

# SPLIT SPECIMEN EMPLOYEE REQUEST FORM

**SPLIT SPECIMEN:** In drug testing, a part of the urine specimen that is sent to a first laboratory and retained unopened, and which is transported to a second laboratory in the event that the employee requests that it be tested following a verified positive test of the primary specimen or a verified adulterated or substituted test result.

**SPLIT SPECIMEN COLLECTION:** A collection in which the urine collected is divided into two separate specimen bottles, the primary specimen (Bottle A) and the split specimen (Bottle B).

SOURCE: DEPARTMENT OF TRANSPORTATION

**EMPLOYER NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**ORIGINAL TEST DATE:** \_\_\_\_\_

**SPECIMEN ID #:** \_\_\_\_\_

I, \_\_\_\_\_, OF \_\_\_\_\_  
full name employer name

**HEREBY REQUEST A SPLIT SPECIMEN COLLECTION.**

**X** \_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Today's Date

**MY SIGNATURE ABOVE AFFIRMS MY WRITTEN  
REQUEST FOR A SPLIT SPECIMEN COLLECTION.**