Manager’s Drug and Alcohol Checklist

NOTE: This is not a complete list of signs and symptoms

Employee’s Name: ___________________________ Date of review: ____________
Employee’s ID Number: _______________________

**BEHAVIOR**
- Stumbling, Unsteady Gait
- Drowsy, Sleepy, Lethargic
- Agitated, Anxious, Restless
- Hostile, Belligerent
- Irritable, Moody
- Depressed, Withdrawn
- Unresponsive, Distracted
- Clumsy, Uncoordinated
- Tremors, Shakes
- Persistent runny nose
- Suspicious, paranoid
- Hyperactive, Fidgety
- Frequent use of minis, mouthwash, breath sprays, eye drops
- Inappropriate, uninhibited behavior
- Forgetful, slow responses
- Asks to have things repeated
- Cursing

**APPEARANCE**
- Flushed or pale complexion
- Sweaty for no reason
- Bloodshot eyes
- Cold, Clammy
- Bloodshot eyes
- Tearing, Watery Eyes
- Enlarged pupils
- Pinpoint pupils
- Unfocused, blank stare
- Messy clothing
- Dirty, messy appearance

**SPEECH**
- Slurred, thick, slow
- Not understandable
- Exaggerated enunciation
- Loud, boisterous
- Rapid, pressured
- Excessively talkative
- Silly, nonsensical
- Inappropriate, including

**ODOR**
- Smell of alcohol on breath
- Smell of marijuana on clothes

*(Suggested Statement)* Based on my observations, I am exercising my responsibility under UPRR Policy and/or FRA Regulations to require a reasonable suspicion testing. Failure to submit to this test will be considered a refusal, which could lead to decertification and/or dismissal. You must stay with me or the collector during the entire testing process. Don’t eat, drink or put anything in your mouth.

**Coworker report statement:** It has been brought to my attention that you might be under the influence of alcohol or drugs and my observations support this. I would like to give you the opportunity to admit any substance you might be under the influence of; but if you don’t I will be calling for a test. If you qualify for a coworker report you will be afforded the opportunity to work with EAP to return to work, without discipline.

Reviewing Manager’s name: ___________________________

Phone Numbers:
Midlands Testing Services (call for collector): 402-983-9590
Hot Line DAT: 800-877-0565
EAP: 800-779-1212