain dosage level, use of un-sterile needles, contamination of the drug, or combination of a narcotic with other drugs. These dangers depend on the specific drug, its source and the way it is used.

Other effects that could result from the use of opiates include: short-lived state of euphoria, drowsiness followed by sleep, constipation, decreased physical activity, reduced vision, and a change in sleeping habits.

Phencyclidine or PCP, also called 'angel dust', 'rocket fuel', 'super cools', and 'killer weed', was developed as a surgical anesthetic in the late 1950's. Later, due to its unusual side effects in humans, it was restricted to use as a veterinary anesthetic and tranquilizer. Today it has no lawful use and is no longer legally manufactured.

FACTS:

- PCP is very dangerous drug.
- PCP produces violent and bizarre behavior.
- More people die from the erratic behavior than the drug itself.
- Use of PCP greatly impairs driving ability.

PCP scrambles the brain's internal stimuli and alters how users see and deal with their environment. Routine activities like driving and walking become very difficult.

Low doses produce a rush, sometimes associated with a feeling of numbness. Increased doses produce an excited, confused state including any of the following: muscle rigidity, loss of concentration and memory, visual disturbances, delirium, feelings of isolation, and convulsions.

Other effects which might result from the use of PCP include: drowsiness, perspiration, repetitive speech patterns, incomplete verbal responses, blank stare, slurred speech, and involuntary eye movements.

Methods of Intervention

The problem of alcohol and substance abuse calls for specialized supervision and care. Don't attempt to help a person who you think has an alcohol or drug abuse problem. Don't make excuses for them, don't do their work for them, and don't look the other way, the problem is not going to go away. Don't enable the person to continue the alcohol or drug abuse.

However, confronting a person regarding an alcohol or drug abuse problem is not appropriate, unless you are a trained substance abuse professional. The most appropriate method of intervention, if you suspect a co-worker has an alcohol or drug problem, is to advise his/her supervisor of your concerns. In this way, the supervisor can take steps to prevent the individual from harming himself/herself or from putting other people at risk.

