

Client Instructions for Placing a FormFox Authorization Order

Log into FormFox Marketplace: <https://integritytesting.workforce.crlcorp.com/clinicportal/ng/#/>

1. Choose "Order"

The screenshot shows the 'ORDER FORM' page in the FormFox Marketplace. At the top, there is a navigation bar with links: Home, Invite, Randomization, Portals, Order, Site Search, Results, and Adm. Below the navigation bar, the page title 'ORDER FORM' is displayed in orange. A progress indicator shows three steps, with the first step '1' highlighted in orange. The main content area contains the following sections:

- Do you want to order for?**
 - An Individual
- COMPANY**
 - Integrity Testing and Safety Administrators (dropdown menu)
- REASON ***
 - Random (dropdown menu)
- PLEASE SELECT SERVICES:**
 - DRUG TEST (LAB) +
 - ALCOHOL TEST +
 - PHYSICAL EXAM +
 - OCCUPATIONAL HEALTH SERVICES (OHS) +
 - CLINICAL HEALTH SERVICES (CHS) +
- CANCEL** (button)

2. Complete Information for drug test. All fields with “*” must be completed.

Note: For DOT testing under Regulatory Mode, **DOT NOT** use **DOT** or **DOT SP**. Use, FAA, FMCSA, PHMSA, FRA , FTA or USCG. Also the category must be completed.

The screenshot shows a web form for configuring a drug test. At the top, there is a dropdown menu for 'Integrity Testing and Safety Administrators'. Below that is a 'REASON *' dropdown menu with 'Random' selected. A section titled 'PLEASE SELECT SERVICES:' contains a red button labeled 'DRUG TEST (LAB)'. Underneath is a 'LAB ACCOUNT *' dropdown menu with 'CRL/ITU.DOT1.REF1-Undefined' selected. A radio button group is present with 'REGULATED TESTING (DOT)' selected, and other options are 'NON-REGULATED DRUG TESTING' and 'POINT OF CARE TESTING (POCT)'. Below this is another radio button group with 'SINGLE' and 'SPLIT' (selected). There is also an 'OBSERVED' checkbox. The 'REGULATORY MODE *' dropdown menu has 'FAA' selected. The 'CATEGORY *' dropdown menu has the placeholder text 'Enter the Category name'. The 'TEST TO BE PERFORMED *' section has a 'Show Long Description' checkbox and a dropdown menu with 'W215/FEDERAL' selected. At the bottom left is a 'CANCEL' button and at the bottom right is an 'ADD' button.

3. Choose “Add”



4. Choose "Confirm"

ORDER FORM

1 2 3

Do you want to order for?

An Individual


COMPANY
Integrity Testing and Safety Administrators

REASON *
Random

PLEASE SELECT SERVICES:

- DRUG TEST (LAB) +
- ALCOHOL TEST +
- PHYSICAL EXAM +
- AUDIOGRAM


CART

SERVICE TYPE	ACCOUNT	TEST TO BE PERFORMED	REMOVE
DRUG (LAB)	 CRL/ITU.DOT1.REF1-Undefined	W215/FEDERAL	X

Count: 1

CONFIRM

CANCEL NEXT



5. Choose Alcohol Test or Physical Exam if you need an additional service. Complete Steps. If need to conduct physicals and the FormFox system will not let you choose this feature, please call our office so we can turn this on.

ORDER FORM

1 2 3

Do you want to order for?
 An Individual

COMPANY
 Integrity Testing and Safety Administrators

REASON *
 Random

PLEASE SELECT SERVICES:

DRUG TEST (LAB) +

ALCOHOL TEST +

ALCOHOL TEST TO BE PERFORMED *
 Enter the Sample Type name

REGULATED TEST
 NON REGULATED


CANCEL ADD

PHYSICAL EXAM +

AUDIOGRAM

CANCEL NEXT

CART

SERVICE TYPE	ACCOUNT	TEST TO BE PERFORMED	REMOVE
DRUG (LAB)	 CRL/ITU.DOT1.REF1-Undefined	W215/FEDERAL	X



Count: 1

CONFIRM

6. For DOT services, the DOT Icon should show next to the service selected:



7. Services chosen for a DOT drug and alcohol test should look like the example below:

SERVICE TYPE	ACCOUNT	TEST TO BE PERFORMED	REMOVE
DRUG (LAB)	 CRL/ITU.DOT1.REF1-Undefined	W215/FEDERAL	X
ALCOHOL	 Breath	Breath	X

8. Choose Next.



9. Complete all information with an “*”.

Note: Under I.D. Type choose the down arrow to choose Employee I.D. or Alternate I.D. if required.

Note: If choosing FMCSA, the screen will default to Driver’s I.D. Driver I.D. is DOT number.

Note: Please also put in the date of birth of employee and an evening phone number. This is required on the CCF.

The screenshot shows a form titled "ORDER FORM" with a progress indicator showing steps 1, 2, and 3, with step 2 highlighted. The form is titled "DONOR INFORMATION" and contains the following fields:

- ID TYPE:** A dropdown menu currently showing "Social Security Number".
- DONOR ID:** A text input field with a search icon.
- FIRST NAME:** A text input field.
- MIDDLE INITIAL:** A text input field.
- LAST NAME:** A text input field.
- EVENING PHONE:** A text input field.
- DAYTIME PHONE:** A text input field.
- BIRTHDATE:** A date input field with a calendar icon and the format "MM/DD/YYYY".

10. Choose “Find Clinic” Next

The screenshot shows a screen titled "Clinic" with three buttons:

- FIND CLINIC:** A blue button with a right-pointing chevron.
- BACK:** A blue button.
- SUBMIT:** An orange button.

11. Type, city, state and/or zip

A text input field with the placeholder text "City and State or Zip or FF Site ID".

12. Hit enter on the keyboard of choose the search icon.



13. Choose the clinic you want to review

14. Choose the down arrow, so you can see more information about the clinic.

A card for a clinic. On the left is a house icon with a green cross and a red pulse line. To the right of the icon, the text reads "32325 CONCENTRA STERLING HEIGHTS (Marketplace Enabled)" followed by "39333 Van Dyke Ave 48313-4620 (1.94 Miles)". On the far right is a small downward-pointing chevron icon. Below all this text is a large orange button with the white text "SELECT SITE". A blue arrow points from the top right of the card to the chevron icon.

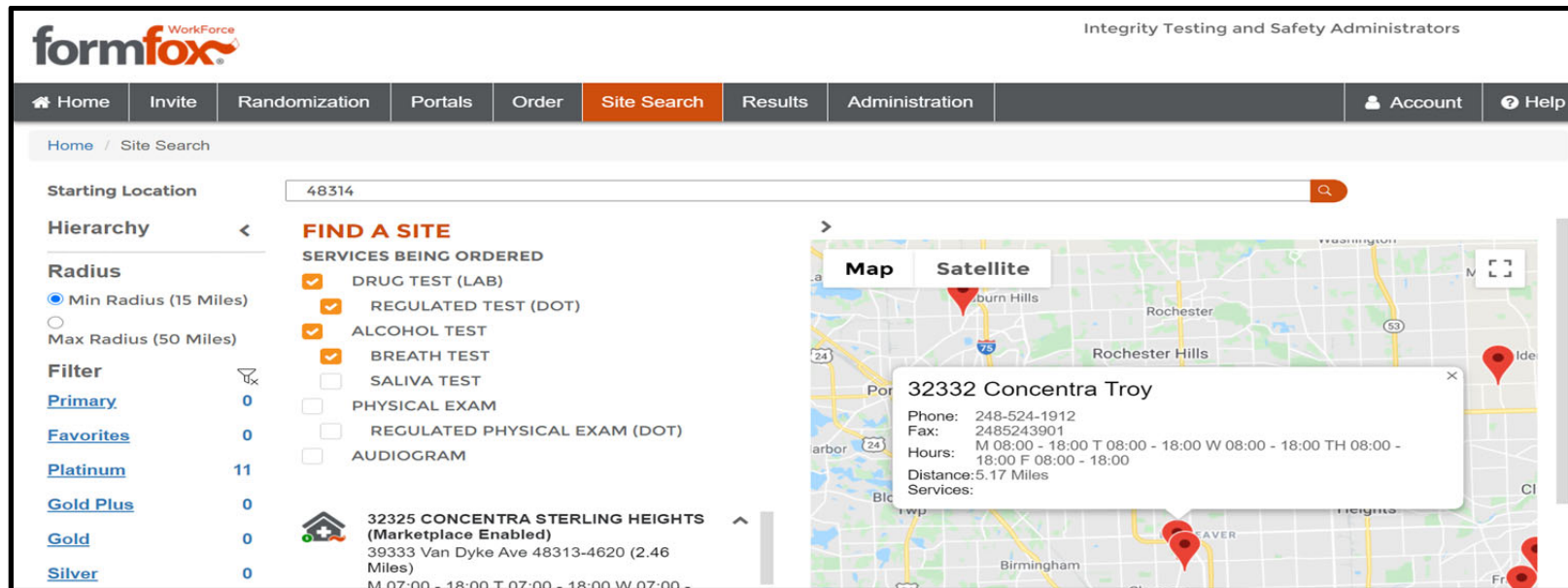
15. Clinic Hours will be provided.

A screenshot of a web browser displaying the formfox website. The browser's address bar shows "integritytesting.workforce.formfox.com/clinicportal/#/site-search". The website header includes the formfox logo and the text "Integrity Testing and Safety Administrators". A navigation menu contains "Home", "Invite", "Randomization", "Portals", "Order", "Site Search" (highlighted in orange), "Results", "Administration", "Account", and "Help". Below the menu, the "Starting Location" is set to "48314". On the left, there are filters for "Favorites" (0), "Platinum" (11), "Gold Plus" (0), "Gold" (0), "Silver" (0), and "Non Marketplace" (2). In the center, a list of services is shown: "REGULATED PHYSICAL EXAM (DOT)" and "AUDIOGRAM", both with unchecked checkboxes. Below these is a detailed card for "32325 CONCENTRA STERLING HEIGHTS (Marketplace Enabled)" with its address, hours ("M 07:00 - 18:00 T 07:00 - 18:00 W 07:00 - 18:00 TH 07:00 - 18:00 F 07:00 - 18:00"), and services "DOT Urine Collection" and "Breath Alcohol Test". An orange "SELECT SITE" button is at the bottom of this card. On the right, a map shows several red location pins in the Sterling Heights area.

16.

Note: If the preferred site is a “Non MarketPlace” or “Silver” site, please email a copy of the authorization form to your ITSA representative or call 586-991-0000 for further directions. We must call the Non MarketPlace and Silver sites for pricing. We do not want your employee to arrive at the clinic before we have established a protocol with the clinic. Many times the clinic turns the employee away or requires payment up front. Involving ITSA immediately, will circumvent this issue

17. On the map position your mouse over the red location icons to see the detail of the clinic phone and fax.



18. Call the clinic to inquire if they need an appointment or additional information like to ensure their breath alcohol machine is in operation.

19. Choose “Select Site” if this is the site you want to use



18. Next an expiration time can be used if desired.

Best practice is to use an expiration date as the authorization defaults to 60 days before the authorization is expired.

Any reason for test besides a pre-employment test should be 1 hour for the expiration date. Also uncheck the checkmark off “Override Allowed” and put in a comment to the site. If the “override” is checked, the collector can proceed with the collection without contacting you. It’s good to put your name as the person ordering the test and a cell phone number where the collector can contact you if and you can also state to contact ITSA at 586-991-0000 for issues.

- 1) The employee arrives to the facility past the hour expiration
- 2) There is a question about a problem collection
- 3) If an alcohol test for a DOT is also ordered, it’s a good practice to put a statement: “Conduct DOT alcohol using a paper DOT ATF Form before performing the Drug Test”

Check your procedures on how long you will allow an employee that is going for a pre-employment test to arrive at the facility.

REMEMBER: This is an authorization form and any notes you need to inform the clinic about should be on the form.

Once you have completed the expiration date, and comments to the site, choose “Submit”.

The image shows a digital form titled "SCHEDULE". It contains the following elements:

- SCHEDULE** (Section Header)
- Clinic Time Zone** (Text input field) with "EST" entered.
- Hours Until Order Expires** (Text input field)
- Estimated Expiration Date** (Text input field)
- OVERRIDE ALLOWED** (Checkbox)
- COMMENTS TO SITE** (Text area)
- BACK** (Button)
- SUBMIT** (Button)

19. You can now email the form to yourself and the employee. You can also text the authorization to the employee

The screenshot displays a 'SERVICE ORDER FORM' with a progress indicator at the top showing three steps, with the third step being active. Below the title, it reads 'DRUG AND ALCOHOL AUTHORIZATION # (51293459)'. A table lists the service types and their corresponding test types:

SERVICE TYPE	ACCOUNT	TEST TO BE PERFORMED
DRUG (LAB)	CRL/ITU.DOT1.REF1-Undefined	W215/FEDERAL
ALCOHOL		Breath

Below the table, it states 'Count: 2' and 'Your order has been placed. Please choose from the following options to send authorization form.' There are three rows of options:

- Print form:** Includes a 'Print PDF' button.
- Email form:** Includes a text input field and a '+' button, followed by a 'Send Email' button.
- Text form:** Includes a text input field and a '+' button, followed by a 'Send Text' button.

A 'FINISH' button is located at the bottom left of the form area.

20. Email or text to the employee

Note: Make sure you have a copy of the authorization form before hitting finish. A reprint can be performed through the “Results” tab but only if the test has not started at the collection site as on the page titled “Order Editing..”

Note: If using a Concentra facility, they require the form to be emailed to the employee so the employee can show the entire form pulled up on their email.

21. Choose “Finish”. This will take you back to the “Order” screen.

ORDER EDITING

- For orders submitted from the **Order tab**, and for which the service has not started, the following fields can now be edited from the **Results tab**.

Updating Donor Demographics

- On the **Results** tab, click the service link in the service column for the order you would like to edit.

	ID NUMBER	AUTHORIZATION ID	NAME	SERVICE
<input type="checkbox"/>	*****9999 CL	30735955	Fox, Fred	Physical Exam Non-Regulated

- Click on the pencil icon to open the editable fields in this window to change an i.d. or employee name.

VIEW/EDIT EVENT DETAILS

DRUGTEST DETAIL FRED FOX ***9999**

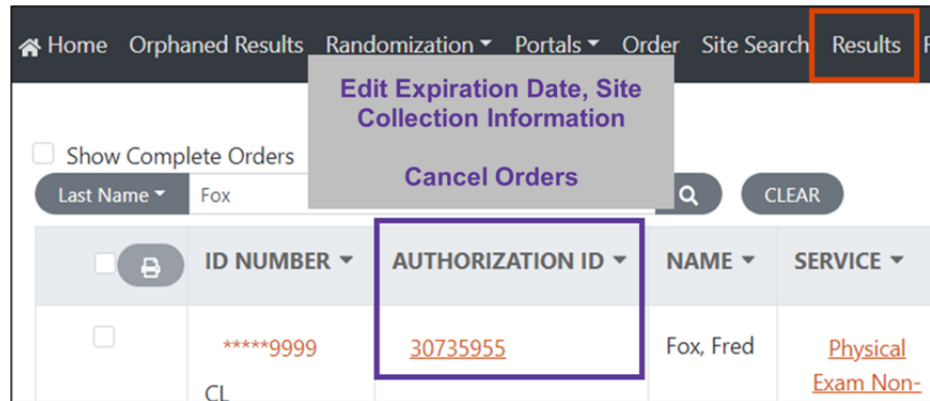
PRIMARY ID *****9999 (SSN)

PERSONNEL ID ⓘ *****9999

Summary:
REASON FOR TEST Pre-Employment

Expiration Date, Collection Site Information, and Canceling Orders

1. On the **Results** tab, click on the Authorization link found in the Authorization column.



2. Click on **Edit Order**



3. Change the selected clinic, add/change the expiration date, and cancel the order in this window.

The screenshot shows a window titled "AUTHORIZATION #30739344" with a close button (X) in the top right corner. The window contains the following information and controls:

- Clinic:** kwardle Sandbox (FF Internal Testing)
1414 S Main St 84115-5314
Phone: 801-906-1142 Fax: 801-906-1142
- CHANGE CLINIC >** (button)
- SCHEDULE**
- Clinic Time Zone:** MST
- Expiration Date:** (input field)
- Cancel Order** (button)
- Save Changes** (button)
- Close** (button)

*** MAKE SURE TO TEXT/EMAIL THE UPDATED AUTHORIZATION FORM TO THE DONOR**

1. On the Results tab, click on the authorization link found in the Authorization ID column. (Same path as editing the order)

Home Orphaned Results Randomization Portals Order Site Search Results Re				
<input type="checkbox"/> Show Complete Orders				
Last Name		Fox		CLEAR
ID NUMBER	AUTHORIZATION ID	NAME	SERVICE	
*****9999 CL	30735955	Fox, Fred	Physical Exam Non-Regulated	

2. Print the PDF or enter the donor's email/mobile phone number. Make sure to click the **Send Email/Send Text** button(s) before you close the window. This will ensure that the donor has the most up-to-date authorization form when they visit the clinic.

AUTHORIZATION #30739344 ✕

Print form: Print PDF

Email form: + Send Email

Text form: + Send Text

Edit Order
Close

ADDITIONAL UPDATES

- The username of the user who edits/cancels an order will be displayed for reference