

Specimen Result Certificate

ID Number: 7902266610

Report printed on

1/29/2020 12:14:30 PM

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Attention:

Roy Salmon

Roy Salmon Trucking

9737 Eustice Rd

Randallstown, MD 21133

Collection Site:

2826 - Concentra Medical Center - Arbutus

Verification Date

1/28/2020 08:51 AM

Medical Review Officer:

Dr. Stephen Kracht

8140 Ward Parkway Ste 275

Kansas City, MO 64114

888-382-2281

Donor Name: Torsell, Lamont L.

Date Of Test: 1/25/2020

ID Number: 7902266610

Donor SSN: T624488488866

Donor ID: T624488488866

Reason for Test: Pre-employment

Laboratory: Quest Diagnostics

Regulation:

DOT-FMCSA

Specimen Type:

Urine

Drugs Tested:

Drug Name	Result	Laboratory Screening Cutoff *	Laboratory Confirmation Cutoff *	Drug Name	Result	Laboratory Screening Cutoff *	Laboratory Confirmation Cutoff *
Marijuana	Negative	50	15	Hydrocodone/Hydromorphone	Negative	300	100
Cocaine	Negative	150	100	Oxycodone/Oxymorphone	Negative	100	100
Amphetamines	Negative	500	250	PCP	Negative	25	25
Opiates	Negative	2000	2000	MDMA/MDA	Negative	500	250
6-Monoacetylmorphine	Negative	10	10				

Final Result Disposition: **Negative**

CCF Record Date and Data Entry Operator : 1/28/2020 MM/DD/YYYY - Dr. Stephen Kracht

TO BE COMPLETED BY THE MEDICAL REVIEW OFFICER

I have reviewed the laboratory results for the specimen identified by this form in accordance with applicable Federal requirements. My determination/verification is:

☒ Negative
 ☐ Dilute
 ☐ Positive
 ☐ Test Cancelled
 ☐ Adulterated
 ☐ Refusal to test because
 ☐ Substituted

REMARKS:

Dr. Stephen Kracht

Stephen J. Kracht D.O.

1/28/2020 08:51 AM

(PRINT) Medical Review Officer's Name

Signature of Medical Review Officer

Date (Mo./Day/Yr.)

* Represents laboratory screening and confirmation values.