WICHITA STATE UNIVERSITY

NATIONAL INSTITUTE FOR AVIATION RESEARCH

FAA MANDATED DRUG AND ALCOHOL TESTING POLICY

Wichita State University, on behalf of its National Institute for Aviation Research ("NIAR"), complies with the drug and alcohol testing regulations of the Federal Aviation Administration ("FAA") (14 CFR part 120). NIAR considers violations of FAA mandated drug and alcohol rules to be misconduct.

For More Information about FAA Requirements or our Policy, contact Marcie Holsteen, IDP Director of Human Resources at 316-978-5216.

For more information relating to the FAA program requirements, visit the following Web sites:

For FAA: http://www.faa.gov/go/drugabatement

TABLE OF CONTENTS

DEFINITIONS 4

GENERAL TESTING INFORMATION 6

I. CATEGORIES OF EMPLOYEES SUBJECT TO TESTING 6

II. CIRCUMSTANCES UNDER WHICH AN EMPLOYEE WILL BE TESTED 6

III. SUBSTANCE ABUSE PROFESSIONAL AND REHABILITATION 7

TESTING INFORMATION FOR FAA DRUG TESTING 8

I. COMMUNITY SERVICE HOTLINE 8

II. CONSEQUENCES OF USING DRUGS WHILE PERFORMING SAFETY-SENSITIVE FUNCTIONS 8

III. CONSEQUENCES OF A VERIFIED POSITIVE DRUG TEST 8

IV. CONSEQUENCES OF REFUSING TO SUBMIT TO A REQUIRED DRUG TEST 8

V. REQUIRED NOTICES 7

TESTING INFORMATION FOR FAA ALCOHOL TESTING 9

I. COVERED FUNCTIONS AND PERIOD OF THE WORKDAY 9

II. PROHIBITED CONDUCT 9

III. CONSEQUENCES OF ALCOHOL USE OR MISCONDUCT 10

IV. CONSEQUENCES OF REFUSAL TO SUBMIT TO REQUIRED ALCOHOL TEST 10

V. GENERAL ALCOHOL SCREENING TESTING PROCEDURES 10

ALCOHOL MISUSE PREVENTION AND EDUCATION POLICY 15

I. REQUIRED TRAINING 15

II. INTERVENING WHEN AN ALCOHOL OR CONTROLLED SUBSTANCE ABUSE PROBLEM IS SUSPECTED, INCLUDING CONFRONTATION, REFERRAL PROGRAM, AND/OR REFERRAL TO MANAGEMENT 15

III. EFFECTS OF ALCOHOL MISUSE ON AN INDIVIDUAL'S HEALTH, WORK, AND PERSONAL LIFE 15

IV. SIGNS AND SYMPTOMS OF ALCOHOL OR CONTROLLED SUBSTANCE MISUSE 16

V. AVAILABLE METHODS OF EVALUATING AND RESOLVING PROBLEMS ASSOCIATED WITH THE MISUSE OF ALCOHOL OR CONTROLLED SUBSTANCES 16

DEFINITIONS

For purposes of this policy, the following definitions shall apply:

A. "Alcohol": The intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohols, including methyl or isopropyl alcohol.

B. "Alcohol Use": The consumption of any beverage, mixture, or preparation, including any medication (prescribed or over-the-counter, intentional or unintentional) containing Alcohol.

C. "Performing a Safety-Sensitive Function": An employee is considered to be performing a safety-sensitive function during any period in which he or she is actually performing, ready to perform, or immediately available to perform a Safety-Sensitive Function.

D. "Prohibited Drugs": Marijuana, cocaine, amphetamines, phencyclidine (PCP), and opioids, as specified in 49 CFR40.85.

E. "Refusal to Test": A covered employee is considered to have refused to take a test if the employee:

i. Fails to appear for or take any test, within a reasonable time, after being directed to do so by NIAR;
ii. Interferes with any testing process required by this policy;
iii. Fails to remain at the testing site until the testing process is complete; provided that an employee who leaves the testing site before the testing process commences for a pre-employment test is not deemed to have refused to test;
iv. Fails to provide a urine specimen for any drug test required by this policy; provided that an employee who does not provide a urine specimen because he or she has left the testing site before the testing process commences for a pre-employment test is not deemed to have refused a test;
v. Fails to provide a sufficient amount of urine when directed, if it has been determined by a physician through a required medical evaluation that there was no adequate medical explanation for the failure;
vi. Fails to permit the observation or monitoring of a specimen in the case of a directly observed or monitored collection;
vii. Fails to provide an adequate amount of saliva or breath for any alcohol test required by this policy; provided that an employee who does not provide an adequate amount of breath or saliva because he or she has left the testing site before the testing process commences for a pre-employment test is not deemed to have refused to test;
viii. Fails to provide a sufficient breath specimen when directed, if it has been determined by a physician through a required medical evaluation that there was no adequate medical explanation for the failure;

ix. Fails to undergo a medical examination or evaluation, as directed by NIAR or as otherwise required by this policy; provided that in the case of a pre-employment drug test, the employee is only deemed to have refused to test on this basis if the test is conducted following a contingent offer of employment;
x. Fails to remain readily available for post-accident testing if such testing is required by this policy;
xi. Fails to sign any required certifications as part of the testing process; or
xii. Fails to cooperate with any part of the testing process (*e.g.*, refuses to empty pockets when so directed by the collector, behaves in a confrontational way that disrupts the collection process, etc.).

GENERAL TESTING INFORMATION

I. CATEGORIES OF EMPLOYEES SUBJECT TO TESTING

Each employee, including any assistant, helper, or individual in a training status, who fills any of the following capacities, are subject to the provisions of this Policy: flight crewmember, flight attendant, aircraft dispatcher, inspection, overhaul, repair, preservation, replacement of parts, or preventative maintenance on any certified part or component that requires an airworthiness release.

II. CIRCUMSTANCES UNDER WHICH AN EMPLOYEE WILL BE TESTED

A. Pre-Employment. Individuals must have a verified negative drug test prior to being hired.

B. Random. Employees will be selected at random for drug and alcohol test throughout the year and the test will be unannounced. The employee must proceed immediately to the testing site when they are notified of the test.

C. Post-Accident. If the employee's performance either contributed to an accident or cannot be completely discounted as a contributing factor to an accident, the employee will be subject to drug and alcohol testing. Attempts to conduct an alcohol test will cease 8 hours after the accident, even if no alcohol test was performed.

D. Reasonable Suspicion. Employees will be selected for a reasonable suspicion drug and alcohol test when a supervisor, who is trained in detecting the symptoms of drug or alcohol abuse, makes a determination that a test should be conducted.

i. The determination must be based on a trained supervisor's specific, contemporaneous, articulable observations concerning the physical, speech, body odors, appearance, behavior, and performance indicators of probable drug or alcohol use.
ii. Even if an alcohol test cannot be administered, no employee who is under the influence of, or impaired by alcohol, as shown by behavioral, speech, or performance indicators of alcohol misuse, should report for duty or be allowed to remain on duty requiring the performance of safety sensitive functions, until a test can be administered and the result is below 0.02 or until the commencement of the employee's next duty period, if at least 8 hours has elapsed.
iii. A supervisor who identifies an employee for a reasonable suspicion alcohol test cannot conduct the alcohol test.

E. Return-to-Duty. An employee will be subjected to a return-to-duty drug and alcohol test prior to returning to duty, after having engaged in conduct prohibited by this Policy. Return-to-duty testing requires compliance with 49 CFR Part 40, Subpart O.

i. An alcohol test requires a test result indicating an alcohol concentration of less than 0.02 before an employee can perform safety-sensitive functions.
ii. A drug test must have a verified negative test result prior to returning to duty.

F. Follow-Up. An employee will be subject to an unannounced follow-up test, conducted on a schedule determined by a SAP, following a determination that the employee is in need of assistance in resolving problems with drug or alcohol misuse. At least six (6) follow-up tests will be conducted in the first twelve (12) months after the employee is back on the job. Follow-up testing may continue for up to sixty (60) months.

G. Retest. If an employee returns to duty in less than eight (8) hours after an alcohol test with a result of 0.02 or greater and less than 0.04, the employee will be selected for a re-test prior to performing safety sensitive functions. An employee may return to performing safety sensitive functions if the alcohol retest indicates an alcohol concentration of less than 0.02.

III. SUBSTANCE ABUSE PROFESSIONAL AND REHABILITATION

A. The employee will pay the cost of Substance Abuse Professional (SAP) evaluations, rehabilitation, return-to-duty, and follow-up testing.

B. An employee who refuses to undergo a SAP evaluation and complete a program recommended by the SAP will be terminated.

C. Rehabilitation will be allowed one time for prohibited drug use.

IV. REQUIRED NOTICES

A. Required Notice to the Federal Air Surgeon.

i. Any covered employee who holds an airman's medical certificate issued under 14 CFR Part 67 and has a verified positive drug test or engages in alcohol use that violates the alcohol misuse provisions of 14 CFR Parts 120.19 or 120.37 will be reported to the Federal Air Surgeon, within 2 working days.
ii. No covered employee who holds a Part 67 airman medical certificate or would be required to hold an airman medical certificate will be permitted to perform a safety sensitive function after a violation unless and until, in addition to other required return to duty steps in 49 CFR Part 40, the Federal Air Surgeon has recommended that the employee be permitted to perform such duties.

B. Required Notice to the FAA Drug Abatement Division. Any covered employee who holds an airman certificate issued under 14 CFR Part 61, 63, or 65, and who refuses to submit to a required drug or alcohol test will be reported to the FAA Drug Abatement Division within 2 working days.

TESTING INFORMATION FOR FAA DRUG TESTING

I. COMMUNITY SERVICE HOTLINE

If you have any personal problems or questions concerning drug abuse or alcohol misuse and need to confide in someone, you are encouraged to contact:

Christy Foos, SAP
Traveling SAP Services
Telephone: 913-702-6722

II. CONSEQUENCES OF USING DRUGS WHILE PERFORMING SAFETY-SENSITIVE FUNCTIONS

An employee who has engaged in prohibited drug use during the performance of a safety-sensitive function will be immediately removed from performing safety-sensitive functions and is permanently precluded from performing that same safety-sensitive function for any FAA-regulated employer.

III. CONSEQUENCES OF A VERIFIED POSITIVE DRUG TEST

A. An employee who receives a verified positive drug test result will be immediately removed from safety sensitive duties and will be terminated.

B. An employee with a dilute specimen will not be retested, unless specifically required under 49 CFR Part 40.

C. An employee who receives an adulterated, positive test result or a substituted specimen drug test result, will be allowed to pick a second DHHS certified laboratory to test the split specimen if he/she so desires.

IV. CONSEQUENCES OF REFUSING TO SUBMIT TO A REQUIRED DRUG TEST

A covered employee who refuses to submit to a required drug test will be terminated.

TESTING INFORMATION FOR FAA ALCOHOL TESTING

I. COVERED FUNCTIONS AND PERIOD OF THE WORKDAY

Any employee performing a safety-sensitive function is subject to alcohol testing and must refrain from consuming any alcohol (not just alcoholic beverages) whenever they are performing, ready to perform, or immediately available to perform these functions.

II. PROHIBITED CONDUCT

Covered employees may not report for duty or remain on duty in a position requiring the performance of safety sensitive functions while having an alcohol concentration of 0.02 or greater.

A. Pre-duty Use.

i. Pre-duty use of alcohol is prohibited in the following circumstances:

a. Employees may not perform flight crewmember, flight attendant, or air traffic controller duties within 8 hours of consuming alcohol.
b. Employees may not perform maintenance or preventive maintenance duties within 4 hours of consuming alcohol.

ii. On-call employees who are not at the work site but could be called back to perform the above-referenced safety-sensitive functions are subject to the same restrictions and should decline a call back to work if acceptance would result in any of the above-referenced prohibited pre-duty use.

B. On-duty Use. On-duty use of alcohol in any form while performing safety-sensitive functions is prohibited. This prohibition also applies to covered employees who are immediately available to perform safety sensitive functions.

C. Use After an Accident.

i. Use of alcohol by a covered employee with knowledge of an Accident involving an aircraft for which they performed a safety sensitive function is prohibited for 8 hours following the accident unless:
a. The employee has been given a post-accident test; or
b. NIAR has determined that the Employee's performance could not have contributed to the accident.

ii. An Accident is defined as an occurrence associated with the operation of an aircraft which takes place between the time any person boards the aircraft with the intention of flight and the time that all such persons have disembarked, and in which any person suffers death or serious injury or in which the aircraft receives substantial damage.

III. CONSEQUENCES OF ALCOHOL USE OR MISCONDUCT

A. Immediate Removal from Safety Sensitive Positions.

i. An employee who receives a confirmed alcohol test result of 0.02 or greater, but less than 0.04, will be removed from safety sensitive duties immediately and suspended for the remainder of the shift without pay. The employee may not perform any safety sensitive functions until:
   a. The start of the next regularly scheduled duty period, if it occurs at least 8 hours following administration of the test, or
   b. Upon re-testing by NIAR, if the alcohol test indicates an alcohol concentration of less than 0.02.

B. Termination.

i. A covered employee who receives a second confirmed alcohol test at 0.02 or above but less than 0.04 will be terminated.
ii. An employee who receives a confirmed alcohol test result of 0.04 or greater will be removed from safety sensitive duties immediately, terminated, and referred to a Substance Abuse Professional ("SAP").

C. Permanent Prohibition on Service.

i. If a covered employee is determined to have violated the on-duty use of alcohol prohibition, he or she is permanently precluded from performing the safety-sensitive duties he or she performed before such a violation.
ii. If a covered employee is determined to have violated the prohibited alcohol-related conduct provision, other than on-duty use, two times after the employee becomes subject to the prohibitions, he or she is permanently precluded from performing the safety-sensitive duties he or she performed before such a violation.
iii. The bar on two-time violators will apply both to persons who go through rehabilitation and to those who, after evaluation by an SAP, are determined not to need treatment.

IV. CONSEQUENCES OF REFUSAL TO SUBMIT TO REQUIRED ALCOHOL TEST

An employee who refuses a required alcohol test will be terminated.

V. GENERAL ALCOHOL SCREENING TESTING PROCEDURES

A. Upon entering the testing area, the employee will be requested to provide positive proof of identification, in the form of a driver's license with a picture on it, or similar identification. The employee may ask for identification from the collector as well.

B. Alcohol testing will be done by a Breath Alcohol Technician (BAT) or Screening Test Technician (STT) using an approved testing device. Only the employee, BAT, STT, DERs,

employee's representative authorized by NIAR, and DOT agency representatives will be allowed in the testing area.

C. Alcohol screening test using an evidential breath testing device (EBT) or non-evidential breath (alcohol screening device or "ASD") will be conducted using the following procedures:

i. The BAT will explain the testing process and complete Step 1 on the breath alcohol testing form ("ATF").
ii. The employee will then complete Step 2 on the ATF, signing the certification. Refusal by the employee to sign this certification will be regarded as a refusal to test.
iii. The BAT will allow the employee to select an individually sealed mouthpiece, open it in view of the employee, and attach it to the device in accordance with the manufacturer's instructions.
iv. The BAT will instruct the employee to blow forcefully in the mouthpiece for at least six (6) seconds or until the device indicates that an adequate amount of breath has been obtained.
v. The BAT will show the employee the result displayed on the device.
vi. The results will be recorded as follows:
    a. If the device is one that prints the test number, testing device name, testing device serial number, time, and test result directly onto the ATF, the BAT and employee must check to ensure theinformation has been correctly printed onto the ATF.
    b. If the device is one that prints the test number, testing device name, testing device serial number, time, and test result, but on a separate printout rather than directly onto the ATF, the BAT must affix the printout of the information to the designated space on the ATF, with tamper evident tape, or use a self-adhesive label that is tamper-evident.
    c. If the device is one that does not print the test number, testing device name, testing device serial number, time, and result, or it is a device not being used with a printer, the BAT must record this information in Step 3 of the ATF.

D. Alcohol screening using a saliva ASD will be conducted using the following procedures:

i. The STT shall check the expiration date of the device and show it to the employee. The STT will not use the device after its expiration date.
ii. The STT shall open an individually wrapped or sealed package containing the device, in the presence of the employee.
iii. The STT will offer the employee the opportunity to use the device. If the employee uses it, the STT must instruct the employee to insert it in the employee's mouth, in a manner described by the device's manufacturer.

iv. If the employee chooses not to use the device, or in all cases in which a new test is necessary because the device did not activate, the STT shall insert the device into the employee's mouth and gather saliva in the manner described by the device's manufacturer.
v. The STT must wear single-use examination or similar gloves while doing so and change them following each test.
vi. When the device is removed from the employee's mouth, the STT must follow the manufacturer's instructions regarding necessary next steps in ensuring that the device has activated.
vii. If the procedures in steps above are not followed successfully, (the swab breaks, the STT drops the swab on the floor, etc.) the STT shall discard the device and conduct a new test, using a new device.
viii. The new device must be one that has been under the control of NIAR or STT prior to use.
ix. The STT shall note the reason for the new test in the remarks section of the ATF.
x. The STT must offer the employee the choice of using the device themselves, or having the STT use the device, unless the employee, in the opinion of the STT, was responsible (e.g., the employee dropped the device) for the new test needing to be conducted.
xi. If the STT is unable to successfully follow the procedures on the new test, the collection shall be terminated, and an explanation provided in the remarks section of the ATF.
xii. A new test shall then be conducted immediately, using an EBT for the screening test.
xiii. If the steps above are completed successfully, but the device is not activated, the STT shall discard the device, and conduct a new test in the same manner stated above. In this case, the STT shall place the device in the employee's mouth to collect saliva for a new test.
xiv. The STT shall read the result displayed on the device no sooner than the device's manufacturer instructs. In all cases, the result displayed must be read within 15 minutes of the test. The STT must show the device and its reading to the employee and enter the results in Step 3 of the ATF. The STT must note that a saliva ASD was used.
xv. Devices, swabs, gloves and other materials used in saliva tests shall not be reused.

E. Following the AST, the BAT or STT will use the following procedures:

i. If the screening test is an alcohol concentration of less than 0.02, the BAT or STT shall enter the information and date and sign Step 3 of the ATF.
ii. The screening test result will then be transmitted to the DER in a confidential manner.
iii. If the result of the screening test is an alcohol concentration of 0.02 or greater, a confirmation test shall be performed using an evidentiary breath testing device.

iv. The BAT will instruct the employee not to eat, drink, put any object or substance in his or her mouth, and, to the extent possible, not belch during a waiting period before the confirmation test. This time period begins with the completion of the screening test and will not be less than 15 minutes. The BAT will explain to the employee the reason for this requirement (i.e., to prevent any accumulation of mouth alcohol leading to an artificially high reading} and the fact that it is for the employee's benefit. The BAT will also explain that the test will be conducted at the end of the waiting period, even if the employee has disregarded the instruction. If the BAT becomes aware that the employee has not complied with this instruction, the BAT will so note in the “Remarks” section of the form.

v. If the confirmation test will be conducted by a different BAT, the BAT or STT who conducts the screening test will complete and sign the ATF. The BAT of STT will provide the employee with Copy 2 of the ATF.

F. Procedures for Alcohol Confirmation Test:

i. The BAT must ensure that the waiting period lasts at least 15 minutes, starting with the completion of the screening test. After the waiting period has elapsed, the confirmation test will begin as soon as possible, but not more than 30 minutes after the completion of the screening test.

ii. If a BAT, other than the one who conducted the screening test is conducting the confirmation test, the new BAT will initiate a new ATF. The BAT will complete Step 1 on the ATF. The employee will than complete Step 2 on the ATF, signing the certification. Refusal by the employee to sign this certification will be regarded as a refusal to take the test. The BAT will note in the "Remarks" section of the ATF that a different BAT conducted the screening test.

iii. The BAT will conduct an “air blank” to ensure that the device is working correctly. The air blank result must be 0.00. If the reading is greater than 0.00, the BAT will conduct one more air blank. If the reading is greater than 0.00. testing will not proceed using that instrument. However, testing may proceed on another instrument.

iv. Allow the employee to select an individually sealed mouthpiece, open it in view of the employee and attach it to the device in accordance with the manufacturer's instructions. The BAT will instruct the employee to blow forcefully in the mouthpiece for at least 6 seconds or until the device indicates that an adequate amount of breath has been obtained.

v. The BAT will show the employee the result displayed on the device.

vi. If the device is one that prints the test number, testing device name and serial number, time and test result directly onto the ATF, the BAT and employee must check to ensure the information has been printed correctly onto the ATF.

vii. If the device is one that prints the test number, testing device name and serial number, time and test result, but on a separate printout rather than directly onto the ATF, the BAT must affix the printout of the information to the designated space on the ATF, with tamper evident tape, or use a

viii. self-adhesive label that is tamper-evident. The BAT then signs and dates STEP 3.

ix. If the alcohol confirmation test result is lower than 0.02 no further action is required.
x. If the alcohol confirmation test result is 0.02 or higher, then the employee must sign STEP 4 of the ATF. If the employee does not sign the ATF, it is not considered a refusal to test, and the BAT makes a notation in the remarks section.
xi. The test results are then immediately transmitted to the DER in a confidential manner in person, by telephone, or by electronic means.

G. Problems that always cause an alcohol test to be canceled:

i. In the case of a screening test conducted using a saliva ASD:
   a. The STT reads the results sooner or later than the time allotted by the manufacturer.
   b. The device does not activate.
   c. The device is used after the expiration date printed on the package.

ii. In the case of a screening or confirmation test using an EBT:
   a. If a test result printed by the EBT does not match the displayed result
   b. The BAT does not conduct an air blank before the confirmation test
   c. There is not a 0.00 result on the air blank conducted before the confirmation test
   d. The EBT does not print the result
   e. The next external calibration check of the EBT produces a result that differs by more than the tolerance stated in the Quality Assurance Plan.

H. Controlled substance testing will be done by sending a urine sample to a Department of Health and Human Services approved lab. A chain-of-custody form will identify the specimen throughout the testing process. The Medical Review Officer will review test results, to ensure that the specimen was collected and processed according to 49 CFR part 40.

I. Urine samples will be collected in private, except in special situations; such as previously adulterated or substituted samples.

J. NIAR will keep all test results in a locked file.

ALCOHOL MISUSE PREVENTION AND EDUCATION POLICY

I. REQUIRED TRAINING

A. As a condition of their employment, employees and supervisors will complete all training required by the FAA, this Policy, or NIAR.

B. At a minimum, all employees will review and familiar themselves with the information contained in this Alcohol Misuse Prevention and Education Policy.

II. INTERVENING WHEN AN ALCOHOL OR CONTROLLED SUBSTANCE ABUSE PROBLEM IS SUSPECTED, INCLUDING CONFRONTATION, REFERRAL PROGRAM, AND/OR REFERRAL TO MANAGEMENT

A. Why You Should Get Involved: There are two good reasons why employees should be concerned if co-workers are using alcohol or prohibited drugs while on the job:
   i. The health and safety of all employees, including you and your co-workers may be at risk.
   ii. Alcohol and controlled substance use creates a negative work environment.

B. Workers who use alcohol (and other drugs) affect everyone.

C. Substance abusers are far less productive, miss more work, are more likely to injure themselves or someone else, and file more workers' compensation claims.

D. Alcohol misuse and substance abuse is an especially serious issue.

E. No matter what your position is, acceptance of any misuse puts you, NIAR, and the public at risk.

III. EFFECTS OF ALCOHOL MISUSE ON AN INDIVIDUAL'S HEALTH, WORK, AND PERSONAL LIFE

A. Alcohol is a central nervous system depressant. Taken in large quantities it causes not only the euphoria associated with "being drunk" but also adversely affects judgment and motor functions. Drink enough alcohol fast enough and it can kill you.

B. Long term overuse of alcohol can cause liver damage, heart problems, sexual dysfunction, and other serious medical problems.

C. In some cases, alcohol use can lead to physical and psychological dependence on alcohol. Alcoholism is a serious chronic disease. Left untreated it will inevitably get worse.

D. The measurable dollar costs of workplace substance abuse from absenteeism, tardiness, insurance claims, and workers' compensation can be substantial. However, the hidden

costs resulting from diverted supervisory and managerial time, friction among workers, and damage to NIAR's public image mean that workplace substance abuse can further cut profits and competitiveness.

E. Alcohol abuse can lead to serious problems with the law (*e.g.*, drunk driving), work, and personal relationships.

IV. SIGNS AND SYMPTOMS OF ALCOHOL OR CONTROLLED SUBSTANCE MISUSE

Any one or more of the following signs may indicate a substance abuse problem:

i. Family or social problems caused by substance abuse.
ii. Job or financial difficulties related to substance abuse.
iii. Loss of a consistent ability to control drinking.
iv. "Blackouts" or the inability to remember what happened while drinking or using controlled substances.
v. Distressing physical and/or psychological reactions if you try to stop drinking or using controlled substances.
vi. A need to drink increasing amounts of alcohol to get the desired effect.
vii. Marked changes in behavior or personality when drinking or using controlled substances.
viii. Starting the day with a drink or getting drunk frequently.
ix. Hurting yourself or someone else, while intoxicated or using controlled substances.

V. AVAILABLE METHODS OF EVALUATING AND RESOLVING PROBLEMS ASSOCIATED WITH THE MISUSE OF ALCOHOL OR CONTROLLED SUBSTANCES

A. Outpatient programs exist in a variety of settings:
   i. Community mental health centers.
   ii. Family service agencies.
   iii. Private physicians' and therapists' offices.
   iv. Specialized alcoholism treatment facilities.

B. Inpatient services, designed for those with more serious alcohol or controlled substance abuse problems, can be found in hospitals, residential care facilities, community halfway houses, and some alcoholism clinics.

C. The following phone numbers may be of help to you:

i.	Addiction Center For Treatment	1-800-711-6402
ii.	AAAB, Inc.	1-800-574-9810
iii.	Addiction Treatment Center	1-800-572-5988
iv.	South Central Mental Health Counseling	1-866-660-3300