



# Specimen Result Certificate

ID Number: 7905797581

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Attention:  
Roy Salmon  
Roy Salmon Trucking  
9737 Eustice Rd  
Randallstown, MD 21133

Verification Date 9/26/2020 02:35 PM

Medical Review Officer:  
Dr. Stephen Kracht  
8140 Ward Parkway Ste 275  
Kansas City, MO 64114  
888-382-2281

Collection Site:  
2826 - Concentra Medical Center - Arbutus

Donor Name: Forbes, Albert  
Date Of Test: 9/25/2020  
ID Number: 7905797581

Donor SSN: 215-06-7634  
Donor ID: 32150003  
Reason for Test: Pre-employment

Laboratory: Quest Diagnostics

Regulation: DOT-FMCSA  
Specimen Type: Urine

## Drugs Tested:

Drug Name	Result	Laboratory	Laboratory	Drug Name	Result	Laboratory	Laboratory
		Screening	Confirmation			Screening	Confirmation
		Cutoff *	Cutoff *			Cutoff *	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 : 9/25/2020 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 ☐ Positive ☐ Test Cancelled ☐ Refusal to test because  
☐ Dilute ☐ Adulterated ☐ Substituted

REMARKS:

Dr. Stephen Kracht

9/26/2020 02:35 PM

(PRINT) Medical Review Officer's Name

Signature of Medical Review Officer

Date (Mo./Day/Yr.)

\* Represents laboratory screening and confirmation values.