

DRUG and ALCOHOL PROGRAM – Callahan Paving Corp/Tri-Messine has a Con Edison accepted Drug and Alcohol program in place. The name of the vendor we use is Alere E Screen. See Attachment for our Drug and Alcohol Program D&A Acceptance.

All employees assigned to this project are enrolled in the D&A program and are identified in Attachment . Any changes to this list will be communicated to Con Edison immediately.

Additional information on the D&A program can be obtained by contacting Callahan Paving Corp/Tri-Messine or Con Edison EH&S Construction

EMPLOYEE ANTI-DRUG

TRAINING MANUAL

FMCSA

NADE 1992. This training manual is only to be used by NADE clients. Use by any other party is prohibited except by express written permission.

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DRUG/ALCOHOL FREE WORKPLACE

THE COMPANY HAS ESTABLISHED AN ANTI-DRUG AND ALCOHOL PROGRAM TO ENSURE A SAFE AND PRODUCTIVE WORKPLACE AND TO MEET THE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

THE COMPANY DESIGNATED EMPLOYER REPRESENTATIVE (DER) WHO CAN ANSWER EMPLOYEE QUESTIONS ABOUT THE ANTI-DRUG AND ANTI-ALCOHOL PROGRAMS AND INFORMATIONAL MATERIALS IS: PATRICIA HINDS

RECORD OF RECEIPT OF EMPLOYEE ANTI-DRUG MANUAL

"By signing below, I acknowledge that I have received the attached Employee Training Manual which covers the following information:"

Introduction
Employee instructions
Employee training learning objectives
Your company's substance abuse policy
What is substance abuse?
Why substance abuse is a health and safety hazard
Where to get help
Drug types tested
Five reasons you could be tested
How a typical random drug test works
Actions that your company may take for positive tests
How to get more information
Summary of five drug types
Donor Information Sheet
Requirement to Submit
Refusals and Consequences
Quiz

NAME (Please Print)

SIGNATURE/DATE

1.0 INTRODUCTION

The employees are your company's most important asset, and their health, safety and emotional well-being are of paramount importance. Unfortunately, alcohol and drug abuse are a problem in America today. Their use is increasing, threatening our families and sometimes our safety at work. Workers who abuse substances are less productive than their fellow drug-free workers, and represent a real risk to co-workers and the public.

In order to deter substance abuse in the workplace, your company has put in place an anti-drug and alcohol program which includes employee training and drug testing. The primary purpose of the program is to educate employees of the risks of substance abuse. It also provides a deterrent to abuse through testing. We all need to learn and be aware of the symptoms associated with substance abuse. They can include financial, marital, legal or career related problems. Most importantly, we need to know how a struggling individual can get help.

2.0 EMPLOYEE INSTRUCTIONS

This training is being provided as part of your company's anti-drug program.

1. Please complete the acknowledgment form and return it your company's Anti-Drug Manager (ADM) also known as the Designated Employer Representative (DER).
2. Please read the attached Employee Training Manual. Supervisors who will have the authority to make reasonable-cause test must receive both the Employee and the Supervisor Training Manuals.
3. If you have any questions on the training or any aspect of the anti-drug and alcohol program, please do not hesitate to ask your Anti-Drug Manager. All questions will be kept in strict confidence.

3.0 EMPLOYEE TRAINING LEARNING OBJECTIVES

By the end of this training, you should be able to:

- | | |
|---------------------|--|
| <u>Objective 1:</u> | Identify the regulations that require your company to implement this program. |
| <u>Objective 2:</u> | State and explain your company's substance abuse policy. |
| <u>Objective 3:</u> | Define "substance abuse" and name at least four substances that are abused in America. |
| <u>Objective 4:</u> | Describe the health and safety hazards associated with substance abuse. |

- Objective 5:** List the referral and personal assistance resources available to employees.
- Objective 6:** Identify the five drug types that are tested.
- Objective 7:** List and describe the sequence of events of a drug test, from random selection through reporting of test results to the employee and your Company.
- Objective 8:** List the minimum actions that your company will take in the event of a confirmed and verified test result.
- Objective 9:** Define the role and responsibilities of the Medical Review Officer (MRO).
- Objective 10:** List the types of drug tests, including random testing, that must be conducted.
- Objective 11:** Identify your company's Anti-Drug Program Manager, who can answer your questions.

4.0 YOUR COMPANY'S SUBSTANCE ABUSE POLICY

Your company has implemented an anti-drug program for employees engaged in safety and security sensitive activities. Your company has declared itself a drug-free workplace, which means that the use, manufacture, possession, sale or purchase of illegal drugs on company property is prohibited and will not be tolerated. Furthermore, no employee shall report to work while under the influence of alcohol or any illegal drug. Your company further recognizes that illegal drug use is a hazard to fellow employees and the public. Your company acknowledges that substance abuse is a compulsive disease that can be cured. It strongly urges individuals who may have a substance abuse problem to seek and get help for themselves. This training identifies such resources.

5.0 WHAT IS SUBSTANCE ABUSE?

A drug is defined as any substance that produces physical, mental, emotional, or behavioral changes in the user. Drug abuse is the use of a drug for other than medicinal purposes. Many legal, as well as illegal, drugs are mood-altering, or psychoactive, and it is this effect that users seek. The substances that are abused the most are nicotine (tobacco smoking to chewing), alcohol, marijuana, cocaine, and legal over-the-counter or prescription drugs. This training will primarily be concerned with alcohol, marijuana and cocaine since they are by far the most abused illegal substance. What is use verses abuse? Taking an allergenic under the guidance of a doctor is substance use, not abuse. Mainlining heroin clearly is

abuse. But, is drinking a beer with dinner considered substance abuse? No. Is drinking a six-pack every night considered abuse? Absolutely. The difference, therefore, between use and abuse is not always clear. Common sense is the best guide.

Some substance, like PCP (angel dust), have no legal uses. Any use of PCP is illegal. On the other hand, there are legal uses of cocaine and amphetamines. Drug dependence is a psychological desire to feel the effects of the drug, to feel good. Drug addiction is the chemical need of the body to continue receiving the drug. Most drugs have elements of both. For example, cigarette smokers will psychologically crave a cigarette. They will also experience an actual chemical withdrawal when they quit. Substance abusers may know logically that what they are doing is destructive, yet they want and need that next "hit" or "fix" and it is a difficult cycle to break. Substance abuse is a compulsive disease and abusers have great difficulty changing their habits.

6.0 WHY SUBSTANCE ABUSE IS A HEALTH AND SAFETY HAZARD

Substance abusers, compared to non-users:

- are 1/3 less productive
- use 3 times more medical benefits
- are 4 times more likely to have an accident at work
- are 2 times more likely to take a week's sick time per year
- are 5 times more likely to file a Workman's Compensation claim

Cocaine has killed over 100,000 people just since 1986! Substance abusers inflict a terrible burden on their families and on the companies they work for. Each abuser affects about five other people around them, lowering their well-being and productivity as well as the abuser. Substance abusers are the cause of neglect, anger, physical abuse, suspicion, mistrust, guilt, fear and sometimes financial ruin. Drug use is most prevalent among the young adults. Studies have shown that at least 1 in 4 working males from 18 to 34 years old use marijuana at least once per month. As much as 1 in 11 use cocaine. The government estimated that \$100 billion dollars is wasted in the US because of drugs each year. One more depressing statistic; on average, 15 in every 100 8th graders across the country smoke marijuana, and 5 use crack cocaine - average only 13 years old!

7.0 WHERE TO GET HELP

There are many resources available to those who may need help in coping with a personal problem, drug-related or not. Below are some national helpline numbers that are staffed by trained and sympathetic individuals. They are often people who experienced the same problem themselves, and got through it. Most of them operate 24 hours a day, and you do not need to give your name.

Alcohol and Drug Referral Hotline	1-800-662-4357
Substance Abuse and Mental Health	1-800-672-7229

Services Administration	
Drug Information Line	1-800-241-7946
Alcoholics Anonymous	1-800-344-2666
National Child Abuse Hotline	1-800-422-4453
National AIDS Hotline	1-800-342-2437
National Cocaine Hotline	1-800-262-2463
National Hepatitis Hotline	1-800-223-0179
National Runaway and Suicide Hotline	1-800-621-4000
Sexually Transmitted Diseases Hotline	1-800-227-8922
Narcotics Anonymous	1-818-773-9999

Additional resources include:

- a. Employee Assistance Programs (EAP) are offered by many employers today as an employee benefit. The EAP is free to the employee, and is completely confidential. Look for posters in your workplace. If your company does not have an EAP, perhaps you have a family member who works for a company that does.
- b. Professional Counselors at mental health centers treat drug abusers, the cost may be covered by your medical benefits program.
- c. Religious clerics are often trained as counselors. They are willing to listen to and help individuals, whether or not the individual is a member of their congregation.
- d. Community and Professional Clubs (Kiwanis, Lions, Rotary, Chambers of Commerce, etc.) sometimes have referral services for community members.
- e. Local clinics and hospitals have crisis lines that can be called anonymously. They may also have out-patient care.
- f. Family and close friends are sometimes the best support around (provided they are not a part of the problem). However, it is important to recognize when professional help is needed. Substance abuse treatment needs a combination of medical care and emotional support.
- g. Support group meetings with other people recovering from the same problem are effective in avoiding relapse.
- h. Yellow Pages - Look in the Yellow Pages under "Drug Abuse" for local help centers.

If you know someone who is suffering from substance abuse, offer them your warm support and guide them to a resource to get help. With professional care and loving support, recovery can be total and complete. Don't give up on someone who seems "too far gone".

8.0 DRUG TYPES BEING TESTED

It is recognized that your industry does not have a history of drug abuse. However, it only took one well-publicized accident (such as the Prince William Sound oil spill or the New York subway crash) where drugs or alcohol were cited to mobilize Congress to pass drug testing laws. All employees in safety-sensitive positions are required to submit to the drug testing program. As part of the anti-drug program, your company is testing for several drug types. They include, but may not be limited to, marijuana, cocaine, opiates, amphetamine and phencyclidine (PCP). The list of drug types tested may be expanded in the future if a particular drug is increasingly abused. Additional information is located at the end of this Employee Training Manual.

9.0 FIVE REASONS YOU COULD BE TESTED

- a. Pre-employment - Pre-employment testing of an individual is required prior to the hiring of an individual who performs a safety sensitive function. If an employee is transferred into a safety-sensitive position, the individual is required to submit to pre-employment test. An employer must have proof that the employee had a negative test result prior to the employee performing a covered function.
- b. Random - Many of the employees in the employee pool will be tested each year completely at random. Each covered employee's name is always available for being selected, even if a particular employee was just tested. Consequently, an employee could be selected more than once in a given year.
- c. Post-Accident - All employees who may have contributed to an accident must be drug tested. A testable accident is defined as any accident causing significant damage, injury or loss of life.
- d. Reasonable-Cause - Supervisors can require a reasonable-cause test of an employee if there is reason to believe that the employee is using drugs. Supervisors are required to receive Supervisor Training before determining reasonable-cause, but they are not expected to become medical diagnosticians. If drug paraphernalia is evident at work or he/she smells pot smoke, the Supervisor can require a reasonable-cause test. Care must be taken that reasonable-cause testing is not used to harass individual employees. The Supervisor must fully document the reason for the reasonable-cause test.
- e. Return-to-Duty/Follow-up - In the event of a positive drug test (or a refusal to test), and your company chooses to retain the employee, the employee must successfully complete a drug rehabilitation program. Furthermore, that employee is then subject to a return-to-duty test. The result must be negative for the employee to return-to-duty. The employee will also be subject to a minimum of six tests within the first 12 months of returning to duty.

10.0 HOW A RANDOM DRUG TEST WORKS

The program relies on urine analysis to detect the presence and quality of an illicit substance. The sequence of events in performing a drug test has been very carefully defined by the Federal Government. The attitude of the entire program is to protect the employees' confidentiality and check, double-check and re-check all analysis that determine a positive test. When in doubt, a negative (no drugs) test result is reported. Your company's program is being administered by an outside firm called the National Association of Drug-Free Employees, or NADE. Before NADE could manage any company's anti-drug program, the Federal Government had to review and approve NADE's program, which they did in August 1989, as well as periodically rereviewed since 1989. NADE was issued Federal approval numbers E-EA-00010/11-U. Let's go through a random test:

- a. Employee is Randomly Selected - Covered employees are randomly selected from the pool of thousands of covered employees from hundreds of companies. The computer selects by social security number only, and disregards where employees work, their job category, or geographical location. The computer does not care whether a person was already picked, so individuals could be picked more than once. Once an employee is selected, their name is immediately returned to the pool for future possible selection. This provides an on-going deterrence and prevents a "safe period" from developing.
- b. Employee Goes To Collection Site: The Anti-Drug Manager in each company is notified of the names that were selected from their company. The employee then goes to the local clinic that is the company's designated collection site. The Collection Technician checks the employee's ID, and explains the collection process. The Employee chooses a specimen bottle and the Chain-of-Custody (COC) Form. This form is vital to the process; it ensures that someone always has custody of the bottle, and is fully responsible for it. The top copy of the form will accompany the sealed specimen bottle to the lab doing the analysis. The employee will be asked to empty his/her pockets and display the contents to the collector. The employee voids into the bottle. The specimen collection itself is done in a controlled manner, but is not directly observed. The employee is given full privacy. After the bottle is filled, the specimen is poured into two separate containers and which are sealed in front of the employee. The employee then initials the tamper-evident bottle seals. The bottle is not opened again until it arrives at the laboratory.

- c. Specimen Bottle and Chain-of-Custody Form are Shipped to Lab: The bottle and COC form are then sent to the lab, where the COC form is scrutinized carefully for correct completion, and matched against the bottle seal. All information must be on the form for the analysis to proceed.
- d. Analysis by the Lab: The lab draws off a small portion of the urine specimen (called an aliquot) and performs what is called an EIA screen test. This screen test "screens out" the negative (drug-free) tests. Most specimens, over 97% of them, will test negative and be discarded after the EIA screen test. If the EIA is negative (no drugs), the employer will be informed that the test is negative. Over-the-counter drugs like Advil and Sudafed do not interfere with the test or give a false result. The specimens are tested for adulterants and validity.
- e. Positive Test - If, on the other hand, the EIA screen test is presumptive positive, it means that the screen test discovered the presence of one of the five drugs (marijuana, cocaine or crack, amphetamines, PCP and opiates). The specimen is then retested using an entirely different test method called gas chromatography (GC). The specimen is then tested a third time using yet another test methodology called mass spectrometry (MS). Each of these tests (EIA, GC, and MS) is a separate and distinct test method. Together, they are a very accurate way to identify unknown substances. They are definitive in determining the presence and quantity of an illegal drug in the specimen. If the specimen again tests positive on the GC and MS tests, the specimen becomes a "confirmed positive test". However, the employer is not yet notified that a positive test has been identified. A doctor gets involved first.
- f. Medical Review Officer - The lab reports all drug tests in a confidential manner to the designated Medical Review Officer, or MRO. The MRO is a fully-certified physician with knowledge of illicit drugs and how they are metabolized by the human body. For confirmed positive drug tests, the MRO contacts the employee by telephone and has a confidential discussion with him or her. The employer is not notified of the positive test result until the employee has the opportunity to talk with the MRO. Depending upon which drug was discovered, the MRO asked questions to find out whether the drug was legally prescribed. If the employee can explain a positive test through a copy of a prescription, the name of a doctor, or a copy of the label of the bottle then the MRO will mark "Negative" on the drug test result. This is despite the fact that the laboratory did correctly determine the test as positive. The employer will never know that the employee was under suspicion of a positive test, unless the employee chooses to inform the employer.

On the other hand, if the employee cannot explain or justify to the MRO why the test was positive, the MRO will inform the employee that the employer will be notified of the positive test result. During medical review with the employee, the MRO will inform the employee of the right to split analysis. After MRO

verification of a positive result, the employee will be informed by the MRO that he or she will have 72 hours to provide a request for a split analysis at a 2nd DHHS certified lab. After MRO verification of a positive result, the MRO will notify the employer of the positive result. Upon notification from the MRO of a positive result, the employer must remove that employee from their safety-sensitive duties. If the split analysis fails to reconfirm the drug, the result of the test is cancelled. The employer has the right to pass the cost of the requested split analysis to the employee. Split sampling may be requested on all tests, not only randoms.

- g. Substance Abuse Professional If an employee covered by the drug testing regulations has a positive drug test (or refuses to test), he/she must be referred for evaluation to a substance abuse professional (SAP). The following professionals are qualified to act in this capacity: licensed physicians, licensed or certified psychologists, licensed or certified social workers, licensed or certified EAP's, counselors certified by the NAADAC. The initial, critical decision for which the SAP is responsible is whether the tested employee needs assistance in resolving problems with drug abuse. If the SAP decides the employee needs help, the SAP must recommend treatment and determine a schedule for follow-up testing. If the SAP decides the employee does not need assistance with a drug problem, the employee is required to have a negative drug test before his or her return to safety-sensitive duties.

That is how a random test is conducted. Great care is taken throughout the procedure to safeguard the employee. The labs are continually monitored by both the Federal government and by NADE. Blind, spiked samples are submitted every day to the lab that have known quantities of drugs in them. If the lab makes just one mistake in attributing a positive test incorrectly (commonly called a false positive), the lab can be shut down immediately, and all previous tests from the lab within a certain time period can be invalidated. Great care is taken to not falsely attribute a positive test. If any doubt occurs as to the validity of the test, either the lab or the MRO will invalidate the test, and the test will be reported to the employer as negative.

11.0 ACTIONS THAT YOUR COMPANY MAY TAKE FOR POSITIVE TESTS/REFUSALS

An employee who tests positive or who refuses to submit to a test must be removed from a safety/security related position. If your company chooses to rehire an employee who tests positive (your company is not legally obligated to rehire such individuals), the employee must be referred to a substance abuse professional, be successfully rehabilitated (if required) before he or she can resume the safety or security related position. After returning to duty, the employee must be follow-up tested at a schedule determined by the SAP for a period of up to five years, all the while remaining in the random pool.

12.0 HOW TO GET MORE INFORMATION

Your first resource for more information is within your company. You can either ask your Supervisor or your company's Anti-Drug Manager. The second resource is to call one of the national helplines, especially the SAMHSA Drug Abuse Information and Treatment Referral Line (1-800-672-7229).

13.0 SUMMARY OF FIVE DRUG TYPES

Here is some information on the five drug types that are being tested for in your company's program.

MARIJUANA

Marijuana is the most abused controlled substance after nicotine and alcohol. Marijuana and cocaine are by far the most used drugs.

Associated Terms: Grass, bone, pot, reefer, or dope. A joint is a rolled marijuana cigarette. Hash is the concentrated form of marijuana made from the tops of the plant. Being high on marijuana is commonly referred to as being stoned.

Appearance: Green, like ground oregano or thyme. Personal "stash" are usually kept in plastic ziplock sandwich bags.

How Drug is Made: Marijuana is a hemp plant that has been dried, crushed and the seeds removed before being smoked, much like tobacco. The plant was historically used to make hemp rope. It can grow in a wide variety of climates, from tropical to temperate zones. Much of the marijuana used is "homegrown" in the US.

How Drug is Taken: Usually smoked in a pot pipe, bong (water pipe) or as a joint (marijuana cigarette). Has a distinctive odor when burning, like burning grass or rope.

Effects: Marijuana produces a temporary mellow euphoria or high for up to 5 hours, followed by drowsiness. Marijuana impairs concentration, learning and perceptual/motor skills. One study conducted on experienced pilots in a flight simulator demonstrated impairment for 24 hours after the immediate high had passed (American Journal of Psychiatry, 1985).

General: Marijuana's active ingredient, THC, is prescribed in rare instance to manage the symptoms of glaucoma (painful eyeball pressure) and to suppress the nausea associated with cancer treatment (chemo-and radiation therapy). Chronic users develop tolerance to THC requiring more frequent use and higher doses to achieve the same high. It is estimated that 66 million Americans, fully one quarter of the country's entire population have tried marijuana at least once in their lives. It is the most common drug abuse after

alcohol and nicotine.

COCAINE AND CRACK

Crack cocaine is the fastest-growing substance of abuse. Cocaine and marijuana are by far the most used drugs.

Associated Terms: Coke, crack, rock, snow, toot, nose candy or Lady. Lines are finely crushed cocaine powder laid out in parallel line on a flat surface. Snorting is the inhalation of the crushed cocaine powder through a tube into a nostril. Freebasing is the separation of the active ingredient from the salt base, and inhaling the resultant highly volatile fumes. Crack (or rock) is a purified form of cocaine for smoking much like freebasing.

Appearance: Cocaine - Finely-ground white powder typically stored in a small glass vials or folded glossy paper (such as used in expensive magazines). Crack - Small white chips having the appearance of slivers of soap or broken porcelain. Sold in small glass vials.

How Drug is Made: Cocaine is made from the coca bushes' leaves, most often grown in the Andean countries of South America. The leaves are processed with a variety of chemicals, including acid, and then dried to yield a white powder. Before being sold on the street, cocaine is often diluted, or cut, with other white crystalline powders, such as sugar or crushed aspirin tablets. Crack is made by further processing cocaine.

How Drug is Taken: Cocaine - Cocaine is usually finely ground with a razor blade on a flat surface such as glass, and snorted deep into a nostril through a tube. The cocaine powder is deposited on the membrane tissues of the nose and sinus, and absorbed into the blood stream. It only takes a few minutes to travel to the brain and create the high. Crack-Cocaine rocks are placed in a pipe (usually glass) and heated with a butane flame. The resultant fumes are inhaled. The onset of the high only takes seconds and is very intense. The crash, or post-high depression, is also more pronounced than for snorting.

Effects: Cocaine and crack temporarily produce an elevated mood for 10 to 20 minutes. The user then emotionally crashed and becomes severely depressed. The user then craves another dose to bring him or her up again. Chronic use will cause damage to the nasal passages, malnutrition, heart disease, and ultimately death. The user's personality will change drastically as casual use becomes chemical addiction. Crack users report that addiction occurs after only one or two episodes.

General: Cocaine is used as a topical pain killer for nasal surgery. Cocaine and crack are highly addictive psychologically and chemically. Research has discovered that an addicted animal will prefer cocaine to food, even if starved. It inhibits the release of a natural chemical in the brain (dopamine) that produces the normal sensation of joy or pleasure. The coke user relies on the cocaine to "feel good", since his or her brain is incapable of producing dopamine, and will stay depressed until cocaine is taken again.

The vicious cycle is very difficult to break, explaining the low success rate of rehabilitation (more than 70% of treated users relapse). For addicts, only inpatient care under continuous psychological and medical supervision for at least 60 days, couples with strong, loving support has shown to be effective. The recovered user must then never re-enter the social setting that led to the experimentation with the drug. 10% of the entire population has tried cocaine, with close to 6 million users in any given month. Crack use is growing faster than any other drug.

OPIATES

While marijuana, cocaine and PCP are specific drugs, opiates are a class of drugs. The most common opiates are raw opium, heroin, morphine and codeine.

Associated Terms: Heroin - Smack, horse, H, hard stuff, scag or scat. Mainlining is the injection of heroin (or other drugs) directly into a vein. Needle tracks are the puncture marks left by the needle usually found on the forearms or legs. Opium - Black Tar. Morphine and Codeine - Morpho, M codies and dope.

Appearance: Heroin - white to dark brown powder to tar. Opium - dark brown chunks of powder. Morphine and Codeine "legal looking" (prescription) pills, tablets and injection liquids.

How Drug is Taken: Opium is the raw product from which the other opiates are made. Opium and its derivatives are made from a specific poppy plant. The poppy grower makes vertical razor cuts in the seed pod beneath the flower while it is still in the ground. A dark fluid oozes out, and this is collected and chemically processed into raw opium. Heroin is then made reacting the natural morphine from the raw opium with acetic acid. The poppy plant is indigenous to the Middle Eastern countries of the Mediterranean, though it has been transplanted to other sub-tropical areas of the world. The active ingredients of opium have been manufactured synthetically and this is the opiate form found in many legally-prescribed narcotic opiates.

How Drug is Taken: Heroin - heroin is taken by turning it into a liquid through heating it in a spoon over a candle, drawing it up into a syringe, and injecting it into a vein ("mainlining"). Opium - Raw opium is mostly smoked, as was done in the "opium dens" of the East. It can also be eaten.

Morphine and Codeine - Morphine and codeine are usually taken as abused prescribed drugs. They can be taken orally or injected. Abuse of morphine and codeine are limited by

drug accessibility, making use more prevalent in the health care professions, versus other sectors of society.

Effects: All of the opiates bring on a short-lived state of euphoria, which passes and leaves the user craving another dose. Within minutes of injection, heroin changes to morphine, and later codeine in the body. Therefore, a heroin user will test positive for both codeine and morphine.

General: Public awareness of heroin as a hard drug is widespread, though it is not generally recognized that most heroin users are ordinary people who have become addicted. Heroin is primarily an urban drug, though its use has spread to smaller mid-continent communities. Since heroin is primarily injected intravenously, there is an additional risk of infection, especially by the HIV virus (AIDS), when hypodermic needles are shared. Abuse of legally prescribed opiate drugs is growing fastest in the health care professions. A typical dose of heroin costs \$10, with an addicted user requiring close to \$100 per day.

AMPHETAMINE AND METHAMPHETAMINE

Amphetamine and methamphetamine are manufactured legally and are prescribed for medical conditions. They are also heavily controlled substances.

Associated Terms: Speed, co-pilot, uppers, dexies, black beauties, pep pills, bennies, meth, and wake-up are among the terms used to describe amphetamine and methamphetamine. The trade names include benzedrine, biphetamines, dexedrine, synatan, appetrol, methedrine and desoxyn.

Appearance: These drugs are in the form of pills, tablets or caplets of varying colors, shapes and sizes.

How Drug is Made: These drugs are most often legally made by pharmaceutical companies and controlled by the FDA. They are completely synthetic drugs developed for legally prescribed uses, such as appetite suppression, narcolepsy (involuntary sleep), and as antidepressants.

How Drug is Taken: They are nearly always taken orally.

Effects: Abused primarily to increase alertness, these drugs cause symptoms often related to excessive caffeine intake, such as restlessness and insomnia. Amphetamines cause increase heart rate, which can result in heart attacks. Amphetamines and methamphetamine are addicting.

General: These drugs are typically used to ward off fatigue over long periods of time. They are not normally used as "recreational drugs"; they are not as psychoactive or mood altering as marijuana, cocaine or opiates. However, strong diet pills are abused by millions of people, who develop mild addictions to them, diminishing job productivity.

PHENCYCLIDINE (PCP)

There is no legal use of PCP. All PCP is manufactured in illegal home labs. PCP abuse is a fraction of that of cocaine or marijuana, but its violent effects are devastating. Washington DC, Los Angeles, and New Orleans have the highest incidences of PCP use.

Associated Terms: Angel dust, crystal, rocket fuel, dummy dust, krystal joints, KJs, DOA, zombies, super cools.

Appearance: Pure PCP is a white crystalline powder that dissolves easily in water. It is also sold as tablets of many colors.

How Drug is Made: These drugs are completely illegal. There is no legal use of PCP. Originally designed for veterinary purposes (the "horse pill"), PCP is no longer manufactured legally.

How Drug is Taken: PCP is added to mint leaves, parsley or marijuana and smoked as krystal joints or KJs. Liquid PCP can be injected, and is also applied with an eye dropper directly to the eyes. It can even be absorbed directly through the skin.

Effects: The user experiences a false sense of unlimited power and strength, while losing basic motor skills and becoming confused and disoriented. An expert varsity swimmer under the effects of PCP jumped into a pool, could not recall how to swim and drowned. Hallucinations are common, as is schizophrenic and unexplainable violent behavior.

General: PCP has been shown to be addictive, though it is not a common drug of abuse. It appeared on the West Coast in the Seventies and is used primarily with marijuana. Users sprinkle angel dust or spray PCP solutions on a joint and smoke it, with violent results.

Attachment 1

DONOR INFORMATION SHEET

The collection of your urine specimen will be conducted under procedures strictly mandated by the US Department of Transportation (DOT). The DOT regulations provide for your privacy and dignity, unless there is reason to believe that the specimen was altered or substituted. Your specimen will be tested for marijuana, cocaine, phencyclidine (PCP), opiates and amphetamines. Please take a few minutes to read the following information, which describes your role in the collection process.

- You will be asked to show photo identification to the Collector Technician. If you do not have a photo ID, an employer representative will have to confirm your identity.
- You may ask the Collection Technician to show his/her identification.
- Remove any unnecessary outer garments, e.g. coat, jacket. All personal belongings (e.g. purse, briefcase) must remain with the outer garment outside of the collection room. You will be asked to display the contents of your pockets to the collector. If there appears to be an item that may be used to adulterate a specimen, this item is to be left outside with other personal belongings. You may be subject to an observed specimen. You may retain your wallet, and you may ask for a receipt for any personal belongings.
- When instructed by Collection Technician, wash and dry your hands.
- You may provide the specimen in the privacy of a bathroom stall or otherwise partitioned area that allows for individual privacy.

You must provide at least 45ml of urine in your specimen collection cup. If you cannot meet this requirement, or if you are just not able to provide a specimen you will be given a 3 hour period during which you can provide the specimen. During that period, you will be given up to 40 ounces of liquid. You must take in the liquid up until the point that you are ready to provide a specimen. If you are unable to provide a sample within the 3 hour period, your employer must send you to a physician to determine if there is a legitimate reason why you could not physically provide a sample. If the physician identifies a legitimate reason, you will be excused from the test. If there is no legitimate reason, your test will be treated as a REFUSAL.

- You should observe the entire collection procedure. The Collection Technician will check the specimen for volume, temperature, and color. The Collection Technician will then seal the bottle with a tamper-proof seal.
- You should initial the bottle seal on the specimen bottle to certify that it is your specimen.

- You should complete the information on the pink copy of the Custody and Control Form. You will be given a copy of the completed form after the Collection Technician has completed his/her certification.
- You should NOT list medications/prescriptions on any other copy of the form except the copy which you are given for your records. In the event that you are taking any prescription medications, the Medical Review Officer (MRO) will call you to ask what they are.
- The results of the laboratory analysis will be forwarded to your employer's MRO. If the laboratory results are negative, the MRO will notify your employer. If the laboratory results are positive, the MRO will contact you at the telephone number you provided. This will give you the opportunity to discuss the test results and to submit information demonstrating authorized use of the drugs in question.

14.0 CATEGORIES OF SAFETY SENSITIVE EMPLOYEES

Employees who perform safety sensitive duties or functions directly or by contract for an employer must be tested pursuant to an FHWA approved alcohol misuse prevention program. The following are the job functions to be tested: Every person and all employers of such persons who operate a commercial motor vehicle in commerce in any State and is subject to: the commercial driver's license requirements.

PERFORMING A SAFETY SENSITIVE FUNCTION:

An employee is considered to be performing a safety-sensitive function and therefore required to be in compliance with the drug testing program during any period in which he or she is actually performing, ready to perform or immediately available to perform such functions.

DRUGS WHICH ARE TESTED FOR:
Marijuana, Cocaine, PCP, Amphetamines, Opiates

15.0 REASONS FOR DRUG TESTING

PRE-EMPLOYMENT

Before an employee is hired for a safety sensitive position, he/she must undergo a pre-employment drug test. This includes employees moving from non-covered function to a safety sensitive function. The employer shall not allow the individual to perform any safety sensitive duties until the employer receives a NEGATIVE pre-employment test result.

If the employee leaves the company and then returns he/she must retake the pre-employment drug test if there is more than a 180 day time lapse.

RANDOM

The random testing rate for the FAA is 25% of either the consortium pool you are in or just your company alone. This means if you are in a pool of 800 employees, 200 tests must be completed by the end of the calendar year. This may mean that employees in your company may test more or less than the 25%. If you are in a stand-alone pool and you have 100 employees, 25 tests must be completed by the end of the year.

All employees have an equal chance of being selected each time the random selection is done.

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After notification from the employer, the employee must proceed immediately to the collection site. On the notification form NADE provides you, the employer should note the time notified.

REASONABLE SUSPICION

A covered employee must submit to testing if directed to do so based upon the decision of a supervisor trained in the detection of the symptoms of possible drug use. This decision shall be concurred by an additional supervisor only if you have 50 or more employees. The decision to test must be based on a reasonable and articulate belief that the employee is using prohibited drug(s) on the basis of specific contemporaneous physical, behavioral or performance indicators of probable drug use.

POST-ACCIDENT-FHWA

Disabling accident means damage which precludes 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. An employer shall test each employee who performs a safety sensitive function for the presence of drugs if that employee's performance either contributed to an accident or can not be completely discounted as a contributing factor to the accident.

RETURN TO DUTY

Each employer shall ensure that any employee before being put back into their safety sensitive position must receive a **NEGATIVE** drug and/or alcohol test result following a verified positive or a refusal to submit to testing.

FOLLOW UP

After receiving the negative test result on a return to duty test, the employer must ensure that a program of unannounced tests be conducted on the employee who either had the verified positive or refused to test. The number and frequency of testing shall be determined by the SAP and must consist of at least six tests conducted during the first twelve months following the employee's return to duty. Follow up testing must not exceed 60 months. After the first six tests have been conducted the SAP may re-evaluate the situation and discontinue follow up testing.

SPLIT SPECIMEN

Under 49 CFR Part 40 anyone regulated to do drug testing is required to collect a split specimen at that time. If a drug test comes up positive and is verified by the Medical Review Officer, the employee has the right to notify the MRO within 72 hours that he/she would like the second specimen tested at a second DHHS laboratory.

16.0 REQUIREMENT TO SUBMIT

Covered employees are required to submit to drug tests administered in accordance with this program under 14 CFR Part 382.

17.0 EMPLOYEE ANTI-DRUG TRAINING QUIZ

1. My Anti-Drug manager (DER) is:

2. Please circle the five drugs which are tested for under the DOT testing program:

Valium	LSD	Marijuana	Nicotine	Opiates
Barbiturates	Amphetamines	Cocaine	PCP	Inhalants

3. What are the reasons I may need to complete a drugtest:

Pre-employment	Return to Duty/Follow-Up	Random
To pass a physical	Post-accident	Insurance purposes
Reasonable cause	Union membership	

4. Check below which are health and safety hazards:

☐ Workman compensation claims
☐ Accidents on/off job
☐ Increased use of medical benefits
☐ Increase in sick time

5. True or False. A random test when taken is the only one you will ever have to take this year.
6. True or False. Random selections are picked by your supervisors.
7. True or False. When taking a drug test, the tests are analyzed by your local hospital.
8. True or False. The results of the drug tests are reviewed by a Medical Review Officer (MRO) who is a licensed physician with knowledge of substance abuse.
9. True or False. When the employee goes for his/her drug test, photo identification is needed.
10. True or False. If the MRO confirms a positive test, he then calls the employee first to determine if there is a legitimate medical reason for the positive and then calls the employer.

11. True or False. If you test positive by taking another person's prescription medication, the MRO will accept this as a legitimate excuse.
12. Briefly state what your company policy says what will happen to you if you test positive on a drug test.
13. True or False. Does refusing to take a drug test have the same result as a positive drug test.
14. Marijuana, what does it look like and name two associated terms for it.
15. Cocaine, what does it look like and name two associated terms for it.
16. Opiates, what does it look like and name two associated terms for it.
17. True or False. Opiates may come up either in the form of morphine or codeine. Do physicians prescribe these?
18. Amphetamines, what does it look like and name two associated terms.
19. PCP, what does it look like and name two associated terms.
20. Where and how can you get more drug information if needed.

UTILITY NOISE MITIGATION PLAN

TO BE USED FOR
QUEENS ONLY

I. CONTACT INFORMATION

Name of Responsible Party as defined in 15RCNY §28-109(a) Utility and/or Contractor and/or Sub-contractor: TRI-MESSINE CONSTRUCTION COMPANY INC		Phone Number: (516) 679-9797	Email: tmstaff@trimessine.com
Work Site Location[s] by Block, Stretch, or Intersection: VARIOUS LOCATIONS			Borough: Queens
Approved Work Schedule:	<input checked="" type="checkbox"/> Weekdays	<input type="checkbox"/> Saturday	<input type="checkbox"/> Sunday
Daytime:	From 7:00 am To 6:00 pm	From _____ To _____	From _____ To _____
Nighttime:	From 10:00 pm To 5:00 am	From _____ To _____	From _____ To _____
DOT PERMIT # (If needed):		<input type="checkbox"/> Posted on site <input type="checkbox"/> Available at: _____	

II. SITE-SPECIFIC INFORMATION

- Residents within 200 feet of a construction site shall be given notice when work is scheduled for longer than 3 days during regular construction hours and afterhours. Conspicuous posting of such information, or where necessary notification of building managers/owners, shall satisfy this requirement.
- The owner/operator of sensitive receptors, within 50 feet of this site, shall be contacted when practicable to coordinate work to minimize impact on the property.
- Vehicle engine idling at site shall be prevented in accordance with NYC Ad. Code §24-163.
- All street plates at this site, shall be installed and properly secured in accordance with 34RCNY §2-11(10) (e)
- All rules of 28RCNY §106 apply.

III. CONSTRUCTION DEVICES

This Plan certifies that all equipment indicated in this Mitigation Plan is maintained to operate in accordance operating specifications and has been equipped with appropriate manufacturer's noise reducing devices.

Check applicable boxes listed below:

When the specific devices listed below are utilized, the use of barriers is not required unless the Department of Environmental Protection (DEP) receives complaints.

NOTE: All devices must have manufacturer's noise reduction device installed and properly functioning.

☒ JACKHAMMERS (including chisel hammer attached to a vehicle like a backhoe)
Other: _____

☒ BACKHOES engine muffler/low idling _____ method of mitigating device.

☐ GENERATORS (Noise mitigation required – noise insulating fabric or other such techniques)

☒ COMPRESSORS (Noise mitigation required – noise insulating fabric or other such techniques)

☐ PUMPS (Noise mitigation required – noise insulating fabric or other such techniques)

☒ OTHER SKIDSTEER W/ MILLING ATTACHMENT _____

Drug
and
alcohol
program

IV. SPECIALIZED EQUIPMENT

The vehicles listed in the dropdown menu below and other vehicles with internal combustion motors shall require noise mitigation measures as specified by the DEP, such as the use of noise-insulating material or other such techniques that do not interfere with engine operation. The location of receptors should be considered in the placement and use to minimize noise impact.

☒ BACKUP ALARMS (Required January 2008) Ecco Model SA907 (or equivalent)

☐ Rodding Truck
 ☐ Flusher Vac Truck
 ☐ Pavement Core Drilling Truck
 ☐ Vacuum Excavator Truck

Method of mitigating any of the above devices:

You must use the latest version available.

Please check the website: <http://www.nyc.gov/html/dep/html/airnoise.html>

UTILITY NOISE MITIGATION PLAN

TO BE USED FOR
BROOKLYN ONLY

I. CONTACT INFORMATION

Name of Responsible Party as defined in 15RCNY §28-109(a) Utility and/or Contractor and/or Sub-contractor: TRI-MESSINE CONSTRUCTION COMPANY INC		Phone Number: (516) 679-9797	Email: tmstaff@trimessine.com
Work Site Location[s] by Block, Stretch, or Intersection: VARIOUS LOCATIONS			Borough: Brooklyn
Approved Work Schedule:	<input checked="" type="checkbox"/> Weekdays	<input type="checkbox"/> Saturday	<input type="checkbox"/> Sunday
Daytime:	From <u>7:00 am</u> To <u>6:00 pm</u>	From _____ To _____	From _____ To _____
Nighttime:	From <u>10:00 pm</u> To <u>5:00 am</u>	From _____ To _____	From _____ To _____
DOT PERMIT # (If needed): MULTIPLE		<input checked="" type="checkbox"/> Posted on site <input type="checkbox"/> Available at: _____	

II. SITE-SPECIFIC INFORMATION

- Residents within 200 feet of a construction site shall be given notice when work is scheduled for longer than 3 days during regular construction hours and afterhours. Conspicuous posting of such information, or where necessary notification of building managers/owners, shall satisfy this requirement.
- The owner/operator of sensitive receptors, within 50 feet of this site, shall be contacted when practicable to coordinate work to minimize impact on the property.
- Vehicle engine idling at site shall be prevented in accordance with NYC Ad. Code §24-163.
- All street plates at this site, shall be installed and properly secured in accordance with 34RCNY §2-11(10) (e)
- All rules of 28RCNY §106 apply.

III. CONSTRUCTION DEVICES

This Plan certifies that all equipment indicated in this Mitigation Plan is maintained to operate in accordance with the manufacturer's operating specifications and has been equipped with appropriate manufacturer's noise reducing devices.

Check applicable boxes listed below:

When the specific devices listed below are utilized, the use of barriers is not required unless the Department of Environmental Protection (DEP) receives complaints.

NOTE: All devices must have manufacturer's noise reduction device installed and properly functioning.

☒ JACKHAMMERS (including chisel hammer attached to a vehicle like a backhoe)

Select one or enter text

☒ BACKHOES engine muffler/low idling _____ method of mitigating device.

☐ GENERATORS (Noise mitigation required – noise insulating fabric or other such techniques)

☒ COMPRESSORS (Noise mitigation required – noise insulating fabric or other such techniques)

☐ PUMPS (Noise mitigation required – noise insulating fabric or other such techniques)

☒ OTHER SKIDSTEER W/ MILLING ATTACHMENT , ROLLER

IV. SPECIALIZED EQUIPMENT

The vehicles listed in the dropdown menu below and other vehicles with internal combustion motors shall require noise mitigation measures as specified by the DEP, such as the use of noise-insulating material or other such techniques that do not interfere with engine operation. The location of receptors should be considered in the placement and use to minimize noise impact.

☒ BACKUP ALARMS (Required January 2008) Ecco Model SA907 (or equivalent)



☐ Rodding Truck ☐ Flusher Vac Truck ☐ Pavement Core Drilling Truck ☐ Vacuum Excavator Truck

Method of mitigating any of the above devices:

You must use the latest version available.

Please check the website: <http://www.nyc.gov/html/dep/html/airnoise.html>

UTILITY NOISE MITIGATION PLAN

TO BE USED FOR
BRONX ONLY

I. CONTACT INFORMATION

Name of Responsible Party as defined in 15RCNY §28-109(a) Utility and/or Contractor and/or Sub-contractor: TRI-MESSINE CONSTRUCTION COMPANY INC		Phone Number: (516) 679-9797	Email: tmstaff@trimessine.com
Work Site Location[s] by Block, Stretch, or Intersection: VARIOUS LOCATIONS			Borough: Bronx
Approved Work Schedule:	<input checked="" type="checkbox"/> Weekdays	<input type="checkbox"/> Saturday	<input type="checkbox"/> Sunday
Daytime:	From <u>7:00 am</u> To <u>6:00 pm</u>	From _____ To _____	From _____ To _____
Nighttime:	From <u>10:00 pm</u> To <u>5:00 am</u>	From _____ To _____	From _____ To _____
DOT PERMIT # (If needed): MULTIPLE		<input checked="" type="checkbox"/> Posted on site <input type="checkbox"/> Available at: _____	

II. SITE-SPECIFIC INFORMATION

- Residents within 200 feet of a construction site shall be given notice when work is scheduled for longer than 3 days during regular construction hours and afterhours. Conspicuous posting of such information, or where necessary notification of building managers/owners, shall satisfy this requirement.
- The owner/operator of sensitive receptors, within 50 feet of this site, shall be contacted when practicable to coordinate work to minimize impact on the property.
- Vehicle engine idling at site shall be prevented in accordance with NYC Ad. Code §24-163.
- All street plates at this site, shall be installed and properly secured in accordance with 34RCNY §2-11(10) (e)
- All rules of 28RCNY §106 apply.

III. CONSTRUCTION DEVICES

This Plan certifies that all equipment indicated in this Mitigation Plan is maintained to operate in accordance with the manufacturer's operating specifications and has been equipped with appropriate manufacturer's noise reducing devices.

Check applicable boxes listed below:

When the specific devices listed below are utilized, the use of barriers is not required unless the Department of Environmental Protection (DEP) receives complaints.

NOTE: All devices must have manufacturer's noise reduction device installed and properly functioning.

☒ JACKHAMMERS (including chisel hammer attached to a vehicle like a backhoe)
Other: ▼

☒ BACKHOES engine muffler/low idling _____ method of mitigating device.

☐ GENERATORS (Noise mitigation required – noise insulating fabric or other such techniques)

☒ COMPRESSORS (Noise mitigation required – noise insulating fabric or other such techniques)

☐ PUMPS (Noise mitigation required – noise insulating fabric or other such techniques)

☒ OTHER SKIDSTEER W/ MILLING ATTACHMENT , ROLLER

IV. SPECIALIZED EQUIPMENT

The vehicles listed in the dropdown menu below and other vehicles with internal combustion motors shall require noise mitigation measures as specified by the DEP, such as the use of noise-insulating material or other such techniques that do not interfere with engine operation. The location of receptors should be considered in the placement and use to minimize noise impact.

☒ BACKUP ALARMS (Required January 2008) Ecco Model SA907 (or equivalent) ▼

☐ Rodding Truck ☐ Flusher Vac Truck ☐ Pavement Core Drilling Truck ☐ Vacuum Excavator Truck

Method of mitigating any of the above devices:

You must use the latest version available.

Please check the website: <http://www.nyc.gov/html/dep/html/airnoise.html>

CALLAHAN PAVING CORP.

DRUG AND ALCOHOL POLICY FOR USE WITH FMCSA / DOT REGULATED CDL EMPLOYEES

Introduction

This company is committed to providing a safe work environment and to fostering the well-being and health of its employees and the general public. That commitment is jeopardized when any commercial driver uses illegal drugs, controlled substances or alcohol while on the job, reports to work under the influence, or possesses, distributes, or sells drugs in the workplace. Therefore, in accordance with this federal law, the company has implemented this drug and alcohol policy.

Federal regulations require that employers conduct alcohol and drug testing of any individuals who operate commercial motor vehicles in excess of 26,000 GVW or who operate a vehicle designed to carry 16 or more passengers including the driver. This includes mechanics, and supervisors with a commercial driver's license who are asked to fill in as a driver. For the purpose of this policy the term employee will be referred to as "driver" and employer will be referred to as "Company." This policy provides guidelines for circumstances under which the Federal Motor Carrier Safety Administration (FMCSA) and the United States Department of Transportation (DOT) mandated testing must be conducted. Of course, all the details of every possible situation can not be anticipated, so the Company reserves the right to determine the appropriate application of this policy and general employment policies to any particular case.

Employees covered by this policy have been provided a copy of these FMCSA/DOT provisions and by your signature, you are verifying that you have read and understand the policy. All drivers have been provided the Driver's Handbook which contains information on the effects of alcohol misuse and controlled substances use on an individual's health, work and personal life as well as signs and symptoms of an alcohol problem and methods of intervening. In addition, drivers may contact their DER or Third Party Administration for referral to appropriate EAP and SAP services. Drivers should note that in addition to the required DOT regulations they are also subject to the company's drug and alcohol policy and all other policies and procedures as applied to all employees.

The Company expects all drivers to work drug- and alcohol-free at all times. If you have any questions about this policy, contact the DER listed above. All drivers/employees who operate CMVs as defined above must be subject to testing and participation in the employer's controlled substance and alcohol testing program is a requirement and condition of employment.

The following conditions and activities are expressly prohibited:

The manufacture, sale, use or possession of alcohol, any controlled or illegal substance (except strictly in accordance with medical authorization) or any other substances which impair job performance or pose a hazard, when use or possession occurs on Company premises or property, or during work time, or while representing the Company in any work-related fashion.

Reporting for work having consumed alcohol or used illegal drugs or controlled substances at a time, or in such quantities, or in a manner that may impair work performance. For purposes of this policy, having any detectable level of an illegal or controlled drug, or alcohol with an alcohol concentration of .02 or greater, in one's system while covered by this policy will be considered to be a violation.

Alcohol and Drug Problems

In some cases alcohol and drug abuse can be a result of chemical dependency that can be successfully treated with professional help. Drivers who are having problems with alcohol or drug use are encouraged to seek voluntary counseling and treatment. It is the driver's responsibility to seek help when needed, and to do so before substance abuse causes problems on the job or results in disciplinary action.

Drivers who admit to alcohol misuse or controlled substances use are not subject to the referral, evaluation, and treatment requirements of 49 CFR Part 382 and 40, provided that:

- 1) The admission is in accordance with the Company's written established voluntary self-identification policy;
- 2) The driver does not self-identify in order to avoid testing;
- 3) The driver makes the admission of alcohol misuse or controlled substances use before performing a safety sensitive function;
- 4) The driver does not perform a safety sensitive function until the Company is satisfied that the driver has successfully completed education or treatment requirements in accordance with the self-identification program guidelines.

Normally, the Company will:

- 1) Not take adverse action against a driver making a voluntary admission of alcohol misuse or controlled substances use provided that the admission occurs before the employee has been subject to disciplinary action or the use/misuse has affected job performance;
- 2) Allow the driver sufficient opportunity to seek an evaluation, education or treatment to establish control over the employee's drug or alcohol problem;
- 3) Permit the employee to return to safety sensitive duties only upon successful completion of an educational or treatment program, as determined by a substance abuse professional.

Definitions

"Alcohol" means the intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohols including methyl and isopropyl alcohol.

"Alcohol concentration (or content), BAC" means the alcohol in a volume of breath expressed in terms of grams of alcohol per 210 liters of breath as indicated by an evidential breath test under 49 CFR Part 382.

"Alcohol use" means the drinking or swallowing of any beverage, liquid mixture or preparation (including any medication), containing alcohol.

"Commercial driver" means any person who operates a commercial motor vehicle.

"Commercial motor-vehicle" means a motor vehicle or combination of motor vehicles used in commerce to transport passengers or property if the motor vehicle:

- Has a gross combination weight rating of 26,001 or more pounds inclusive of a towed unit with a gross vehicle weight rating of more than 10,000 pounds; or
- Has a gross vehicle weight rating of 26,001 or more pounds; or
- Is designed to transport 16 or more passengers, including the driver; or
- Is of any size and is used in the transportation of materials found to be hazardous for the purposes of the Hazardous Materials Transportation Act and which require the motor vehicle to be placarded under the Hazardous Materials Regulations (49 CFR Part 172, subpart F).

"Controlled substances" mean those substances identified in 49 CFR Part 40.85: marijuana, cocaine, opiates including heroin, amphetamines, MDMA (Ecstasy), and phencyclidine.

"DOT Agency" means an agency (or "operating administration") of the United States Department of Transportation administering regulations requiring alcohol and/or drug testing (14 CFR parts 61, 63, 65, 121, and 135; 49 CFR parts 199, 219, 382, 653, 654 and 655), in accordance with 49 CFR Part 40.

"Driver" means any person who operates a commercial motor vehicle. This includes, but is not limited to: full time, regularly employed drivers; casual, intermittent or occasional drivers; leased drivers and independent, owner-operator contractors who are either directly employed by or under lease to an employer or who operate a commercial motor vehicle at the direction of or with the consent of an employer.

"Drug" has the meaning of any controlled substances, prescription, or over-the-counter medication.

"EBT (or evidential breath testing device)" means an EBT approved by the National Highway Traffic Safety Administration (NHTSA) for the evidential testing of breath and placed on NHTSA's "Conforming Products List of Evidential Breath Measurement Devices" (CPL), and identified on the CPL as conforming to the model specifications available from the National Highway Traffic Safety Administration, Office of Alcohol and State Programs.

"Employer" means an entity employing one or more employees (including an individual who is self-employed) that is subject to DOT agency regulations requiring compliance with 49 CFR Part 382. The term refers to the entity responsible for overall implementation of DOT drug and alcohol program requirements, as well as those individuals employed by the entity who take personnel actions resulting from violations of 49 CFR Part 382 and any applicable DOT agency regulations. Service agents are not employers.

"Licensed medical practitioner" means a person who is licensed, certified, and/or registered, in accordance with applicable Federal, State, local, or foreign laws and regulations, to prescribe controlled substances and other drugs.

"Medical Review Officer (MRO)" means a licensed physician (medical doctor or doctor of osteopathy) responsible for receiving laboratory results generated by an employer's drug testing program who has knowledge of substance abuse disorders and has appropriate medical training to interpret and evaluate an individual's confirmed positive test result together with his or her medical history and any other relevant biomedical information.

"Performing (a safety-sensitive function)" means a driver is considered to be performing a safety-sensitive function during any period in which he or she is actually performing, ready to perform, or immediately available to perform any safety-sensitive functions.

"Refuse to submit (to an alcohol or controlled substances test)" means that a driver:

- Fails to show up for any test within a reasonable time after being directed to do so by the Company or to remain at the testing site until the testing process is complete. This includes the failure of an employee (including an owner-operator) to appear for a test when called by a Consortium/Third Party Administrator);
- Fails to provide a urine specimen for any drug test required by 49 CFR Part 382;
- In the case of a directly observed or monitored collection in a drug test, fails to permit the observation or monitoring of the provision of a specimen;
- Fails to provide a sufficient amount of breath or urine when directed, unless it has been determined, through a required medical evaluation, that there was an adequate medical explanation for the failure to provide.
- Fails or declines to take a second test the employer has directed following a negative dilute result;
- Tampering with or attempting to adulterate the specimen
- Fails to undergo an additional medical examination, as directed by the MRO as part of the verification process, or as directed by the Designated Employer Representative (DER) concerning the evaluation as part of the "shy bladder" procedures in 49 CFR Part 40, subpart I;

- Fails to cooperate (e.g. leaves the test site before the collection process is completed, refuses to empty pockets) or otherwise interferes with any part of the testing process.

"Safety-sensitive function" means all time from the time a driver begins to work or is required to be in readiness to work until the time he/she is relieved from work and all responsibility for performing work. Safety-sensitive functions shall include:

- (1) All time at an employer or shipper plant, terminal, facility, or other property, or on any public property, waiting to be dispatched, unless the driver has been relieved from duty by the employer;
- (2) All time inspecting equipment as required by 49 CFR 392.7 and 392.8 or otherwise inspecting, servicing, or conditioning any commercial motor vehicle at any time;
- (3) All time spent at the driving controls of a commercial motor vehicle in operation;
- (4) All time, other than driving time, in or upon any commercial motor vehicle except time spent resting in a sleeper berth (a berth conforming to the requirements of 49 CFR 393.76);
- (5) 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 loaded or unloaded; and
- (6) All time repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle.

Prohibited Conduct

The following is considered prohibited conduct under this policy:

1. No driver shall report for duty or remain on duty requiring the performance of safety-sensitive functions while having an alcohol concentration of 0.02 or greater.
2. No driver shall use alcohol while performing safety-sensitive functions.
3. No driver shall perform safety-sensitive functions within four hours after using alcohol.
4. No driver required to take a post-accident alcohol test under 49 CFR 382.303 shall use alcohol for eight (8) hours following the accident, or until he/she undergoes a post-accident alcohol test, whichever occurs first.
5. No driver shall refuse to submit to a post-accident, random, reasonable suspicion, or follow-up controlled substance and/or alcohol test required by 49 CFR Part 382.
6. 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 licensed medical practitioner, who has advised the driver that the substance will not adversely affect the driver's ability to safely operate a commercial motor vehicle.

Prescription Medications: No driver may possess any prescription medication or report to work while using any prescription, except when he/she is under a doctor's care and the doctor has advised the driver that the substance does not affect his/her ability to operate a commercial motor vehicle. The use of medication that could affect a driver's safe job performance is prohibited while working. The driver shall report to the supervisor, the use of any prescribed medication and, without identifying the medication, shall provide a certificate from the driver's doctor that the use of the medication will not impair the his/her ability to safely perform his/her duties. If, as a result of testing under this policy, the driver is found to have the presence of controlled substances in the body which is a result of the use of his/her legally prescribed medication that has not been reported, the driver shall be removed from service without pay until it is determined that the use of medication will not impair his/her ability to safely perform assigned duties.

7. No driver shall report for duty, remain on duty or perform a safety-sensitive function, if the driver tests positive for controlled substances. The Company shall not permit a driver to continue to perform safety sensitive functions if the Company has actual knowledge of a driver violating any of the aforementioned prohibitions. The Company can obtain actual knowledge based on the employer's direct observation of the employee, information provided by the driver's previous employer(s), a traffic citation for driving a CMV while under the influence of alcohol or controlled substances, or an employee's admission of alcohol or controlled substances use, except as discussed in the Company's voluntary self-identification program.

Other Related Alcohol Conduct

A driver tested under the requirements of this policy who is found to have an alcohol concentration of 0.02 or greater but less than 0.04 shall be removed immediately from performing safety-sensitive functions until the start of the driver's next regularly scheduled duty period, but not less than 24 hours following the test administration.

Controlled Substances and Alcohol Testing

Regulated Drugs: Under 49 CFR, the law requires that drivers be evaluated for alcohol and the following of drugs:

- Marijuana
- Cocaine
- Amphetamines
- Opioids
- Phencyclidine (PCP)

Drivers will be subject to testing as follows:

Pre-Employment: Drivers will be tested for controlled substances unless the applicant participated in a DOT testing program within the past 30 days and:

- (1) passed a DOT controlled substance test within the past six (6) months; or
- (2) was subject to DOT random controlled substance testing program for the previous 12 months; and
- (3) has not violated any prohibitions of 49 CFR Part 382 within the past six (6) months.

A driver/applicant who tests positive on a pre-employment test will not be hired and is not eligible to reapply for employment with the Company. In addition, an applicant who has tested positive on any other employer's DOT mandated pre-employment drug test, after August 1, 2001, must provide documentation of the applicant's successful completion of DOT return-to-duty requirements (i.e. an evaluation by a substance abuse professional, education and/or treatment, and a negative DOT pre-employment test all of which meet the requirements of 49 CFR Part 40). The driver/applicant will be responsible to pay for the pre-treatment evaluation, education and/or treatment.

Post-Accident: As soon as practicable following an occurrence involving a commercial motor vehicle operating on a public road in commerce, each surviving driver shall be tested for controlled substances and alcohol:

- (1) who was performing safety-sensitive functions with respect to the vehicle, if the accident involved the loss of human life (fatality); or
- (2) the driver received a citation for a moving violation and the accident involved bodily injury to any person who, as a result of the accident, immediately receives medical treatment away from the scene of the accident; or
- (3) the driver received a citation for a moving violation and the accident involved one or more motor vehicles incurring disabling damage as a result of the accident, requiring the motor vehicle to be transported away from the scene by a tow truck or other motor vehicle.

A driver may not consume alcohol for eight (8) hours following an accident that requires the DOT alcohol test. The alcohol test must be completed within two (2) hours of the accident, if not the driver must advise the Company the reasons for the delay, and shall continue to have the test conducted up to eight (8) hours following the accident. After eight (8) hours the attempt to test will be ceased; the driver must again provide the reasons for the test not being administered.

A controlled substances test shall be administered as soon as practicable up to 32 hours following the accident. After 32 hours the attempt to test will be ceased, the driver must provide the reasons for the test not being administered promptly. A driver must remain readily available for testing, or may be deemed by the Company to have refused to submit to testing.

Any employee involved in any commercial motor vehicle resulting in an injury requiring immediate medical attention away from the accident scene, regardless whether a citation has been

issued; or any vehicle required to be towed away because of disabling damage, regardless whether a citation has been issued will be subject to testing.

Testing will be to determine the presence, use, or any involvement with alcohol or drugs unless the company determines, at its discretion, that the accident could not have been caused by or related to alcohol or drug use.

The driver will submit to an alcohol test within eight (8) and a controlled substances test within 32 hours of the accident. The driver must advise the collection site and alcohol testing personnel that the test being required is a company required test not a mandated DOT test.

As soon as possible after the accident, the driver shall notify their immediate supervisor of the accident. The driver should not delay testing in the event he/she is unable to contact their immediate supervisor. Testing will be conducted under the guidance previously stated.

Random:

- (1) Random selection of drivers will be made by a scientifically valid method using a computer-based random number generator that is matched with drivers' Social Security numbers.
- (2) Each driver shall have an equal chance of being drawn each time selections are made.
- (3) Selections for testing are unannounced and reasonably spread throughout the calendar year.
- (4) Random selections are made to ensure testing for controlled substances is conducted at not less than the minimum annual 30% rate and alcohol is conducted at not less than the minimum annual 10% rate, or the rates as established by the FMCSA.
- (5) A driver shall only be tested for alcohol just before, during, or after performing safety-sensitive functions, however, he/she may be tested for controlled substances anytime while performing work for the employer.
- (6) Once a driver is notified of selection for random alcohol and/or controlled substances testing he/she shall proceed to the test site immediately.

Reasonable Suspicion: Drivers will be tested for alcohol and/or controlled substances whenever the employer has reasonable suspicion that the driver has violated any of the drug and alcohol policy (for example, if the employers observes physical signs of drug or alcohol use, such as slurred speech, unsteady gait, dilated pupils, odor of alcohol or controlled substances, etc.; or if observed unusual behavior suggesting the use of controlled substances or alcohol in violation of Company policy). Drivers required to be tested under reasonable suspicion testing will be removed from performing safety sensitive functions pending the outcome of the test result(s) and be transported to the testing facility by the Company.

Reasonable suspicion must be documented in writing at or near the time of observation on the Observed Behavior Reasonable Suspicion Record. Observations shall be by a supervisor who has had 60 minutes of training in the signs and symptoms of alcohol misuse and 60 minutes of

training in the signs and symptoms of controlled substance use. The supervisor or manager who has reasonable suspicion that the observed behavior or appearance of an employee is characteristic of drug use or alcohol misuse will take the employee aside to a private area, express his/her observations, and require the employee to submit to a drug and/or alcohol test in accordance with this policy.

Return-to-Duty: No driver found to be in violation of the Company drug and alcohol policy will be permitted to return-to-duty involving safety-sensitive functions until the driver has been evaluated by a Substance Abuse Professional (SAP) and completed a return to duty test. A SAP must provide written authorization to perform a return-to-duty test. All return to duty tests must be collected under direct observation.

Follow-Up: Required for any driver who violated the FMCSA drug and alcohol testing regulations. The SAP determines the number and frequency of tests. All follow-up tests must be collected under direct observation.

Failure to Cooperate

Employees who are subject to this policy are expected to comply fully with any required testing. Failure to do so (including, for example, refusing to sign consent or refusing to test, obstructing the testing process, failing to make yourself available for a required test, failing to provide an adequate sample for testing, attempting to adulterate or substitute a specimen, or in any way tampering with a required test, failure to empty pockets or follow instructions as requested by collection site personnel) will cause the driver to be immediately relieved from performing safety-sensitive functions, and will also be considered a violation of Company policy that will subject the employee to discipline, up to and including termination of employment. Any individual deemed a refusal to test is must be evaluated by a substance abuse professional and comply with requirements including return to duty and follow up testing to become a qualified commercial driver for any company. The Company also reserves the right to involve law enforcement officials for any conduct, which it believes, might be in violation of state or federal law.

Testing Procedures

Urine Specimen Collection: Specimen collections will be conducted in accordance with the procedures of 49 CFR Part 40, as amended. The collection procedures are designed to ensure the security and integrity of the specimen provided by each driver, and those procedures will strictly follow federal chain-of-custody guidelines. Moreover, every reasonable effort will be made to preserve the individual's privacy as much as possible consistent with ensuring an accurate result. Drivers will be required to empty their pockets before providing the drug test specimen.

Laboratory Analysis: As required by 49 CFR Part 40, only a laboratory certified by the Department of Health and Human Services (DHHS) will be retained by the Company to perform the analysis of the urine specimen for controlled substances. The initial screening test will be performed by immunoassay and will test for substances and at cutoff levels required by 49 CFR Part 40, as amended. All specimens identified as positive on the initial screening test will be confirmed using gas chromatography/mass spectrometry techniques at cutoff levels required by 49 CFR Part 40, as amended.

Breath Alcohol: Testing will be conducted by a qualified technician according to 49 CFR Part 40 procedures. Either a breath or saliva test by an EBT device will be used for the testing.

Medical Review

All controlled substances test results will be reviewed by a Medical Review Officer (MRO) before results are reported to the company. The MRO will attempt to contact the driver to discuss the test results before reporting positive results to the company.

Notification of Results

The company will notify the affected driver of any controlled substances test that is reported as positive by the MRO. The company will notify driver-applicants of the results of pre-employment controlled substances testing if the applicant requests that information in writing within 60 days after we notify the applicant that he/she has or has not been hired.

Reanalysis of Original Specimen

Within 72 hours of the MRO notifying the driver of a verified positive controlled substances test, an adulterated or substituted specimen, the driver may request the reanalysis of the original specimen. This is referred to as testing the split sample. Only the MRO may authorize such a reanalysis, and such a reanalysis may take place only at laboratories certified by the Department of Health and Human Services (DHHS). If the reanalysis fails to reconfirm the presence of the drug or drug metabolite, the MRO shall cancel the test.

All drivers have a right to request the reanalysis of the original specimen for which the employee will be responsible to pay.

Positive Test for Commercial Drivers

Positive Alcohol Test: A positive alcohol test is a test result of 0.02 or greater. If the result of an employee's test is between 0.02 and 0.039, the following action must be taken:

1. The employee must be removed from driving or any safety sensitive function for a minimum of 24 hours.
2. Disciplinary action may be taken up to and including termination.
3. If the result of the employee's alcohol test is 0.04 or greater the employee must be removed from safety sensitive duty and be evaluated by a SAP.

Confirmation Test: In accordance with 49 CFR, any result of an EBT test above 0.02 requires a confirmation test to verify the result. The Breath Alcohol Technician (BAT) will observe the employee for 15 minutes and then conduct the second test for confirmation.

Positive Drug Test: If the MRO releases a positive drug test result, disciplinary action may be taken up to and including termination.

Role of the Medical Review Officer (MRO): All drug test results must be reviewed by a physician designated as a Medical Review Officer (MRO). Upon the discovery of a positive drug screen, the MRO will contact the driver who tested positive before the company is notified. The MRO will make the determination if the driver has truly tested positive for a controlled substance or if the positive finding could be the result of authorized drug use.

Insufficient Sample/Shy Bladder Syndrome: A medical doctor must determine if there is a legitimate medical reason why the individual was unable to give a breath or urine sample. This determination must be made within 5 days of the attempted test.

Employee Assistance Program (EAP)/Rehabilitation: As required by law, this company will make the names and numbers of SAP services available to drivers who either test positive or request assistance in dealing with a drug or alcohol problem. In addition to the EAP/SAP available to all employees, all drivers are provided a handbook that contains information on the effects of alcohol misuse and controlled substance use on health, work and personal life as well as signs and symptoms of a problem. The company is not required to pay for any rehabilitation.

Confidentiality

Records required under this policy, including test results, will be maintained in a secure location with controlled access. Each driver, shall upon written request, be entitled to receive copies of his/her own records, and to have copies of his/her records made available to any subsequent employer. Information may also be disclosed to the relevant state or federal agencies, or in connection with judicial, administrative or related proceedings (e.g., grievances and arbitration) initiated by or behalf of the driver. Test results will only be released to the employee, the employer or the employer representative entrusted with the responsibility of the company drug and alcohol program. Any other release of information is done only with a driver's written consent. The company will comply with the requirement to provide accurate, timely, drug and alcohol records to the next employer if and when a former employee provides a written request for his records.

Evaluation and Referral

DOT regulations require that any driver who violates the alcohol and controlled substances rules of 49 CFR Part 382 be advised of available evaluation resources and be evaluated by a Substance Abuse Professional. The driver must complete an appropriate education and/or treatment program before being eligible to return-to-safety sensitive duty.

Before returning to performing safety-sensitive functions for any DOT employer a driver must be tested for controlled substances with a verified negative controlled substances test result and/or alcohol with a test result less than 0.02 alcohol concentration. The determination to take this test can only be made by a properly credentialed Substance Abuse Professional (SAP). The driver will be subject to follow-up testing as mandated by a SAP. The DOT regulations require a minimum of at least six tests in the first 12 months of returning to duty, but follow-up testing

may continue for up to five years, determined at the discretion of the SAP. The Department of Transportation requires all return to duty and follow up drug tests to be collected under direct observation.

Consequences

Under normal circumstances, employees violating this policy or federal regulations will be suspended from performing any safety-sensitive functions with a commercial motor vehicle as defined by this policy and will be subject to disciplinary action.

This Company reserves the right to take disciplinary action up to and including termination for violation of the drug and alcohol policy when and where we deem it appropriate.

Identity of contact person

For questions about this policy please contact:

Marco Lopez
Safety Director
347-219-6314

Patricia Hinds
HR Coordinator
516-679-9797

1/1/2018

Patricia Messina
President