

Alcohol and Drug Reasonable Suspicion Checklist

Employee Name: Employee Identification Number:
 Location: From: To:
Observation Time Observation Date

Reasonable suspicion of current use or impairment by: Alcohol Drugs Both

Appearance	Cause for Suspicion
<input type="checkbox"/> Normal	<input type="checkbox"/> Flushed
<input type="checkbox"/> Dilated/Constricted Pupils	<input type="checkbox"/> Puncture Marks
<input type="checkbox"/> Inappropriate Wearing of Sunglasses	<input type="checkbox"/> Disheveled
	<input type="checkbox"/> Bloodshot Eyes
	<input type="checkbox"/> Tremors
	<input type="checkbox"/> Profuse Sweating
	<input type="checkbox"/> Dry-Mouth
	<input type="checkbox"/> Runny Nose/Sores/Frequent Sniffing
	<input type="checkbox"/> Odor of: <input type="text"/>
	<input type="checkbox"/> Other: <input type="text"/>
Behavior: Speech	
<input type="checkbox"/> Normal	<input type="checkbox"/> Incoherent
<input type="checkbox"/> Loud	<input type="checkbox"/> Slurred
	<input type="checkbox"/> Silent
	<input type="checkbox"/> Confused
	<input type="checkbox"/> Slow
	<input type="checkbox"/> Whispering/Soft
	<input type="checkbox"/> Inappropriate Comments
	<input type="checkbox"/> Other: <input type="text"/>
Behavior: Awareness	
<input type="checkbox"/> Normal	<input type="checkbox"/> Confused
<input type="checkbox"/> Other: <input type="text"/>	<input type="checkbox"/> Euphoria
	<input type="checkbox"/> Lethargic
	<input type="checkbox"/> Disoriented
Behavior: Other	
<input type="checkbox"/> Mood Swings	<input type="checkbox"/> Poor Memory
<input type="checkbox"/> Disruptive	<input type="checkbox"/> Secretive
<input type="checkbox"/> Presence of Drug Paraphernalia	<input type="checkbox"/> Aggressive/Violent
	<input type="checkbox"/> Paranoid/Distrustful
	<input type="checkbox"/> Excessive Fatigue
	<input type="checkbox"/> Poor Comprehension
	<input type="checkbox"/> Poor Performance
	<input type="checkbox"/> Other: <input type="text"/>
Motor Skills: Balance and Walking	
<input type="checkbox"/> Normal	<input type="checkbox"/> Swaying
<input type="checkbox"/> Arms Raised for Balance	<input type="checkbox"/> Head Bobbing
<input type="checkbox"/> Reaching for Support	<input type="checkbox"/> Falling
<input type="checkbox"/> Wide -Based Gait	<input type="checkbox"/> Stagger/Stumbling
<input type="checkbox"/> Other: <input type="text"/>	
Motor Skills: Other	
<input type="checkbox"/> Dropping Objects	<input type="checkbox"/> Lack of Coordination
<input type="checkbox"/> Other: <input type="text"/>	<input type="checkbox"/> Slowed Reaction Time
	<input type="checkbox"/> Over Reaction

Other Observable Actions of Behavior (Specify):

Check if the following conditions are met:

- Observations are specific, current, and describable and based on the appearance, behavior, speech, or body odors of the individual.
- Testing observations are made during, just preceding, or just after the individual is required to be in compliance with DOT regulations or Salt Lake County policies.

If unable to conduct an alcohol test within 2 hours of reasonable suspicion determination, state reasons:

If unable to conduct an alcohol test within 8 hours of determination to test, cease attempts to test and state reasons:

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Supervisor's Name **Signature** **Date**

Comments and/or corroboration by Administrator or designee:

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Administrator or Designee

Signature

Date

Steps to Performing a Reasonable Suspicion Test:

- Identify problem and observe.
- Document your findings as soon a possible.
- Confirm your findings with Administrator or designee.
- Administrator/designee and supervisor discuss findings with employee.
(From this point on the employee is not to be left unattended.)
 - Meet the employee in private.
 - Tell employee what was observed and observed to be abnormal.
 - As employee, why he/she appears abnormal.
 - Act on medical concerns immediately.
 - Inform employee that supervisors are required to act when there is reasonable suspicion to believe the County's and/or DOT's drug and/or alcohol prohibitions have been violated.
 - Inform employee that County policy requires testing.
 - Inform employee of the consequences of a non-negative or refusal to test.
 - Maintain confidentiality.
- Testing (drug and/or alcohol)
 - Arrange escort/transport of employee to collection site.
 - Arrange escort/transport of employee to home.
 - Employee remains off duty until test results back.

Remember to remove employee from work area as soon as is necessary to maintain safety of employee and others.

Final Supervisor Comments:

Contact any of the following locations to arrange for testing:

WFQA-SLC, 535 South 300 West. Salt Lake City, 801-328-4027, 8:00 a.m. to 5:00 p.m.
WFQA-WVC, 3489 W. 2100 So., Suite 100, West Valley City, 801-965-0665, 8:00 a.m. to 5:30 p.m.
WFQA-Sandy, 8657 S. Sandy Pkwy, Sandy, Utah, 801-316-4125, 8:00 a.m. - 5:00 p.m.

For hours not listed call 801-965-0665 to coordinate a testing location.

Divisions will be billed for the cost of testing.