DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Current List of HHS-Certified Laboratories and Instrumented Initial Testing Facilities Which Meet Minimum Standards To Engage in Urine Drug Testing for Federal Agencies

AGENCY: Substance Abuse and Mental Health Services Administration, HHS.

ACTION: Notice.

SUMMARY: The Department of Health and Human Services (HHS) notifies federal agencies of the laboratories and Instrumented Initial Testing Facilities (IITF) currently certified to meet the standards of the Mandatory Guidelines for Federal Workplace Drug Testing Programs (Mandatory Guidelines).

A notice listing all currently HHS-certified laboratories and IITFs is published in the Federal Register during the first week of each month. If any laboratory or IITF certification is suspended or revoked, the laboratory or IITF will be omitted from subsequent lists until such time as it is restored to full certification under the Mandatory Guidelines.

If any laboratory or IITF has withdrawn from the HHS National Laboratory Certification Program (NLCP) during the past month, it will be listed at the end and will be omitted from the monthly listing thereafter.

This notice is also available on the internet at http://www.samhsa.gov/workplace.

FOR FURTHER INFORMATION CONTACT: Giselle Hersh, Division of Workplace Programs, SAMHSA/CSAP, 5600 Fishers Lane, Room 16N03A, Rockville, Maryland 20857; 240–276–2600 (voice).

SUPPLEMENTARY INFORMATION: The Department of Health and Human Services (HHS) notifies federal agencies of the laboratories and Instrumented Initial Testing Facilities (IITF) currently certified to meet the standards of the Mandatory Guidelines for Federal Workplace Drug Testing Programs (Mandatory Guidelines). The Mandatory Guidelines were first published in the Federal Register on April 11, 1988 (53 FR 11970), and subsequently revised in the Federal Register on June 9, 1994 (59 FR 29908); September 30, 1997 (52 FR 51118); April 13, 2004 (69 FR 19644); November 25, 2006 (73 FR 71858); December 10, 2008 (73 FR 75122); April 30, 2010 (75 FR 22809); and on January 23, 2017 (82 FR 7920).

The Mandatory Guidelines were initially developed in accordance with Executive Order 12564 and section 503 of Public Law 100–71. The “Mandatory Guidelines for Federal Workplace Drug Testing Programs,” as amended in the revisions listed above, requires strict standards that laboratories and IITFs must meet in order to conduct drug and specimen validity tests on urine specimens for federal agencies.

To become certified, an applicant laboratory or IITF must undergo three rounds of performance testing plus an on-site inspection. To maintain that certification, a laboratory or IITF must participate in a quarterly performance testing program plus undergo periodic, on-site inspections.

Laboratories and IITFs in the applicant stage of certification are not to be considered as meeting the minimum requirements described in the HHS Mandatory Guidelines. A HHS-certified laboratory or IITF must have its letter of certification from HHS/SAMHSA (formerly: HHS/NIDA), which attests that it has met minimum standards.

In accordance with the Mandatory Guidelines dated January 23, 2017 (82 FR 7920), the following HHS-certified laboratories and IITFs meet the minimum standards to conduct drug and specimen validity tests on urine specimens:

**HHS-Certified Instrumented Initial Testing Facilities**

Dynacare, 6628 50th Street NW, Edmonton, AB Canada T6B 2N7, 780–784–1190 (Formerly: Gamma-Dynacare Medical Laboratories)

**HHS-Certified Laboratories:**

ACM Medical Laboratory, Inc., 160 Elmgrove Park, Rochester, NY 14624, 844–486–9226

Aller Toxicology Services, 1111 Newton St., Gretna, LA 70053, 504–361–8989/800–433–3823 (Formerly: Kroll Laboratory Specialists, Inc., Laboratory Specialists, Inc.)


Baptist Medical Center—Toxicology Laboratory, 11402 I–30, Little Rock, AR 72209–7056, 501–202–2783 (Formerly: Forensic Toxicology Laboratory Baptist Medical Center)

Clinical Reference Laboratory, Inc., 8433 Quivira Road, Lenexa, KS 66215–2802, 800–445–6917

DrugScan, Inc., 200 Precision Road, Suite 200, Horsham, PA 19044, 800–235–4890

Dynacare, * 245 Pall Mall Street, London, ONT, Canada N6A 1P4, 519–679–1630 (Formerly: Gamma-Dynacare Medical Laboratories)

ElSohly Laboratories, Inc., 5 Industrial Park Drive, Oxford, MS 38655, 662–236–2609

Laboratory Corporation of America Holdings, 7207 N. Gessner Road, Houston, TX 77040, 713–856–8288/800–800–2387

Laboratory Corporation of America Holdings, 69 First Ave., Raritan, NJ 08869, 906–526–2400/800–437–4986 (Formerly: Roche Biomedical Laboratories, Inc.)


Laboratory Corporation of America Holdings, 1120 Main Street, Southaven, MS 38671, 866–827–8042/800–233–6339 (Formerly: LabCorp Occupational Testing Services, Inc.; MedExpress/National Laboratory Center)

LabOne, Inc. d/b/a Quest Diagnostics, 10191 Renner Blvd., Lenexa, KS 66219, 913–888–3927/800–873–8845 (Formerly: Quest Diagnostics Incorporated; LabOne, Inc.; Center for Laboratory Services, a Division of LabOne, Inc.)


* The Standards Council of Canada (SCC) voted to end its Laboratory Accreditation Program for Substance Abuse (LAPSA) effective May 12, 1998. Laboratories certified through that program were accredited to conduct forensic urine drug testing as required by U.S. Department of Transportation (DOT) regulations. As of that date, the certification of those accredited Canadian laboratories will continue under DOT authority. The responsibility for conducting quarterly performance testing plus periodic on-site inspections of those LAPSA-accredited laboratories was transferred to the U.S. HHS, with the HHS’ NLCP contractor continuing to have an active role in the performance testing and laboratory inspection processes. Other Canadian laboratories wishing to be considered for the NLCP may apply directly to the NLCP contractor just as U.S. laboratories do.

Upon finding a Canadian laboratory to be qualified, HHS will recommend that DOT certify the laboratory (Federal Register, July 16, 1996) as meeting the minimum standards of the Mandatory Guidelines published in the Federal Register on January 23, 2017 (82 FR 7920). After receiving DOT certification, the laboratory will be included in the monthly list of HHS-certified laboratories and participate in the NLCP certification maintenance program.
LEGACY LABORATORY SERVICES—METROLAB, 1225 NE 2nd Ave., Portland, OR 97232, 503–413–5295/800–850–5295

MINNEAPOLIS VETERANS AFFAIRS MEDICAL CENTER, FORENSIC TOXICOLOGY LABORATORY, 1 VETERANS DRIVE, MINNEAPOLIS, MN 55417, 612–725–2088, TESTING FOR VETERANS AFFAIRS (VA) EMPLOYEES ONLY

NATIONAL TOXICOLOGY LABORATORIES, INC., 1100 CALIFORNIA AVE., BAKERSFIELD, CA 93304, 661–322–4250/800–350–3515

ONE SOURCE TOXICOLOGY LABORATORY, INC., 1213 GENOVA-RED BLUFF, PASADENA, TX 77504, 888–747–3774 (FORMERLY: UNIVERSITY OF TEXAS MEDICAL BRANCH, CLINICAL CHEMISTRY DIVISION; UTMB PATHOLOGY-TOXICOLOGY LABORATORY)

PACIFIC TOXICOLOGY LABORATORIES, 9348 DE SOTO AVE., CHATSWORTH, CA 91311, 800–328–6942 (FORMERLY: ContiNella Hospital Airport ToxIcoLogy Laboratory)

Pathology Associates Medical Laboratories, 110 West Clift Dr., Spokane, WA 99204, 509–755–8991/800–541–7891x7

Phamatech, Inc., 15175 Innovation Drive, San Diego, CA 92128, 888–635–5840

Quest Diagnostics Incorporated, 1777 Montreal Circle, Tucker, GA 30084, 800–729–6432 (FORMERLY: SmithKline Beecham Clinical Laboratories; SmithKline Bio-Science Laboratories)

Quest Diagnostics Incorporated, 400 Egyp Road, Norristown, PA 19403, 610–631–4600/877–642–2216 (FORMERLY: SmithKline Beecham Clinical Laboratories; SmithKline Bio-Science Laboratories)

Redwood Toxicology Laboratory, 3700 Westwind Blvd., Santa Rosa, CA 95403, 800–255–2159

STERLING Reference Laboratories, 2617 East L Street, Tacoma, Washington 98421, 800–442–0438

U.S. Army Forensic Toxicology Drug Testing Laboratory, 2490 Wilson St., Fort George G. Meade, MD 20755–5235, 301–677–7085, Testing for Department of Defense (DoD) Employees Only

The following laboratory voluntarily withdrew from the NLCP effective March 16, 2018:

Quest Diagnostics Incorporated, 8401 Fallbrook Ave., West Hills, CA 91304, 818–737–6370 (FORMERLY: SmithKline Beecham Clinical Laboratories)

Charles LoDico,
Chemist.

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DEPARTMENT OF HOMELAND SECURITY

FEDERAL EMERGENCY MANAGEMENT AGENCY

[DOCKET ID: FEMA–2018–0004; OMB No. 1660–0085]

AGENCY INFORMATION COLLECTION ACTIVITIES: SUBMISSION FOR OMB REVIEW; COMMENT REQUEST; CRISIS COUNSELING ASSISTANCE AND TRAINING PROGRAM

AGENCY: Federal Emergency Management Agency, DHS.

ACTION: Notice and request for comments.

SUMMARY: The Federal Emergency Management Agency (FEMA) will submit the information collection abstracted below to the Office of Management and Budget for review and clearance in accordance with the requirements of the Paperwork Reduction Act of 1995. The submission will describe the nature of the information collection, the categories of respondents, the estimated burden (i.e., the time, effort and resources used by respondents to respond) and cost, and the actual data collection instruments FEMA will use.

DATES: Comments must be submitted on or before May 2, 2018.

ADDRESSES: Submit written comments on the proposed information collection to the Office of Information and Regulatory Affairs, Office of Management and Budget, Comments should be addressed to the Desk Officer for the Department of Homeland Security, Federal Emergency Management Agency, and sent via electronic mail to dhsdeskofficer@omb.eop.gov.

FOR FURTHER INFORMATION CONTACT: Requests for additional information or copies of the information collection should be made to Director, Information Management Division, 500 C Street SW, Washington, DC 20472, email address FEMA-Information-Collections-Management@fema.dhs.gov or Jennifer Voorhies, Lead, Community Services Individual Assistance/Recovery, jennifer.voorhies@fema.dhs.gov.

SUPPLEMENTARY INFORMATION: This proposed information collection previously published in the Federal Register on January 30, 2018 at 83 FR 4234 with a 60 day public comment period. One comment was received and FEMA modified the collection accordingly. Specifically, FEMA proposed to remove the option A from question 8 on the CCP/ISP Crisis Counseling Assistance and Training Program, Immediate Services Program Application/FEMA Form 003–0–1 and option A from question 12 on the CCP/ISP Crisis Counseling Assistance and Training Program, Immediate Services Program Application/FEMA Form 003–0–1. The removal of this option from the CCP/ISP Crisis Counseling Assistance and Training Program, Immediate Services Program Application/FEMA Form 003–0–1 will result in a minor hour burden reduction of 1.9 hours.

FEMA is also providing a clarification to both the ISP and RSP applications by modifying the first sentence in option B from question 8 on the CCP/ISP Crisis Counseling Assistance and Training Program, Immediate Services Program Application/FEMA Form 003–0–1 and option B from question 12 on the CCP/ISP Crisis Counseling Assistance and Training Program, Regular Services Program Application/FEMA Form 003–0–2 to include “local” service areas. The first sentence will now say: Use the following table to estimate the impacted population for each requested service area (county, parish, tribal land, local, etc.). This addition is a minor clarifying change and will result in no additional burden hours.

The purpose of this notice is to notify the public that FEMA will submit the information collection abstracted below to the Office of Management and Budget for review and clearance.

COLLECTION OF INFORMATION

Title: Crisis Counseling Assistance and Training Program.

TYPE OF INFORMATION COLLECTION: Revision of a currently approved information collection.

OMB Number: 1660–0085

FEMA Forms: FEMA Form 003–0–1, Crisis Counseling Assistance and Training Program, Immediate Services Program Application; FEMA Form 003–0–2, Crisis Counseling Assistance and Training Program, Regular Services Program Application; SF–424, Application for Federal Assistance; SF–424A, Budget Information for Non-Construction Programs; SF–425, Federal Financial Report; HHS Checklist/08–2007; HHS Project Performance Site Location Form; ISP report narrative; Quarterly Report Narratives; Final RSP Report Narrative.

Abstract: The CCP consists of two grant programs, the Immediate Services Program (ISP) and the Regular Services