

U.S. DEPARTMENT OF TRANSPORTATION DRUG AND ALCOHOL TESTING MIS DATA COLLECTION FORM

Calendar Year Covered by this Report: 2006

I. Employer

Company Name: HealthWorks Northwest, Inc.
 Doing Business As (DBA) Name (if applicable): _____
 Address: 3331 Washington Way, Longview, WA 98632 E-mail: _____
 Name of Certifying Official: Steve Maldonado Signature: _____
 Telephone: 360-578-2527 Date Certified: January 29, 2007
 Prepared by (if different): _____ Telephone: _____
 C/TPA Name and Telephone (if applicable): _____



Check the DOT agency for which you are reporting MIS data; and complete the information on that same line as appropriate:

FMCSA - Motor Carrier: DOT #: _____ Owner-Operator: (circle one) YES or NO Exempt: (circle one) YES or NO
 ___ FAA - Aviation: Certificate # (if applicable): _____ Plan / Registration # (if applicable): _____
 ___ RSPA - Pipeline: (Check) Gas Gathering ___ Gas Transmission ___ Gas Distribution ___ Transport Hazardous Liquids ___ Transport Carbon Dioxide ___
 ___ FRA - Railroad: Total Number of observed/documentated Part219 "Rule G" Observations for covered employees: _____
 ___ USCG - Maritime: Vessel ID # (USCG- or State-Issued): _____ (If more than one vessel, list separately)
 ___ FTA - Transit

II. Covered Employees: (A) Enter Total Number Safety-Sensitive Employees In All Employee Categories: 398

(B) Enter Total Number of Employee Categories: 1

Employee Category	Total Number of Employees in this Category	If you have multiple employee categories, complete Sections I and II (A) & (B). Take that filled-in form and make one copy for each employee category and complete Sections II (C), III, and IV for each separate employee category.
Driver	398	

III. Drug Testing Data:

Percent Tested For Drugs: 50%

Type of Test	1 Total Number Of Test Results [Should equal the sum of columns 2, 3, 9, 10, 11, and 12]	2 Verified Negative Results	3 Verified Positive Results	4 Positive for Marijuana	5 Positive for Cocaine	6 Positive for PCP	7 Positive for Opiates	8 Positive for Amphetamines	10-12 Refusal Results				13 Cancelled Results
									9 Adulterated	10 Substituted	11 "Shy Bladder" ~ With No Medical Explanation	12 Other Refusal To Submit To Testing	
Pre-Employment	156	154	2	1	0	0	1	1	0	0	0	0	0
Random	199	196	2	1	0	0	0	1	0	1	0	0	0
Post-Accident	5	4	1	0	0	0	0	1	0	0	0	0	0
Reasonable Susp./Cause	0	0	0	0	0	0	0	0	0	0	0	0	0
Return-to-Duty	4	4	0	0	0	0	0	0	0	0	0	0	0
Follow-Up	4	4	0	0	0	0	0	0	0	0	0	0	0
TOTAL	368	362	5	2	0	0	1	3	0	1	0	0	0

IV. Alcohol Testing Data

Percent Tested for Alcohol: 10%

Type of Test	1 Total Number of Screening Test Results [Should equal the sum of Columns 2,3,7, and 8]	2 Screening Tests With Results Below 0.02	3 Screening Tests With Results 0.02 Or Greater	4 Number Of Confirmation Tests Results	5 Confirmation Tests With Results 0.02 Through 0.039	6 Confirmation Tests With Results 0.04 Or Greater	7-8 Refusal Results		9 Cancelled Results
							7 Shy Lung ~ With No Medical Explanation	8 Other Refusals To Submit To Testing	
Pre-Employment	0	0	0	0	0	0	0	0	0
Random	40	39	0	0	0	0	0	1	0
Post-Accident	4	4	0	0	0	0	0	0	0
Reasonable Susp./Cause	0	0	0	0	0	0	0	0	0
Return-to-Duty	1	1	0	0	0	0	0	0	0
Follow-Up	0	0	0	0	0	0	0	0	0
TOTAL	45	44	0	0	0	0	0	1	0