

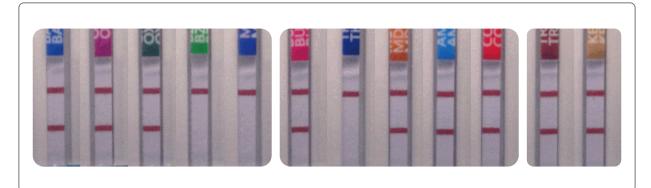
T-Cup® Drug Test Screening Report

Operator ID:		Test Date:		Test T	ime:		
Donor ID:		Email Address:					
Testing Site:					-		
Specimen Typ	e: 🗹 Urine	☐ Saliva					
Reason for Te	st:						
✓ Pre Employment ☐ Random ☐ Reasonable suspicion/cause							
☐ Post Accident ☐ Return To Duty ☐ Follow Up							
Other: _					_		
					_		
Product Inf	formation						
Product ID: _		Prod	uct Lot:				
	:: *Temperature in Range: ☑ Yes ☐ No						
expiration Dat	te:		ірсіасы				
* Disclaimer: Alcohol Saliva Test Strip	, Adulteration and Temp	erature Strips must be read by				in product insert	
F Disclaimer: Alcohol Saliva Test Strip accordingly after specin	, Adulteration and Temp nen is collected.					in product insert	
F Disclaimer: Alcohol Saliva Test Strip accordingly after specin	, Adulteration and Temponen is collected.		y direct optica		n specific instruction	in product insert	
Poisclaimer: Alcohol Saliva Test Strip Cccordingly after specin	, Adulteration and Temponen is collected. Normal	erature Strips must be read by	y direct optica	al observation based o	n specific instruction		
FDisclaimer: Alcohol Saliva Test Strip accordingly after specin Fest Result	Normal Not Tested	erature Strips must be read by Strip	y direct optica	al observation based on Cutoff (ng/ml)	n specific instruction Control Line	Result	
Disclaimer: Icohol Saliva Test Strip ccordingly after specin Test Result Dxidant	Normal Not Tested Normal	erature Strips must be read by Strip Strip 1	y direct optical Drug BAR	Cutoff (ng/ml)	n specific instruction Control Line Valid	Result Negative	
FDisclaimer: Alcohol Saliva Test Strip Alcohol Saliva Test Strip Alcordingly after specin Fest Result Dxidant	Normal Not Tested	Strip Strip Strip Strip 2	Drug BAR OPI	Cutoff (ng/ml) 300 1,000	Control Line Valid Valid	Result Negative Negative	
FDisclaimer: Alcohol Saliva Test Strip Alcohol Saliva Test Strip Alcordingly after specin Fest Result Dxidant	Normal Not Tested Not Tested Not Tested	Strip Strip 1 Strip 2 Strip 3	Drug BAR OPI OXY	Cutoff (ng/ml) 300 1,000 300	Control Line Valid Valid Valid	Result Negative Negative Negative Non-Negative	
FDisclaimer: Alcohol Saliva Test Strip Alcoh	, Adulteration and Temponen is collected. Normal Abnormal Not Tested Abnormal Abnormal	Strip Strip 1 Strip 2 Strip 3 Strip 4	Drug BAR OPI OXY BZO	Cutoff (ng/ml) 300 1,000 300 300	Control Line Valid Valid Valid Valid Valid	Result Negative Negative Negative	
FDisclaimer: Alcohol Saliva Test Strip accordingly after specin Fest Result Dxidant Specific Gravity	Normal Not Tested Normal Not Tested Not Tested Not Tested Not Tested	Strip Strip Strip 1 Strip 2 Strip 3 Strip 4 Strip 5	Drug BAR OPI OXY BZO MET	Cutoff (ng/ml) 300 1,000 300 1,000	Control Line Valid Valid Valid Valid Valid Valid Valid	Result Negative Negative Negative Non-Negative Non-Negative	
FDisclaimer: Alcohol Saliva Test Strip Accordingly after specin Fest Result Dxidant Specific Gravity	Normal Not Tested Normal Not Tested Not Tested Not Tested Abnormal	Strip Strip 1 Strip 2 Strip 3 Strip 4 Strip 5 Strip 6	Drug BAR OPI OXY BZO MET BUP	Cutoff (ng/ml) 300 1,000 300 1,000 1,000 1,000	Control Line Valid Valid Valid Valid Valid Valid Valid Valid Valid	Result Negative Negative Negative Non-Negative Non-Negative Negative	
FDisclaimer: Alcohol Saliva Test Strip accordingly after specin Test Result Dxidant Specific Gravity	Normal Not Tested Normal Not Tested Normal Not Tested Normal Not Tested Normal Abnormal Not Tested Normal Abnormal Abnormal Abnormal Abnormal Abnormal Abnormal Abnormal	Strip Strip 1 Strip 2 Strip 3 Strip 4 Strip 5 Strip 5 Strip 6 Strip 7	Drug BAR OPI OXY BZO MET BUP THC	Cutoff (ng/ml) 300 1,000 300 1,000 10 50	Control Line Valid	Result Negative Negative Negative Non-Negative Non-Negative Negative Non-Negative	
*Disclaimer:	Normal Not Tested Normal Abnormal Not Tested Normal Not Tested Normal Not Tested	Strip Strip 1 Strip 2 Strip 3 Strip 4 Strip 5 Strip 5 Strip 6 Strip 7 Strip 8	Drug BAR OPI OXY BZO MET BUP THC MDMA	Cutoff (ng/ml) 300 1,000 300 1,000 10 50 500	Control Line Valid	Result Negative Negative Negative Non-Negative Non-Negative Non-Negative Negative	
FDisclaimer: Alcohol Saliva Test Strip accordingly after specin Test Result Dxidant Specific Gravity	Normal Not Tested Normal Not Tested Normal Not Tested Normal Not Tested Normal Abnormal Not Tested Normal Abnormal Abnormal Abnormal Abnormal Abnormal Abnormal Abnormal	Strip Strip 1 Strip 2 Strip 3 Strip 4 Strip 5 Strip 6 Strip 7 Strip 8 Strip 9	Drug BAR OPI OXY BZO MET BUP THC MDMA AMP	Cutoff (ng/ml) 300 1,000 300 1,000 10 50 500 1,000	Control Line Valid	Result Negative Negative Negative Non-Negative Non-Negative Negative Non-Negative Negative Negative	

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T-Cup® Drug Test Screening Report

Test Image



Signature

Donor Signature:	Operator Signature:
Date:	Date: