

REQUEST FOR EXAMINATION OF SPECIMENS FOR ALCOHOL/DRUGS

PLACE THE COMPLETED FORM(S) IN THE MAILING SLEEVE AND ATTACH THE SLEEVE TO THE OUTSIDE OF THE EVIDENCE BOX, PLEASE FOLD THE FORM SO SUBJECT INFORMATION IS **NOT VISIBLE**
*****See Collection & Submission procedure on back of form*****

Law Enforcement Agency/Department: _____

Agency Case # : _____ Town of Incident: _____

Incident Type: (Select all that apply) Source: Driver / Passenger / Other

DUI / MVA / Fatality* *Please include deceased name on RFA for Fatalities

Name of Subject: _____ Sex: M / F DOB: _____
(First Last)

Address of subject: _____
(Street) (City and State) (Zip Code)

**Note: If collecting a urine sample following a breath alcohol test, collect only one urine sample.
If collecting only urine, collect two samples, at least 20 minutes apart.**

Breath sample taken? Yes / No (If yes please fill in below)
Result 1 (if taken): _____ Date/Time: _____
Result 2 (if taken): _____ Date/Time: _____

Specimen # 1
Collected By: _____
Sealed By: _____
Date/Time Taken: _____
Specimen Type: Urine / Blood / Other

Specimen # 2 (If collected)
Collected By: _____
Sealed By: _____
Date/Time Taken: _____
Specimen Type: Urine / Blood / Other

Subject Consent to Official Request for Sample Collection (blood samples only): I, _____ give consent for the collection of blood samples, as indicated by my (Print Subject Name) signature: _____ Date: _____
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Drugs Suspected (If Any); _____

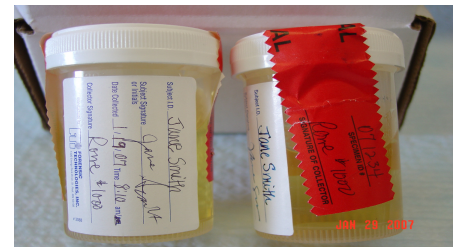
Note: Please fill out & submit to court an appropriate JD-CR-Form for the evidence destruction upon adjudication.

Collection & Submission Procedure

***Note:** When **hand delivering**, specimens may be contained within a tamper evident sealed plastic bag. Add agency name & case # to outside of packaging. Forms do not need to be enclosed in red document sleeve.

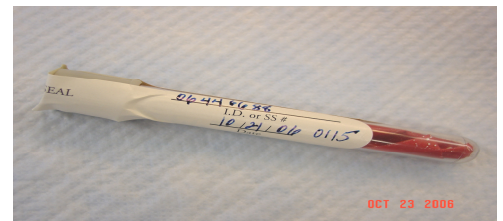
Urine Kit

1. Complete both lab forms, Request for Analysis (*RFA*) *SOP ER-02:1 Rev 3 (01/01/2017)* & *DPS-0009-C Rev (10/1/2018)*.
2. Fill in all fields of red "SECURITY SEAL" (add agency case number).
3. Fill in first Specimen cup label completely (indicate cup #1). Collect sample, add collection time to label, seal with red seal, DO NOT cover cup label.
4. Wait **(20) minutes** or more to collect second sample (if needed), label & seal as above. (cup #2)
5. Fill in "Specimen #1" & "Specimen #2" boxes on form (if applicable) .
6. Place specimen cup(s) in plastic evidence bag, seal bag.
7. Place specimen bag in cardboard box, seal outside of box with red "INTEGRITY SEAL", initial & date seal.



Blood Kit

1. Complete both lab forms; (Request for Analysis (*RFA*) *SOP ER-02:1 Rev 3 (01/01/2017)* & *DPS-0009-C Rev (10/1/2018)*).
2. Subject should **sign & date form** in "SUBJECT CONSENT" section.
3. Fill in all fields of white "SECURITY SEAL" (add agency case number).
4. Draw the first blood sample. Add the date and time of the blood draw to the "SECURITY SEAL" & affix to the tube, place it across the top of the tube. (indicate specimen #)
5. Second sample should be drawn **(20) minutes** or more after the first. Label & seal as above.
6. Fill in "Specimen #1" & "Specimen #2" boxes on form (if applicable).
7. Place blood vial(s) in plastic evidence bag, seal bag.
8. Place specimen bag in cardboard box, seal outside of box with red "INTEGRITY SEAL", initial & date seal.



Submission Procedure

1. Place **both completed forms** Request for Analysis *SOP ER-02:1 Rev 3 (01/01/2017)* & *DPS-0009-C Rev (10/1/2018)* in red document sleeve folded so information is not visible.
2. Attach the shipping sleeve to **OUTSIDE** of the evidence box.
3. Add agency name and case number to outside of box.
4. Hand deliver specimen(s), Certified mail, or other trackable method to:

Division of Scientific Services
278 Colony St, Meriden CT 06451

