

Checklist for Reasonable Suspicion of an Employee Under the Influence of Alcohol or Other Drugs

Observing employees on the job and spotting the signs and symptoms of possible impairment that could result from use of alcohol or other drugs is a legitimate concern of business. A reasonable suspicion checklist that includes a comprehensive listing of possible warning signs and symptoms can help you decide whether to act in accordance with your organization's reasonable suspicion testing and drug-free workplace policy. It can also aid you in constructing documentation that is effective and useful.

When can reasonable suspicion be substantiated? Reasonable suspicion that an employee is using alcohol or other drugs exists when *"specific, contemporaneous, articulable observations concerning the appearance, behavior, speech, or body odors of the employee demonstrate the possible use of substances."* Where an item is checked, attempt to elaborate on that sign or symptom to better support or substantiate it.

Signs and Symptoms

Is stumbling, staggering:
When, What, Where, How?

Has impaired fine motor skills
When, how, during what activity?

Uses slurred speech:
What statement did he or she attempt to articulate?
When, where?

Shows dramatic weight loss:
Past appearance, when? How appears different now?
Weight loss appears to be how much?

Is frequently sniffing or sniffing: How frequently, on-set, how noticeable?

Behaves erratically:
In what way, provide example, what context?

Acts in an uncoordinated manner:
What attempted behavior, how, doing what, and when?

Has small, (pinpoint) or constricted pupils:
When first noticed, time of day, any pattern?

Looks disoriented, confused: How, confused about what?

Looks sedated, sleepy:
What time of day? Explain pattern and associated behaviors:

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Has fresh needle marks on body:
Where seen? Explain appearance fully:

Has scars or tracks over veins in inner arm
Which arm? Describe visual appearance.

Has droopy eyelids:
When, how often. Any pattern of drooping versus non-drooping? Is this new?

Has large, dilated pupils: When first noticed, pattern, what time of day, any pattern?

Acts unpredictably:
In what manner, what activity, how, when?

Acts frightened, panicked:
Describe event, when, how, appearance

_____ appearance.

Looks anxious:
Describe nervous, worried, or uneasy appearance and context.

Has red, bloodshot eyes:
Frequency, and when first noticed?

Has poor concentration:
Describe how, during what activity, and what evidence was observed:

Has impaired perception of time:
How demonstrated?

Has loss of energy:
How is this demonstrated? Compared to when he or she had "energy"?

Has impaired perception of distance:
Where observed, describe how this was demonstrated and when.

Behaves in an unpredictable manner:
In what way, what behaviors, provide most recent example or two.

Seems "spaced out"
Spaced out means: _____. When or how often?

Appears _____

_____ noted by infliction of physical injuries:
When did this occur? What injury? What were the circumstances?

Seems paranoid:
Statements that appear to indicate paranoia? Suspicious of others? How? Mistrustful? In what way?

Is overactive:
How is this demonstrated? When occurred? Length of time this period lasted?

Is very talkative:
Rapid speech or difficult speech, too chatty? Describe when, and in response to what activity.

Has difficulty focusing:
Focusing on what? Describe appearance or behavior that represents "difficulty focusing."

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Has large dilated pupils
When noticed?

Has glassy or watery eyes:
When noticed? Was this a change from a prior time period when eyes appeared normal?

Has extreme mood swings:
What type of mood to another? Describe mood on most days and how this is different.

Acts belligerent, aggressive, violent:
What type of behavior demonstrated? Toward whom or what? Any provocation prior?

Memory loss:
Describe (i.e., from one day to next, or from several hours or days, or with loss of memory for a period of time). How important is this information?

Smell of alcohol, hair:
Describe activity prior where no odor was

Has runny nose:
Does employee appear ill (cold or flu), or is runny nose only symptom?

Is vomiting; has nausea, intestinal difficulty:
When occurred? Activity prior to occurrence?

Sleeping on the job?
Pattern or just discovered? Have other employees covered up or protected the worker?

Stealing supplies or materials that can be resold?
Describe events or reports if factual.

Demonstrates excessive hunger or thirst:
Time of day or other circumstances?

Inappropriate laughter or giddiness, overreactive to humor:
When noticed? How long did period occur? What seemed unusual about this pattern?

Employee in possession of substances or in close proximity?
Describe circumstances and how discovered:

Miscellaneous:

Presence of alcohol and/or drugs in possession or vicinity?

If there are witnesses to employee's conduct, list below:

Other Observations: (if accident, provide details)

Employee's Explanation of Reasons for His/Her Conduct:

Other Observations: _____

Demeanor or Mood: _____

Eyes: _____

Actions/Movements: _____

Statements: _____

Facial Appearance: _____

Speech Behavior: _____

Walking Behavior: _____

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