



Back to work! Back to play! Back to life!

Random Drug Testing - Clinic Account Setup Form

To establish an account with our clinic, please **fax or email this document to**

Fax: (651) 224-8265 – Attn: Jena Chuba

Email: info@tcohr.com

Business Name:

Contact Name:

Telephone:

(You will receive your test results and random notification either by FAX or email)

FAX:

Email:

Billing Address:

City, State, Zip Code:

Charges will be paid by: Driver Bill Company

Please list the names and either Social Security or Federal Tax ID # for each person who needs to be in the FMCSA Random Consortium for DOT Drug & Alcohol Testing:

First and Last Name: SS#:

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For specific instructions on the DOT FMCSA Random Drug Testing Program and other services, please see the following page.

South Metro Clinic
2520 Pilot Knob Road, Suite 250
Mendota Heights, MN 55120
(651) 224-8264 FAX (651) 224-8265

www.tcohr.com

North Metro Clinic
10190 Baltimore St. N.E., Suite 100
Blaine, MN 55449
(763) 780-8264 FAX (763) 780-8274



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Your new Account

The clinics of Twin Cities Occupational Health and Rehabilitation (TCOHR) are available to perform the following services for employers and owner/operators like you.

Normally when we create an account, we will setup the following protocols:

- Initial drug testing and alcohol testing (**this is required before being admitted into the Random pool for quarterly drug testing**)
- Random drug / alcohol testing
- Post Accident and Reasonable Suspicion drug and alcohol testing
- DOT Physicals (new CDL medical card and recertification)

DOT and Random Drug Testing

TCOHR partners with the medical review officer (MRO) called Advanced Drug Testing (ADT). ADT will fax or email you:

- All drug test results
- Proof of being in a Random FMCSA Pool
- Notice if you are selected for drug or drug and alcohol testing (this will come the 1st week of each quarter)

If you are sent a notice that you (or any employees) have been randomly selected, sometime during the month, come in with your photo ID and tell the clinic staff if you need a Random Drug Test Only or Random Drug and Alcohol Testing. **SINCE OUR CLINIC DOES NOT KNOW WHAT YOU HAVE BEEN CHOSEN FOR, YOU NEED TO TELL US.**

TCOHR will send you an invoice. If you want the driver to pay themselves (instead of billing you), please check the box on the Clinic Account Setup Form.

DOT Physical Exams (CDL)

Scheduled DOT Physicals will make it less likely you will need to wait long. Call either clinic below to schedule.

If you (or an employee) have a medical condition (blood pressure, sleep disorder, heart condition, diabetes, etc) please be sure to bring your doctors release showing that you are under their care and that your condition is well-managed. This will lessen the chance for return visits.

Pricing for Services

Urine Drug Test: \$60 (collect, lab and MRO)
Random Annual Fee: Contact TCOHR for fee

Breath Alcohol Test: \$25
DOT Physical: \$80

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