

DRUG/ALCOHOL FREE WORKPLACE SCREENING AUTHORIZATION

SAFETY FIRST[®]

A Division of BHS

Company Information:

Jefferson County Commission
Room A-670 Courthouse Annex
716 Richard Arrington, Jr. Blvd N
Birmingham, AL 35203

Contact: Human Resources
Phone: 205-325-5249
Fax: 205-325-5614

Contact: Risk Management
Phone: 205-325-5110
Fax: 205-581-7596

Instructions to Employee/Prospective Employee

Prospective/Promotional Employee/Transfer/Reassignment

You are hereby notified to report to the collection site listed on the back of this form within 48 hours of contact from the Human Resources Department. Failure to report within the specified time frame or failure to provide a sample for testing within two (2) hours of arrival at the testing site will cause your application for employment to be denied.

Present this form to collection site staff upon arrival. Present your PHOTO I.D. (Drivers License, State I.D., Military I.D., etc.) for identification.

Current Employee

You are hereby ordered to **immediately** report to the collection site listed on the back of this form and provide a specimen for drug testing.

You are hereby notified that failure to immediately go to the collection site for testing or failure to provide a sample for testing within two (2) hours of arrival at the testing site will result in the **forfeiture** of all compensation to which you may be entitled under the Worker's Compensation Law of the State of Alabama.

You are further notified that failure to comply with this order shall constitute a violation of Jefferson County's Administrative Order 91-6, and shall also result in disciplinary action, which may include termination of employment or cause your application for employment to be denied.

Present this form to collection site staff upon arrival. Present your PHOTO I.D. (Drivers License, State I.D., Military I.D., etc.) for identification.

Employee Name (please print): _____ SS# _____

Employee Signature _____

Services Needed

(Please fax copy of chain and/or copy of BAT result and physical to 205-581-7596 immediately upon services rendered.)

- Urine Drug Screen Breath Alcohol Test DOT Physical Regular Physical
 TB Skin Test Fit for Duty

Type of Drug Screen Needed

- Pre-Employment Random Post Accident On the Job Injury
 Reasonable Suspicion Return to Duty Follow-Up Last Chance
 Promotional/Transfer/Reassignment

Category of Test

- Non-DOT Test DOT-Test on a DOT mandated employee Safety Sensitive

Instructions to Collector

Notify "Risk Mgt" of confirmation alcohol screen equal to or greater than .02 **immediately** by calling 205-325-5110 or fax to 205-581-7596.

Supervisor/Manager Designee Signature (a copy of this form should be forwarded to Risk Management, Courthouse, Room 270, emailed to or fax to 205-581-7596)

Date: _____ Time: _____ Signature: _____

Department Number _____

Collection Site

- LABCORP PSC (Drug Screen Only)
790 Montclair Road, Suite 120
Birmingham, AL 35213
Ph: (205)581-3711
- Alabama Comp (Drug Screen, BAT, Fit for Duty, or Injury)
114 Wildwood Parkway
Birmingham, AL 35209
Ph: (205)876-2667
- Middle Creek Medical Center (Drug Screen, BAT, or Injury),
4810 Bell Hill Road
Bessemer, AL 35022
Ph: (205)477-3737
- St. Vincent's OHC2 (Drug Screen, BAT, or Injury)
One Lakeshore Drive, Suite 301
Lakewood Medical Building
Homewood, Alabama 35209
Ph: (205)930-2910
- UAB Highlands-ER (Before/After Hours, Weekends or Holidays only)
1201 11th Avenue South
Birmingham, AL 35209

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