



Specimen Result Certificate

ID Number: 7937626506

Report printed on 6/25/2024 1:31:29 AM

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Attention:
Paul Parks
PA/MA Center (ESCREEN COLLECTION)
10200 Crow Canyon Rd
Castro Valley, CA 94552

Verification Date 6/15/2024 12:03 PM

Medical Review Officer:
Dr. Brian N. Heinen
151 Leon Ave.
Eunice, LA 70535
888-382-2281

Collection Site:
45927 - Concentra Medical Center - Pleasanton
5635 W Las Positas Blvd
Pleasanton, CA, 94588

Donor Name: Lewis, Jason
Date Of Test: 6/14/2024
ID Number: 7937626506

Donor SSN: 428-63-8838
Donor ID: CAF1722520
Reason for Test: Pre-employment

Laboratory: ALERE

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 Metabolite	Negative	50 ng/ml	15 ng/ml	Hydrocodone/Hydromorphone	Negative	300 ng/ml	100 ng/ml
Cocaine Metabolite	Negative	150 ng/ml	100 ng/ml	Oxycodone/Oxymorphone	Negative	100 ng/ml	100 ng/ml
Amphetamine/Methamphetamine	Negative	500 ng/ml	250 ng/ml	Phencyclidine	Negative	25 ng/ml	25 ng/ml
Codeine/Morphine	Negative	2000 ng/ml	2000 ng/ml	MDMA/MDA	Negative	500 ng/ml	250 ng/ml
6-Acetylmorphine	Negative	10 ng/ml	10 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:

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

REMARKS:

Dr. Brian N. Heinen

6/15/2024 12:03 PM

(PRINT) Medical Review Officer's Name

Signature of Medical Review Officer

Date (Mo./Day/Yr.)

* Represents laboratory screening and confirmation values.

† Represents class (Sub-Class Abbreviation)