

# MCD FL Post Injury Drug Testing – Implementation Guide

To make the implementation of this mandatory program, please follow the six steps below.

1. Please read the enclosed “**Post-Injury Drug Testing Program Application**” and ensure all information is accurate. There is a section where you can designate the contact person (besides the owner) allowed to review the drug test results. Test results are strictly confidential and should be treated as such by all contacts. Please hand-write additional contact information or any changes that need to be made to the general information section. Sign this form and fax it back to your insurance company.
2. **All** employees must sign the “**Consent for Employee Drug Testing**” form. I have enclosed both Spanish and English. This form should be kept in each employee’s personnel file and exceptions to signing this form could jeopardize the entire program. All employees, new and existing, must sign this form. If an employee declines to sign the form, you should ask that employee to find work elsewhere as your company has a post-accident drug-testing policy that states all employees injured on the job will now be tested.
3. Attach a copy of the “**Important Notice to all Employees**” form with **each** employee’s next paycheck. This form notifies your employee that drug testing will begin immediately for all employees who feel it is necessary to file a workers’ compensation claim due to a work related accident. It also states workers’ compensation benefits could be limited or forfeited if a positive test comes back or if the sample has been tampered with. Spanish and English versions are enclosed.
4. A laminated “**Claims Reporting Procedures**” card has been enclosed that should be posted in each restaurant. Each card illustrates necessary information needed when calling in a claim as well as the medical providers in the area that should be used. The cards have been developed based upon the county each restaurant is in. Please make sure you place the proper card in the proper restaurant location. Only the medical providers on the card should be utilized, as they will be performing the drug test as well as provide any medical care to the injured employee.
5. Place a package of “**Chain of Custody**” forms in each of your restaurants. There should be an address printed at the top of each form to identify which package goes in each restaurant. It is **very important** to train your managers to check the box marked “post accident” as to the reason for the test and the box marked “7683 HRS 10 DRUG PANEL” as far as what drug tests are to be performed. These two areas can be found in the blue section of the form.
6. Hang the enclosed “**Post-Accident Drug Testing**” posters up in the employee break room in each of your restaurants.

If you have any additional questions concerning implementation, testing procedures, pending results, collection sites, reordering drug screen forms, and/or ordering forms for locations not included in the enclosed packet, please call Total Compliance Network (800) 881-4826 and ask for Carole Izzi.