Office of the Secretary of Transportation

(b) DOT may send a notice to you, your identified counsel, your agent for service of process, or any of your partners, officers, directors, owners, or joint venturers to the last known street address, fax number, or e-mail address. DOT deems the notice to have been received by you if sent to any of these persons.

c. DOT considers notices to be received by you—

(1) When delivered, if DOT mails the notice to the last known street address, or five days after we send it if the letter is undeliverable;

(2) When sent, if DOT sends the notice by fax or five days after we send it if the fax is undeliverable; or

(3) When delivered, if DOT sends the notice by e-mail or five days after DOT sends it if the e-mail is undeliverable.

APPENDIX A TO PART 40—DOT STANDARDS FOR URINE COLLECTION KITS

The Collection Kit Contents

1. Collection Container

a. Single-use container, made of plastic, large enough to easily catch and hold at least 55 mL of urine voided from the body.

b. Must have graduated volume markings clearly noting levels of 45 mL and above.

c. Must have a temperature strip providing graduated temperature readings 32–38 °C/90–100 °F, that is affixed or can be affixed at a proper level on the outside of the collection container. Other methodologies (e.g., temperature device built into the wall of the container) are accepted provided the temperature measurement is accurate and such that there is no potential for contamination of the specimen.

d. Must be individually wrapped in a sealed plastic bag or shrink wrapping; or must have a peelable, sealed lid or other easily visible tamper-evident system.

e. May be made available separately at collection sites.

2. Plastic Specimen Bottles

a. Each bottle must be large enough to hold at least 35 mL; or alternatively, they may be two distinct sizes of specimen bottles provided that the bottle designed to hold the primary specimen holds at least 35 mL of urine and the bottle designed to hold the split specimen holds at least 20 mL.

b. Must have screw-on or snap-on caps that prevent seepage of the urine from the bottles during shipment.

c. Must have markings clearly indicating the appropriate levels (30 mL for the primary specimen and 15 mL for the split) of urine that must be poured into the bottles.

d. Must be designed so that the required tamper-evident bottle seals made available on the CCF fit with no damage to the seal when the employee initializes it nor with the chance that the seal overlap would conceal printed information.

e. Must be wrapped (with caps) together in a sealed plastic bag or shrink wrapping separate from the collection container; or must be wrapped (with cap) individually in sealed plastic bags or shrink wrapping; or must have peelable, sealed lid or other easily visible tamper-evident system.

f. Plastic material must be leach resistant.

3. Leak-Resistant Plastic Bag

a. Must have two sealable compartments or pouches which are leak-resistant; one large enough to hold two specimen bottles and the other large enough to hold the CCF compartment.

b. The sealing methodology must be such that once the compartments are sealed, any tampering or attempts to open either compartment will be evident.

4. Absorbent material

Each kit must contain enough absorbent material to absorb the entire contents of both specimen bottles. Absorbent material must be designed to fit inside the leak-resistant plastic bag pouch into which the specimen bottles are placed.

5. Shipping Container

a. Must be designed to adequately protect the specimen bottles from shipment damage in the transport of specimens from the collection site to the laboratory (e.g., standard courier box, small cardboard box, plastic container).

b. May be made available separately at collection sites rather than being part of an actual kit sent to collection sites.

c. A shipping container is not necessary if a laboratory courier hand-delivers the specimen bottles in the plastic leak-proof bags from the collection site to the laboratory.

APPENDIX B TO PART 40—DOT DRUG TESTING SEMI-ANNUAL LABORATORY REPORT TO EMPLOYERS

The following items are required on each laboratory report:

Reporting Period: (inclusive dates)
Laboratory Identification: (name and address)
Employer Identification: (name; may include Billing Code or ID code) C/TPA Identification: (where applicable; name and address)

1. Specimen Results Reported (total number)
   (a) Pre-employment (number)
   (b) Post-Accident (number)
   (c) Random (number)
   (d) Reasonable Suspicion/Cause (number)
### APPENDIX C TO PART 40—DOT DRUG TESTING SEMI-ANNUAL LABORATORY REPORT TO DOT

Mail, fax, or e-mail to: U.S. Department of Transportation, Office of Drug and Alcohol Policy and Compliance, W62–300, 1200 New Jersey Avenue, SE., Washington, DC 20590. Fax: (202) 366–3897. E-mail: ODAPCWebMail@dot.gov.

The following items are required on each report:

- **Reporting Period:** (inclusive dates)
- **Laboratory Identification:** (name and address)

<table>
<thead>
<tr>
<th>Specimen Result</th>
<th>Total Number</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. DOT Specimen Results Reported</strong></td>
<td></td>
</tr>
<tr>
<td>Negative Results Reported</td>
<td>(total number)</td>
</tr>
<tr>
<td><strong>2. Negative Results Reported</strong></td>
<td></td>
</tr>
<tr>
<td>Negative-Dilute</td>
<td>(total number)</td>
</tr>
<tr>
<td><strong>3. Rejected for Testing Results Reported</strong></td>
<td></td>
</tr>
<tr>
<td>By Reason</td>
<td>(number)</td>
</tr>
<tr>
<td><strong>4. Positive Results Reported</strong></td>
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</tr>
<tr>
<td>By Drug</td>
<td>(total number)</td>
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<tr>
<td>Marijuana Metabolite</td>
<td>(number)</td>
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<tr>
<td>Cocaine Metabolite</td>
<td>(number)</td>
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<tr>
<td>Opiates</td>
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</tr>
<tr>
<td>Codeine</td>
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<tr>
<td>Morphine</td>
<td>(number)</td>
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<tr>
<td>6–AM</td>
<td>(number)</td>
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<tr>
<td>Phencyclidine</td>
<td>(number)</td>
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<tr>
<td><strong>5. Adulterated Results Reported</strong></td>
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</tr>
<tr>
<td>By Reason</td>
<td>(number)</td>
</tr>
<tr>
<td><strong>6. Substituted Results Reported</strong></td>
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</tr>
<tr>
<td><strong>7. Invalid Results Reported</strong></td>
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<tr>
<td>By Reason</td>
<td>(number)</td>
</tr>
</tbody>
</table>

[75 FR 49863, Aug. 16, 2010]

### APPENDIX D TO PART 40—REPORT FORM: SPLIT SPECIMEN FAILURE TO RECONFIRM


The following items are required on each report:

- **1. MRO name, address, phone number, and fax number.**
- **2. Collection site name, address, and phone number.**
- **3. Date of collection.**
- **4. Specimen I.D. number.**
- **5. Laboratory accession number.**
- **6. Primary specimen laboratory name, address, and phone number.**
- **7. Date result reported or certified by primary laboratory.**
- **8. Split specimen laboratory name, address, and phone number.**
- **9. Date split specimen result reported or certified by split specimen laboratory.**
- **10. Primary specimen results (e.g., name of drug, adulterant) in the primary specimen.**
- **11. Reason for split specimen failure-to-reconfirm result (e.g., drug or adulterant not present, specimen invalid, split not collected, insufficient volume).**
- **12. Actions taken by the MRO (e.g., notified employer of failure to reconfirm and requirement for recollection).**
- **13. Additional information explaining the reason for cancellation.**
- **14. Name of individual submitting the report (if not the MRO).**

[73 FR 35975, June 25, 2008]

### APPENDIX E TO PART 40—SAP EQUIVALENCY REQUIREMENTS FOR CERTIFICATION ORGANIZATIONS

**1. Experience:** Minimum requirements are for three years of full-time supervised experience or 6,000 hours of supervised experience.