

Drug Detection Report

THE NEWSLETTER ON DRUG TESTING IN THE WORKPLACE

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CAPITOL HILL

Genetic Testing

Senate Panel Unanimously Approves Bill Enjoining Employers & Insurers

Employers and insurance companies would be forbidden to obtain genetic information on prospective workers or clients under a bill unanimously approved by a Senate committee May 21.

The Senate Committee on Health, Education, Labor and Pensions (HELP) approved the Genetics Non-Discrimination Act (S. 1053) by voice vote, sending it to the full Senate for consideration.

“No one should be discriminated against because of their genetic makeup,” HELP Committee Chairman Judd Gregg (R-N.H.) told *DDR*.

When asked if employers have any right to screen out job applicants with genetic predispositions to substance abuse, mental illness or other genetic disorders, Gregg said, “They don’t have any right to that information. That’s private information ... and it would be discrimination, in my opinion, against an employee to demand that that employee turn over their genetic information.”

(Continued on p. 82)

SLANTS & TRENDS

EMPLOYERS WHO ARE NOT REQUIRED to conduct drug tests by the DOT could get a federal tax break for voluntary testing under legislation proposed by the Substance Abuse Program Administrators Association (SAPAA).

The trade association launched a lobbying campaign for the break May 22 at its annual conference in Irving, Texas. It has already proposed legislative language to Sen. Orin Hatch (R-Utah) and Rep. W.J. “Billy” Tauzin (R-La.).

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A rival trade group, the Drug and Alcohol Testing Industry Association (DATIA), launched a tax break campaign of its own four years ago (*DDR*, May 20, 1999, p. 77), but it failed to attract the necessary support, despite White House backing. Does this mean the two groups will now join forces?

“*No, I don’t believe* you can assume that.” SAPAA President Ira Jane Hurst tells *DDR*. “Their legislation was essentially very different, and I don’t believe they got anywhere with it. We have never been contacted by them. This is a completely new effort.”

DATIA had no comment by press time, but *DDR* was headed to its annual conference in Nashville May 29-31. Stay tuned. *Contacts*: Ira Jane Hurst, president, SAPAA, (337) 837-1616, e-mail: ijh@irajane.com; Laura Shelton, executive director, DATIA, (703) 548-0901, ishelton@wpa.org.



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Genetic Discrimination (*Cont. from p. 81*)

S. 1053 would:

- Bar employers, employment agencies, labor unions and training programs from using predictive genetic information or genetic services to make hiring, compensation or other personnel decisions;
- Bar insurance companies from using genetic information about an individual, or about any of his or her family members, to grant or deny health coverage or to adjust premiums;
- Bar employers and insurers from asking for such information and from asking or requiring people to take genetic tests (The only allowable exceptions would be for treatment purposes or for testing “to monitor the adverse effects of hazardous workplace exposures.”);
- Bar disclosure of genetic information by any employer or insurer for personnel, underwriting or other unauthorized purposes; and
- Allow victims of genetic discrimination to sue for damages, just as they could under existing laws against racial and disabilities discrimination. Anyone denied enrollment in a group health plan would be entitled to retroactive coverage.

Democrats Are Mostly Satisfied

Sen. Edward Kennedy (Mass.), the ranking Democrat on the HELP Committee, endorsed the bipartisan bill, saying, “This is really key in protecting people in employment and insurance.

Alluding to last year’s out-of-court settlement involving alleged discrimination by Burlington Northern Santa Fe Railroad (*DDR*, June 13, p. 97), Kennedy said genetic information “should only be used by patients and their doctors to make the best health decisions they can.”

Sen. Christopher Dodd (Conn.), another Democrat who voted for the bill in committee, said he still wants to see stronger privacy language before he will vote for it on the floor.

Genetic discrimination has long been a bugaboo for Democrats and their union allies. Senate Minority Leader Tom Daschle (D-S.D.) first introduced legislation in 1997.

President Bush seems to favor such legislation. In a speech last year, he said, “Genetic information should be an opportunity to prevent and treat disease, not an excuse for discrimination.”

Gregg showed *DDR* a May 20 letter from Health and Human Services (HHS) Secretary Tommy Thompson in which he expresses “the administration’s strong support” for S. 1053.

The U.S. Chamber of Commerce has said the bill is unnecessary because there is little hard evidence of genetic discrimination, but its protests have been mild.

“This is an issue that impacts every person in America. Everyone has genes.”

— Sen. Judd Gregg (R-N.H.)

“My understanding of the Chamber position was that they weren’t too excited about it, but that they weren’t going to be aggressively opposed to it,” Gregg told reporters after the committee vote.

“The sooner we can set standards that people can work with, the better off we’re going to be,” he explained. “I just think it’s important on this issue to get out early, get the standards set, so everybody knows what the rules are as they go forward.”

House Version Is Tougher

In the House, Rep. Louise McIntosh Slaughter (D-N.Y.) is once again sponsoring a similar bill (H.R. 1910) which would give victims of discrimination new rights to sue. The Senate bill would rely on existing remedies: Employers could be sued under civil law and hauled before the federal Equal Employment Opportunity Commission.

Health insurers could also be sued, but those covered by a federal benefits law (most large plans are) could not be sued in state courts. Victims could file federal suits for the costs of services denied, plus new fines established by the bill.

In general, the bill would give genetic information the same protections as those afforded by the Health Insurance Portability and Accountability Act of 1996, which went into effect last month (*DDR*, May 15, pp. 73-74). Violators face jail time and fines of up to \$250,000. Privacy provisions would be enforced by the HHS Office of Civil Rights. Violators would be subject to civil penalties and criminal prosecution.

Gregg said he hopes the Senate bill will inspire the House to reach a quick compromise.

Contacts: Sen. Judd Gregg, (202) 224-6770; Sen. Edward Kennedy, (202) 224-0767; Web site: <http://labor.senate.gov>.

CAPITOL HILL

*'Narco-Terrorism'***Sen. Biden Faults Bush Administration On Efforts Against Drug Traffickers**

Federal law enforcement agencies are so fixated on catching international terrorists that they have dropped their guard against international drug traffickers, says Sen. Joseph Biden (D-Del.).

"We have to be able to walk and chew gum at the same time!" Biden declared at a May 20 Judiciary Committee hearing on "narco-terrorism." He was addressing a panel of witnesses from the Drug Enforcement Administration (DEA), the FBI, the State Department and the Bureau of Immigration and Customs Enforcement (renamed and now part of the Department of Homeland Security).

Biden pointed to Afghanistan, saying its opium crop is once again feeding the heroin trade because the United States has done little to suppress cultivation since defeating the Taliban.

"You are in an almost impossible position," Biden told the officials, because the Bush administration has failed to give their agencies the resources they need.

"I hope you are all willing to accept more money," he joked, "and you won't give us any malarkey about how you can do more with less. Let's have some candor."

Sen. Hatch Agrees

Judiciary Committee Chairman Orin Hatch (R-Utah) agreed, saying, "If we really want to win the war against terrorism, we need to continue and expand our commitment to cutting off all sources of terrorism funding, including drug trafficking."

In response, each official said his or her agency takes its anti-trafficking responsibilities very seriously — in no small part because of the linkages between traffickers and terrorists in Asia, the Middle East and Latin America.

DEA intelligence chief Steven Casteel said 14 of the 36 foreign terrorist organizations on the State Department's watch list "have some degree of connection with drug activities."

Raphael Perl of the Congressional Research Service (CRS) told the panel that "at least four of the seven states on the State Department's list of countries supporting terrorism have had at least some history of condoning or supporting drug traf-

ficking: Syria, Iran, North Korea and Cuba. Moreover, indications today strongly suggest that the government of North Korea is involved in large-scale drug production and trafficking of heroin and methamphetamine as a matter of state policy."

A North Korean defector would confirm that the next day, testifying before a Senate subcommittee while wearing a black hood and sitting behind a screen. He said the policy dates back to 1997, and that it provides the North Korean government with badly needed foreign currency.

"I hope you are all willing to accept more money, and you won't give us any malarkey about how you can do more with less."

— Sen. Joseph Biden

Casteel assured the committee that "agencies throughout the United States and internationally [are] working together as a force-multiplier in an effort to dismantle narco-terrorist organizations."

Contacts: Sen. Joseph Biden, (202) 224-5042; Sen. Orin Hatch, (202) 224-5225, Web site: <http://judiciary.senate.gov>; Steven Casteel, assistant administrator for intelligence, DEA, (202) 307-1000; Raphael Perl, CRS, (202) 707-5700.

*Children's Medication***House Clears School Drug Bill With Prohibition on Coercion**

By a vote of 425-1, the House approved the Child Medication Safety Act (H.R. 1170) May 21. If approved by the Senate and signed into law, it would virtually forbid school officials to require hyperactive children to take Ritalin or Adderall.

Sponsors insist that the latest version of H.R. 1170 "carefully protects appropriate communication between parents and school personnel." Many parents, school officials and mental health professionals have worried that the bill would chill such communication by intimidating teachers and school administrators into silence (*DDR*, May 15, p. 78).

"I recognize the difficulty that children with attention or behavior problems bring to a school, but no one should react by automatically assuming that the child should be on drugs," says Rep. John Boehner (R-Ohio), chairman of the House Committee on Education and the Workforce. He said the decision should always be left to a doctor.

Contact: Rep. Boehner, House Committee on Education and the Workforce, (202) 225-4527.

IN THE SCHOOLS

Research

Pro-Testing Forces Counterattack In Response to Michigan Study

Advocates of student drug testing found themselves on the defensive this month after a University of Michigan study suggested that testing may be ineffective.

“The study was preliminary,” says David Evans, executive director of the Drug-Free Schools Coalition (DFSC), a New Jersey-based organization of school drug counselors, administrators, prevention specialists and parents.

“The National Institute on Drug Abuse [NIDA] was involved in the study,” he explained, “and they stated that ‘it would take several more such studies before any certainty about the efficacy of testing can be established.’”

Evans told *DDR* the study report was “dripping in bias. ... It clearly is a report that has a prejudice against student drug testing.” He also faulted the study itself, for failing to differentiate between random testing and reasonable-suspicion testing, between schools with different kinds of anti-drug programs, and between different pools of students.

“There is no doubt in my mind that random drug testing ... done according to Substance Abuse and Mental Health Services Administration standards, where the kid gets into treatment or counseling after that, and where you test a significant number of the students, reduces drug use in the school.”

Study Was Bona Fide

The Michigan study, first reported in last month’s *Journal of School Health*, was funded by the NIDA and the Robert Wood Johnson Foundation, which favors testing. The findings suggest that drug testing in the 722 middle and high schools that were studied had no deterrent effect.

The researchers found that 37 percent of the seniors in schools with drug testing admitted smoking marijuana within the past year, as opposed to 36 percent in schools without testing.

Twenty-one percent of students in schools with testing admitted using other illegal drugs, as opposed to 19 percent in schools without testing. Researchers found similar patterns among middle school students.

The differences are not statistically significant, and that prompted researcher Lloyd Johnston to say testing has no effect because it “doesn’t win the hearts and minds of children” and convince them that drug use is dangerous.

The findings went virtually unnoticed until May 17, when *The New York Times* wrote them up. Evans, who is personally involved in a New Jersey school testing case (*DDR*, March 6, pp. 33-34), reacted the next day with an e-mail message to journalists: “Let me remind you that there are three other recent studies that show that testing works.” He cited studies conducted in Indiana, New Jersey and Oregon that all showed declining usage.

Other critics said the urine tests conducted by most schools are so sloppy and subject to cheating that cause-and-effect statistics are meaningless.

The Michigan team found that only 18 percent of U.S. schools did any kind of screening from 1998 through 2001. Most were high schools, and most targeted students who were already suspected of drug use.

Contacts: David Evans, DFSC, (908) 284-5080; Lloyd Johnston, University of Michigan, (734) 763-5043, e-mail: lloydj@umich.edu.

School Testing in the Courts

The U.S. Supreme Court has consistently ruled that schools may test students for drugs and alcohol, reasoning that the need to control substance abuse outweighs privacy rights. In 1995, the high court approved testing of student athletes. Last year, the court upheld testing for any student involved in extracurricular activities.

“That was a reasonable thing for the school system to try,” Justice Stephen Breyer told students at a Washington, D.C., high school May 16. “I’ve seen enough people really ruined by this stuff.” Breyer was fielding questions from the students as part of an educational series televised by C-SPAN.

Since last year’s ruling, Breyer explained, a student “can now say to his [drug-using] friends, ‘Well, I want to go out for sports next year. Well, I want to join the debate team. Well, I want to be on the newspaper, so you see I can’t.’”

It was Breyer who cast the deciding vote last year, abandoning his usual liberal allies to vote with the conservatives (*DDR*, July 11, 2002, p. 105). The decision was 5-4.

CAPITOL HILL

Drug Policy

House GOP Would Strip Money From 'Medical Marijuana' States

The federal-state showdown over the medical use of marijuana heated up last week when House Republicans proposed to deny federal drug-enforcement funds to state and local police departments wherever the practice has been legalized.

Liberal opponents say the GOP plan could divert more than \$11 million per year from state and local police in "high-intensity" drug trafficking areas. The money would go to federal drug enforcement efforts in those areas instead.

The Bush administration insists that there is no bona fide medical use for marijuana, and federal law does not recognize any, but nine states disagree.

Maryland became the ninth on May 22 when Gov. Robert Ehrlich (R) signed the nation's latest medical marijuana bill into law. The other states are Alaska, California, Colorado, Hawaii, Maine, Nevada, Oregon and Washington.

Drug 'Czar' is a Hostage

But the administration and its GOP allies in the House want to fight back by attaching anti-pot riders to the legislation (H.R. 2086) that will reauthorize the White House Office of National Drug Control Policy (ONDCP) for the next five years. The "drug czar" who heads that office (currently John Walters) directs all federal anti-drug efforts.

The Republicans also want to include language in the reauthorization bill that would specifically allow the office to sponsor a \$1 billion anti-drug advertising campaign.

"One of the duties of the drug czar is to oppose efforts to legalize drugs," says ONDCP spokesman Tom Riley. "There's a concern in Congress that marijuana is more harmful than most people perceive. They want to make sure this agency keeps a focus on that."

But marijuana advocates and their Democratic allies in the House (led by Henry Waxman of California) want language that would *forbid* ONDCP to run ads expressly advocating support for or opposition to any candidate or ballot resolution.

Steve Fox of the Marijuana Policy Project (MPP) argues that the proposed GOP language

"leaves them free to run ads saying medical marijuana is a lie and a ploy to legalize marijuana for all purposes." Another group called the Drug Policy Alliance (DPA) also opposes the GOP plan.

Walters has spoken out against medical marijuana in nationwide appearances, and Riley says ONDCP wants "as much flexibility as possible" to use other tactics against it, but he also says the office is not planning any issue-oriented ads.

As for the proposed money transfer, Rep. Mark Souder (R-Ind.) argues that if state and local police are prevented from cracking down on pot by state law, then federal agents must step in. Souder chairs the House Government Reform Subcommittee on Criminal Justice, Drug Policy and Human Resources, which has jurisdiction.

Contacts: John Walters, ONDCP, (202) 395-6648, Web site: www.whitehousedrugpolicy.gov; Rep. Henry Waxman, (202) 225-5051; Rep. Mark Souder, (202) 225-2577; Steve Fox, MPP, (202) 462-5747, Web: www.mpp.org; Bill Piper, DPA, (212) 613-8026, Web: www.drugpolicy.org.

IN THE STATES

California

Federal Judge Denies New Trial For Medical Marijuana Advocate

Medical marijuana crusader Ed Rosenthal is not entitled to a new trial following his conviction earlier this year for growing the weed, says Federal District Court Judge Charles Breyer.

As a result, Rosenthal could be sentenced to 85 years in prison when he is sentenced June 4. Federal officials have prosecuted him despite California's 1996 law allowing medical marijuana and authorization from the City of Oakland (*DDR*, March 6, p. 35-36). The jury never heard those facts at trial. Instead, they heard Rosenthal described as a major drug supplier. Afterward, five jurors petitioned Judge Breyer for a new trial.

However, the judge ruled that federal law has trumped local law "since the Civil War."

KEEP IN TOUCH — *Drug Detection Report* welcomes your comments, questions and suggestions. Contact: Dave Speights, Editor, 8737 Colesville Rd., Suite 1100, Silver Spring, MD 20910-3928; (301) 587-6300, ext. 349; fax: (301) 587-1081; or e-mail: dspeights@bpinews.com.

FEDERAL REGULATION

DOT

Mayflower, United Van Lines Propose to Test All Drivers

Mayflower and United Van Lines have asked the Department of Transportation (DOT) for permission to include *all* of their drivers in their pools for random drug and alcohol testing, not just those with commercial driver's licenses (CDLs).

The DOT's Federal Motor Carrier Safety Administration (FMCSA) supervises the mandatory testing of CDL drivers. The two moving companies have asked FMCSA collectively for permission "to impose controlled-substance and alcohol testing on their non-CDL drivers using the same standards, forms and requirements, and in the same random testing pool, as their CDL drivers."

Making Virtue Out of Necessity

The two companies say the inclusion of all drivers will simplify their recordkeeping while also promoting safety throughout their operations.

But the FMCSA notes that the companies did not ask for such a waiver until a compliance review, during which the agency cited Mayflower for including non-CDL drivers in its testing program.

The companies are proposing two conditions on their exemption that would allow the FMCSA to determine whether they have tested the required percentage of CDL drivers each year:

1) Each record would be marked "CDL" or "non-CDL," and 2) Each year, 15 percent of all drivers would be tested for alcohol, and 55 percent for drugs. FMCSA requires that 10 percent of all CDL drivers be tested at random for alcohol each year, and 50 percent for drugs.

The deadline for public comment is June 16. See the *Federal Register*, May 15, p. 26374, or contact Kaye Kirby, Office of Bus and Truck Standards and Operations, FMCSA, (202) 366-3109.

SAMHSA

CSAT Approves Two More Drugs For Treatment of Opioid Addiction

The Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Substance Abuse Treatment (CSAT) has approved Subutex® (buprenorphine) and Suboxone® (bupre-

norphine in fixed combination with naloxone) to its list of medications approved for the treatment of opioid addiction.

The ruling follows a similar move by the Food and Drug Administration. Subutex and Suboxone now join methadone and ORLAAM® (levomethadyl acetate) as drugs approved for maintenance and detoxification. Programs that use them will be subject to existing treatment standards.

Public comments on the ruling are due by July 21. See the *Federal Register*, May 22, p. 27937, or contact Nicholas Reuter, CSAT, (301) 443-0457, e-mail: nreuter@samhsa.gov.

GAO

Congressional Investigators Say NHTSA Could Do More Against Impaired Driving

"Human factors" including substance abuse cause most highway accidents, and the National Highway Traffic Safety Administration is not doing everything it could to crack down, according to the General Accounting Office (GAO).

Specifically, the GAO wants NHTSA to get tough with states that have lax drunk-driving laws, diverting more of their federal highway construction money to safety programs.

Highway Safety: Factors Contributing to Traffic Crashes and NHTSA's Efforts to Address Them (GAO-03-730T) is available free from the GAO, (202) 512-6000, Web site: www.gao.gov.

DEA Determinations

The Drug Enforcement Administration has published revocations of the following registrations, effective June 16:

Sankar Banerjee, M.D., Exeter, N.H. — revocation of registration as a practitioner authorized to handle controlled substances.

Reasons: lack of state authorization, medical license suspended.

Robert Kooker, M.D., Loomis, Calif. — revocation of registration as a practitioner authorized to handle controlled substances.

Reasons: lack of state authorization, medical license suspended.

See the *Federal Register*, May 15, pp. 26355, 26357.

INDUSTRY NEWS

Juvenile Justice

System Allows Greater Efficiency In Identification of Youth at Risk

A new instrument that measures the relative risk levels of youths involved in the juvenile justice system can help human-services agencies better target their limited funding, users say.

The Global Risk Assessment Device (GRAD), developed at Ohio State University (OSU), allows service professionals to enter individual information about risk factors in 11 different domains, such as substance abuse, prior arrests, health services, family/parenting, sociability and traumatic events. This information can then be used to measure progress and identify service gaps. The password-protected system is available on the Web.

GRAD is "showing a lot of promise," says Matt Novak, administrative officer at the juvenile justice center in Cuyahoga County, Ohio, which is testing the instrument. The data from GRAD helps the county target its budget to high-priority areas, an essential consideration in tight fiscal times.

"The more we know, theoretically, the more efficient we can be in terms of allocating those funds," Novak told *DDR*. The department can go to the county commissioner and say, "We need X amount of dollars to address those needs."

GRAD also helps formulate appropriate referrals, says OSU's Stephen Gavazzi, principal investigator. It can help courts mine their own data and probation officers to create a report quickly.

After a one-day training session, new GRAD users are usually proficient after trying it on four to five cases, Novak said. Traditionally, assessments can take three to four hours, and departments cannot always devote that much time to each youth. But GRAD promises to take about 20 minutes.

Computers Help Break the Ice

GRAD also has an unexpected benefit: encouraging youth to open up. Novak initially wondered if it would seem too impersonal to input data into a computer. On the contrary, youth who have grown up with computers appear to be more comfortable with a professional using GRAD than with one scribbling away in a notebook. Watching the information get entered on the computer screen, youth also get a better sense of where the data go and how it is used. All this helps youth feel more comfortable in the interview.

OSU offers some consultation to jurisdictions interested in developing their own GRAD project. The staff prefer hearing from "early adapters," i.e., "those open to new ideas, [with] little fear of technology, [who] see the burning need for early data about their kids," Gavazzi told *DDR*.

Getting It Into the Real World

Gavazzi has worked with states who are relatively far along in juvenile-justice data gathering, such as California, New York and Texas. His team has received almost 300 responses across the country and around the world.

In Ohio, GRAD began with Franklin County and has expanded to Cuyahoga and Licking counties. Cuyahoga signed on in the hopes of diverting status offenders from juvenile detention centers, Novak said. Existing data focused on the risk to re-offend, but needs assessments were limited largely to the personal opinion of the probation officer or social worker. GRAD, on the other hand, uses an objective checklist so the information is relatively consistent regardless of who fills it out.

For more information on GRAD or how to implement a similar system in your area, go to <http://hec.osu.edu/grad> or contact Stephen Gavazzi via e-mail at gavazzi.1@osu.edu.

Alpha Pro Solutions Releases E-Courses

The training firm Alpha Pro Solutions Inc. (APS) has just released five new courses in CD and online versions: *Supervisor Signs & Symptoms*, *Employee Drug & Alcohol Awareness*, *Urine Drug Test Collector*, *Breath Alcohol Technician* and *Alcohol Screening Test Technician*.

Each piece of e-Learning Courseware™ is suitable for DOT-regulated and non-regulated companies. APS also publishes the *HELP Handbook®* for drug test collectors, breath alcohol techs and alcohol screening test techs. Designed for use in the test area, the handbook walks techs through best-practice procedures.

"Now that compliance deadlines are past ... we are seeing companies incorporating our courses into long-term new-hire and refresher training plans," says APS President Sue Clark. Some corporate clients are mandating APS courseware for their supervisors and employees nationwide.

Contact: Sue Clark, president, APS, (636) 561-4259, e-mail: sue@alphaprosolutions.com, Web site: www.alphaprosolutions.com.

INDUSTRY NEWS

eScreen Teams with HP Technology To Speed Up Screening and Hiring

eScreen, a small company in Overland Park, Kan., has landed more than 500 occupational health clinics with a pre-employment drug screening system that uses HP/Compaq computers.

The eScreen system allows employers to obtain *negative* results in minutes, allowing them to put drug-free applicants to work right away.

Upon a positive indication, which happens in less than 10 percent of all tests, the system alerts the user to refer the sample to a certified lab, as required by federal law. Lab results typically take two to three business days.

The centerpiece of the system is an eReader™ device that uses optical imaging and analysis technology to interpret a urinalysis strip that is built in to the lid of the specimen and testing cup.

Using HP/Compaq desktop computers loaded with special software, clinicians transmit the data to eScreen for processing, storage and automatic notification to the employer via a secure Web site, fax or voice-response system. Using 40+ servers, eScreen processes more than 1 million tests per day.

Contact: Brad Rein, eScreen, (800) 881-0722, e-mail: brein@escrren.com.

* * *

The Institute for a Drug-Free Workplace (IDFW) is promoting the 11th edition of its *Guide to State and Federal Drug-Testing Laws*. The two-volume guide, which totals more than 900 pages, provides analysis of statutory law, case law and regulations affecting drug testing in the workplace. It addresses legal restrictions on drug testing procedures and the types of testing employers may conduct. The guide is \$345, or \$265 for two or more copies. Contact: IDFW, (202) 842-7400, Web site: www.drugfreeworkplace.org.

* * *

Hallucinogens: A Forensic Drug Handbook is a new comprehensive, cross-disciplinary hard-cover guide that covers the history, pharmacology, effects, forms, manufacturing methods, distribution, detection and forensic analysis of mind-altering drugs. It goes way beyond LSD, MDMA (Ecstasy) and PCP (Angel Dust), featuring illustrations, chemical structures and analytic spectra. The price

is \$79.95. Contact: Elsevier, (800) 545-2522, Web site: <http://books.elsevier.com/forensics>.

NEWS IN BRIEF

Ephedra File — Illinois became the first state in the nation with an outright ban on sales of the herbal dietary supplement ephedra May 25, when Gov. Rod Blagojevich (D) signed legislation into law. The stimulant/weight-loss product has been linked to almost 120 deaths (*DDR*, May 15, p. 79). The campaign for the Illinois ban began last September, following the death of 16-year-old high school football prospect Sean Riggins of Lincoln. Contact: Gov. Blagojevich, (217) 782-6830, e-mail: governor@state.il.us, Web site: www.illinois.gov.

Palliative Care — A White House Conference on Pain Care would be held under legislation introduced by Reps. Mike Rogers (R-Mich.) and David Vitter (R-La.). The National Pain Care Policy Act (H.R. 1863) would also authorize a National Center for Pain and Palliative Care Research at NIH, complete with an advisory council and a set of regional research centers. Contacts: Rep. Rogers, (202) 225-4872; Rep. Vitter, (202) 225-3015.

DRUG DETECTION REPORT

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