@screen Specimen Result Certificate

ID Number: 7936697003			Repor	Report printed on 6/25/202		4 1:34:23 AM		age 1 of 1
Attention: Paul Parks PA/MA Center (ESCREEN CO 10200 Crow Canyon Rd Castro Valley, CA 94552 Collection Site: 9903 - Concentra Medical Ce 3811 COMMONS AVE NE ALBUQUERQUE, NM, 87109	nter - Sin	ŕ	N C 1 E	Verification Date Medical Review Dr. Brian N. Hei 51 Leon Ave. Eunice, LA 7053	Officer: nen	/2024 12:	51 PM	
Donor Name: Miller, Ber Date Of Test: 6/14/2024 ID Number: 79366970 Laboratory: ALERE				Dor Rea Reg	nor SSN: nor ID: ason for Test: gulation: ecimen Type:	NM02 Pre-er	0-4021 8416601 mployment FMCSA	
Marijuana Metabolite Ne Cocaine Metabolite Ne Amphetamine/Methamphetamine Ne Codeine/Morphine Ne	egative 56 egative 56 egative 26 egative 26	aboratory creening utoff * 0 ng/ml 50 ng/ml 00 ng/ml 000 ng/ml 0 ng/ml	Laboratory Confirmation Cutoff * 15 ng/ml 100 ng/ml 250 ng/ml 2000 ng/ml 10 ng/ml	Drug Name Hydrocodone/Hy Oxycodone/Oxyr Phencyclidine MDMA/MDA		Result Negative Negative Negative Negative	Laboratory Screening Cutoff * 300 ng/ml 100 ng/ml 25 ng/ml 500 ng/ml	Laboratory Confirmation Cutoff * 100 ng/ml 100 ng/ml 25 ng/ml 250 ng/ml
Final Result Disposition: Negative CCF Record Date and Data Entry Operator: 6/14/2024 MM/DD/YYYY - Hassien, Sara								
TO BE COMPLETED BY THE MEDICAL REVIEW OFFICER In accordance with applicable federal requirements, my verification is: V Negative Positive Test Cancelled Adulterated Substituted REMARKS:								
Dr. Brian N. Heinen (PRINT) Medical Review Officer's I	Name		ron N Heine f Medical Revie		15/2024 12:51 l	РМ		_

 $^{^{\}star}$ Represents laboratory screening and confirmation values.