

## DRUG IDENTIFICATION KIT

### FEATURES

- Sample vials and swabs to obtain sample(s) for laboratory identification.
- Chain of Custody (COC) / Work Order and return envelope.
- Laboratory analysis.

### SAMPLING INSTRUCTIONS

Carefully follow the instructions for obtaining a sample for laboratory identification.

*For unusual sample types call 877.343.5227*

#### OBTAINING A SAMPLE FOR LABORATORY IDENTIFICATION

1. Open plastic vial, remove the glass vial, and **write sample number on white glass patch (e.g. 1, 2, 3)**
2. Wet the supplied cotton tipped applicator with solvent found in the glass vial and swab the suspect area(s). Multiple non-porous surfaces can be swabbed using a single swab if necessary.
3. Dip the swab tip back into the vial solvent and swirl to release residues from the swab. Discard swab.
4. **Reseal glass vial cap tightly**, return to the plastic bottle and place in the return mailer.
5. Complete the chain of custody form (see reverse side of this form).  
*Note: **List drugs to test for**, broad spectrum and/or specific classes, on reverse side of this form.*
6. Sign and date the relinquished by line of the form.
7. Seal mailing envelope and mail to Absolute Labs using the address found on the envelope.

### TESTING OPTIONS

- **BROAD SPECTRUM:** PCP, meth, cannabis, heroin, amphetamine, cocaine and derivatives.
- **SPECIFIC ILLICIT DRUG CLASS TESTS:**
  - Methamphetamine and derivatives: meth/MDMA/ecstasy
  - Heroin and derivatives: heroin, methadone
  - Opiate derivatives: opium, morphine, codeine
  - Cocaine and derivatives: cocaine, crack, PCP
  - Cannabis and derivatives: hashish, marijuana
  - Fentanyl

### NEED ADDITIONAL KITS?

Drug Identification Kits:  Yes Quantity: \_\_\_\_\_

Additional Samples:  Yes Quantity: \_\_\_\_\_

Paint Identification Kits:  Yes Quantity: \_\_\_\_\_

Additional Samples:  Yes Quantity: \_\_\_\_\_

Contaminant Identification Kits for Automotive Fluids:  Yes Quantity: \_\_\_\_\_

Attn: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Or order online



[absolutelabs.net/kits](https://absolutelabs.net/kits)



**REPORTING INFORMATION**

Company: \_\_\_\_\_ Department: \_\_\_\_\_

Contact/Adjuster: \_\_\_\_\_ Phone: \_\_\_\_\_

Email(s) for results: \_\_\_\_\_

Claim file email (if applicable): \_\_\_\_\_

**SERVICE REQUESTOR** -  Same as above

Name and company: \_\_\_\_\_

**BILLING INFORMATION** -  Same as above

Contact: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**SAMPLING INFORMATION**

Case/claim no.: \_\_\_\_\_

Vehicle year, make, and model: \_\_\_\_\_ Last 6 of VIN: \_\_\_\_\_

Obtained by: \_\_\_\_\_ Date sampled: \_\_\_\_\_ Phone: \_\_\_\_\_

**Drugs to test for** (broad spectrum and/or specific classes, see back for options): \_\_\_\_\_

**SAMPLE DESCRIPTION**

Sample 1: \_\_\_\_\_

Sample 2: \_\_\_\_\_

Sample 3: \_\_\_\_\_

Sample 4: \_\_\_\_\_

Sample 5: \_\_\_\_\_

Sample 6: \_\_\_\_\_

Sample 7: \_\_\_\_\_

**EVIDENCE TRANSFER RECORD**

Relinquished by (signature\*): *X* \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

*\*By signing this form the client agrees to the terms and conditions posted on testittoday.com and absolutelabs.net*