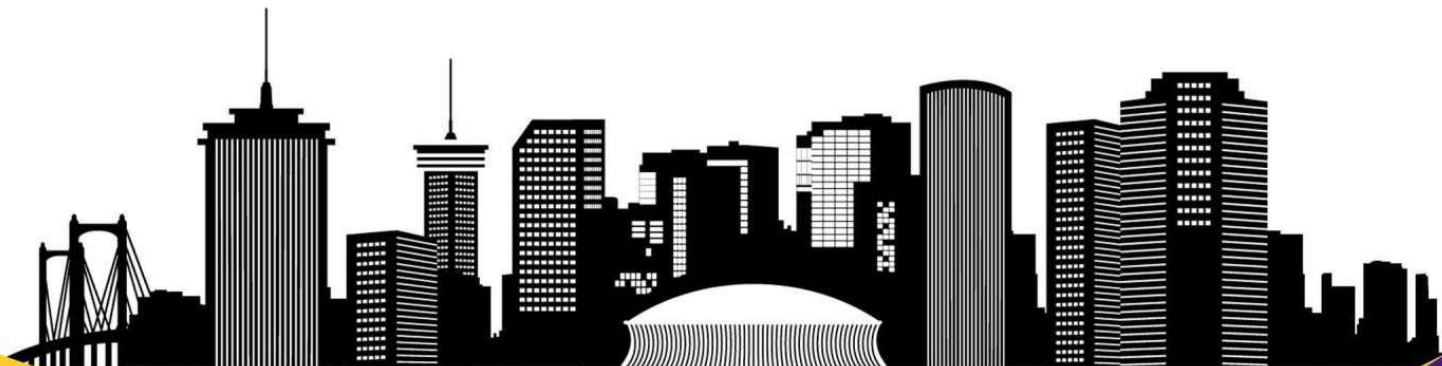


LSU Health
NEW ORLEANS

HRM Liaisons Meeting

September 2023 Meeting

September 21, 2023



LSU Health
NEW ORLEANS

HRM Talent Development

Braylin Artigues, *Talent & Organizational Development Manager*

Performance Evaluation System (PES) Update

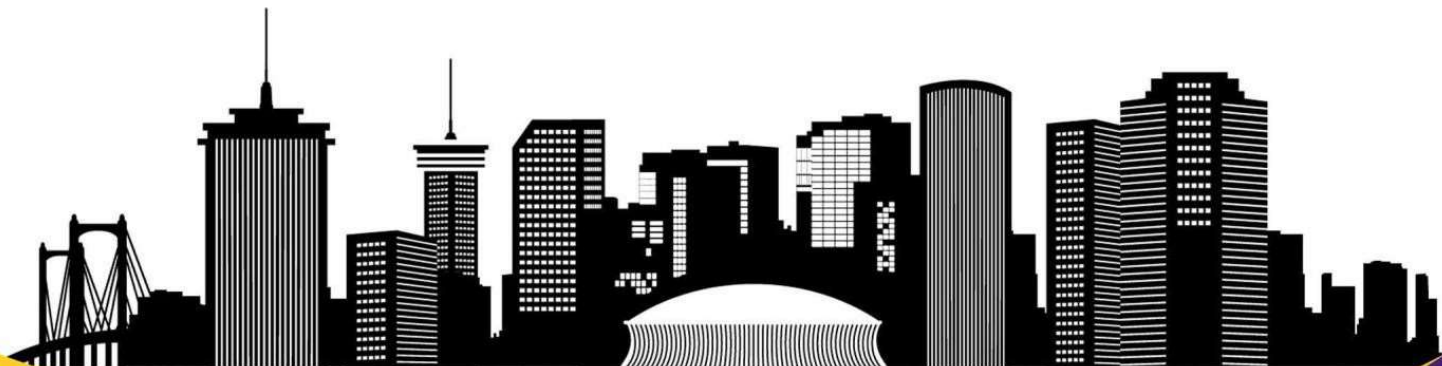
Thank you all for submitting evaluations timely!

Deadline for planning sessions was September 8, 2023.

New Employee Orientation

Proposed to transition to in-person model starting January 2024.

Zoom option will still available, but in-person attendance is encouraged!



LSU Health
NEW ORLEANS

HRM Benefits

Beth Worthen, *Benefits & Retirement Manager*

**01 Oct
thru
15 Nov**

*Nothing says Fall like
pumpkin spice and . . .*

Annual Enrollment

nohrmbenefits@lsuhsc.edu

Benefits Fair

October 26, 2023

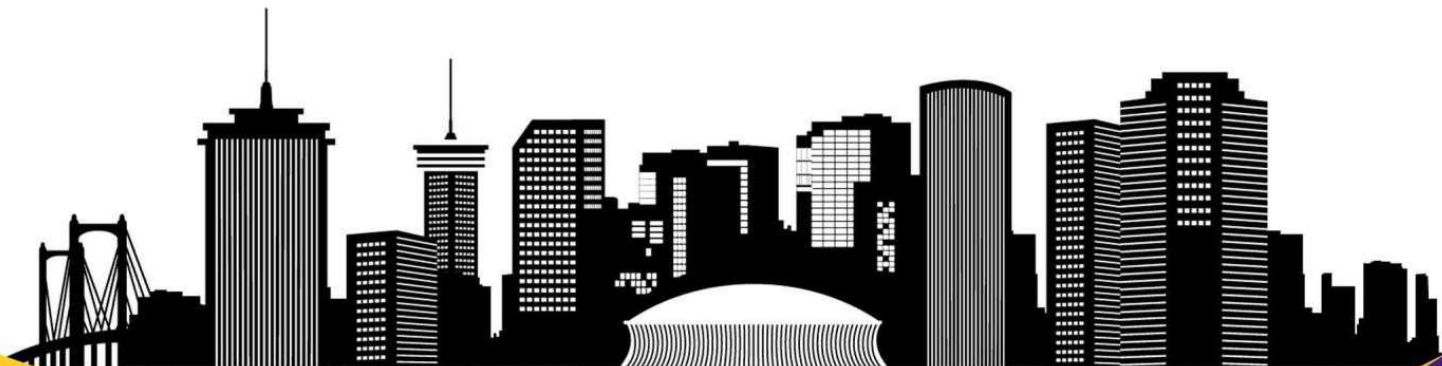
10:00 - 2:00
Main Campus
Allied Health Building
2nd Floor Atrium

October 27, 2023

8:00 - 12:00
Dental School
Administration Building
1st Floor

LSU Health
NEW ORLEANS

Office of Human Resource Management



LSU Health
NEW ORLEANS

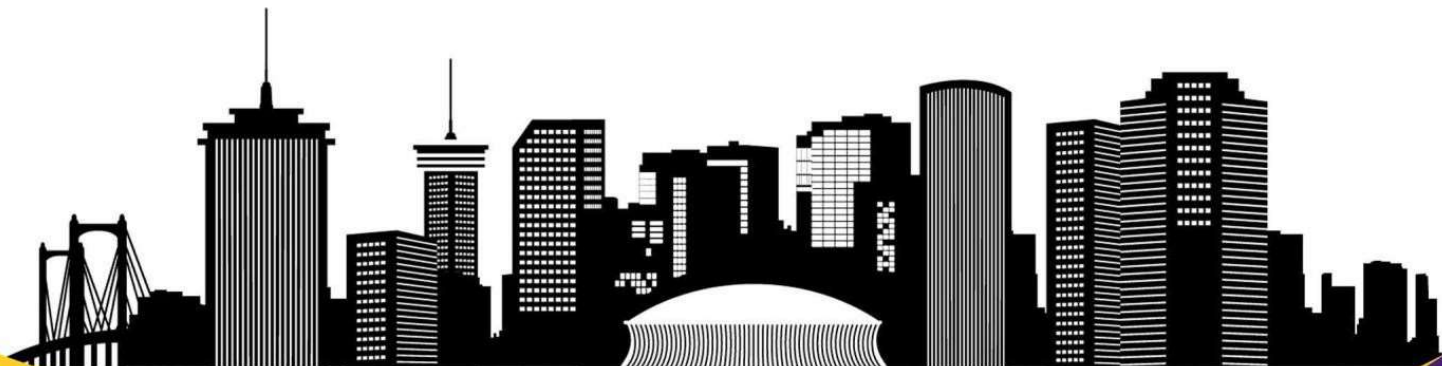
HR Information Systems

Jane Behlen, Assistant Director, HRIS and Talent/Organizational Development

HRM Attendance and Leave Policy

- The team has put together a consolidated Attendance and Leave Policy with the goal of:
 - Providing clarity for our current processes.
 - Consolidates our processes and procedures into one comprehensive resource.
 - Utilizing a consistent layout, look and feel, in alignment with university guidelines.

This document can be found on the HRM website
<https://www.lsuhs.edu/administration/hrm/leave.aspx>



LSU Health
NEW ORLEANS

HRM Talent Acquisition

Shauna Caputo, *Talent Acquisition Manager*

PeopleAdmin Training



Each session will focus on a specific employment type:

Dates: Oct 12 | 10 am-12 pm | Unclassified
 Oct 17 | 10 am-12 pm | Classified
 Oct 24 | 10 am-12 pm | Faculty

Sessions will provide an opportunity to review updated processes, PeopleAdmin guides and ask specific questions.

Watch out for a calendar invite soon and please share invitation with anyone you feel may benefit from the trainings.

Reminder: Please include the executed & signed offer letter before moving hiring proposal to offer accepted.



Our new unclassified employee start date process has been running smoothly and we thank you for partnering with our team to make this happen!

Personnel Resignation Form

Please see forms page on HRM webpage: [Forms \(lsuhsc.edu\)](https://www.lsuhs.edu/hrm/forms)

When employee verbally delivers their resignation, please ask them to fill out, sign & date Personnel Resignation Form.

Department head or authorized representative should also sign & date Personnel Resignation Form.

Return one (1) copy to employee, signed & dated by the department head or authorized representative.

Upload one (1) copy to PeopleSoft electronic termination system & send original to Human Resource Management for employee file.

Retain one (1) copy for Department files.



Office of Human Resource Management

Personnel Resignation Form

Employee's Name: _____
Job Title: _____
Department: _____

Effective Date of Resignation: _____ **Last Day Worked:** _____

Reason(s):

By completing this form, I am requesting to resign from my position with LSUHSC – New Orleans on the close of business of the indicated effective date. I certify that the resignation is executed by me voluntarily and of my own free will and desire to discontinue my services at LSU Health Sciences Center– New Orleans and is not given or executed by reason of any threat, force, duress, menace, or undue influence of any kind by any person or persons whomsoever.

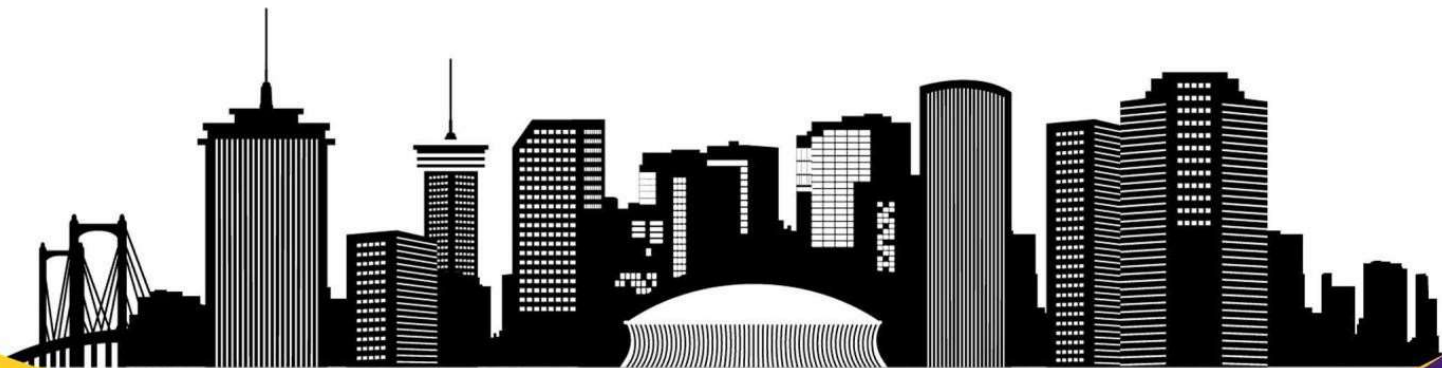
To meet Civil Service requirements, resignation must be accepted by the department head or authorized representative and dated with the employee receiving a signed accepted copy.

Employee's Signature: _____ **Date:** _____

Accepted By: _____ **Date:** _____
(Department Head/Authorized Representative)

Distribution:

1. Return one (1) copy to employee, signed and dated by the department head or authorized representative.
2. Upload one (1) copy to PeopleSoft electronic termination system, send original to Humans Resource Management for employee file.
3. Retain original (1) copy for Department files.



LSU Health
NEW ORLEANS

HRM Employee Relations

Leila McConnell, *Employee Relations Manager*

Employee Separation Process: Manager's Responsibilities

When an employee is separated from the University for any reason including but not limited to resignation, termination for cause, layoff, etc., it is the responsibility of the home department to document the separation and notify Human Resources in a timely manner.

Notification to Human Resources should include entering termination via e-term. For Gratis employees, a PER-3 should be completed. Remember to ask for a forwarding address. For leave taken that has not yet been reported, request a time and attendance voucher.

The manager is responsible and should prepare to collect all University property from the separating employee, such as:

- Employee's University photo identification card
- Parking card
- Office, department, desk, and file cabinet keys
- Any moveable computer equipment, laptops, printers, cell phones, pagers, or other electronic equipment provided to the employee.
- Any other University property (library books, tools, gas cards, p-cards, travel cards, etc.) must be returned to the home department.
- Uniforms issued to the employee must be returned to the home department.

Departments are responsible for notifying appropriate parties of the following:

- Forward p-cards and travel cards to Supply Chain Management for deactivation.
- Forward pagers, phones, or notification of reassignment to Telecommunications.
- Notification of new location and custodian for moveable equipment (laptops, computer equipment, etc.) to Asset Management
- Notification to Parking for the termination of parking privileges.

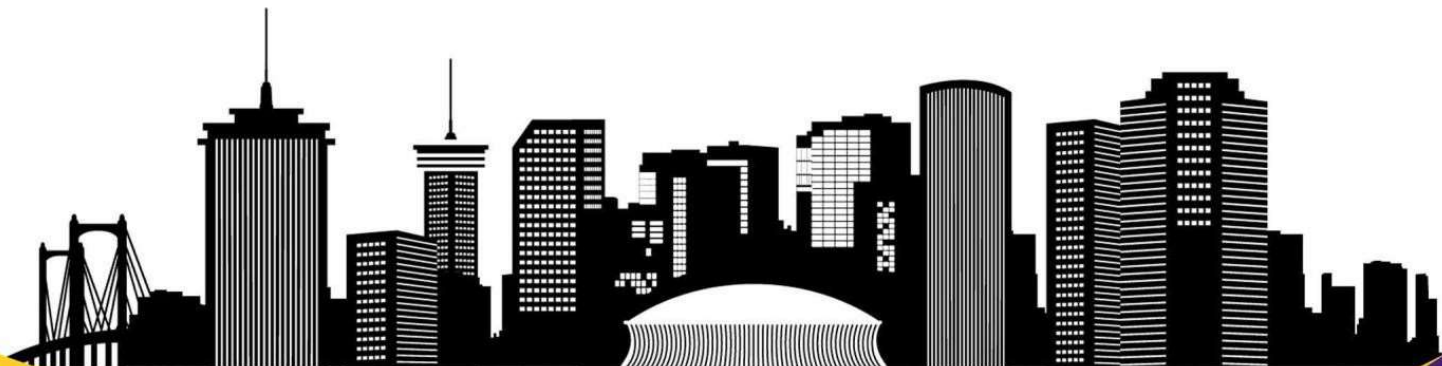
Upon notification, Human Resources is responsible for providing reports of all separations to:

- Asset Management
- Supply Chain Management
- Telecommunications
- Parking

Upon separation employees may arrange to retrieve personal property through their home department.

In such cases, employees must be accompanied by a Department Head or designee to obtain access to the LSUHSC-NO buildings and must be present for the retrieval of all personal effects.

Please note: In cases where the employee does not return to campus, the manager should pack the employee's personal property to mail back to the employee. An inventory list is recommended when packing employee's personal belongings, accompanied by a witness to log items packed, and a copy of the inventory list should be included in the box with the personal items being returned.



LSU Health
NEW ORLEANS

HRM Compensation

Sara Schexnayder, Assistant Director, Compensation and Talent Acquisition

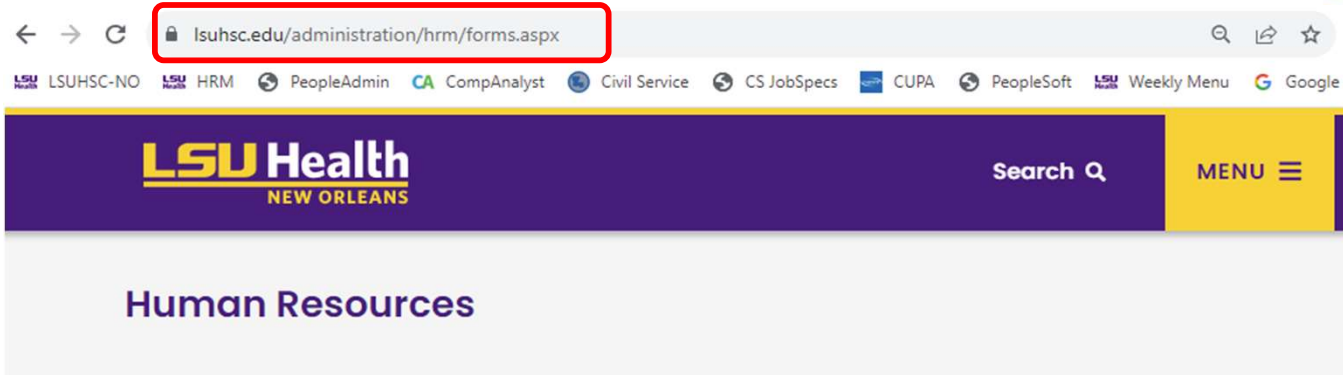
Additional Compensation – CM 61

New form to be used to request additional compensation for performing additional duties

The approved form must be attached to the electronic or paper PER 3

No change to qualifying responsibility or eligibility:

- Taking on additional duties and/or responsibilities unrelated to, or independent of, the duties and responsibilities outlined in their position description
- Full-time non-classified exempt staff are eligible



Home / [Human Resource Management](#) / Forms

- Human Resources
- New Employees
- Benefits
- 2024 Benefits Annual Enrollment
- Compensation
- Employee Relations
- Talent Acquisition and Operations
- Talent Development
- Attendance and Leave

Forms

To be able to view some of our forms, Adobe Acrobat Reader may be required. For a free download of the Adobe Acrobat Reader, please click [here](#).

For any forms that are in formats other than pdf (i.e. Excel, Word), please be sure to preview your pages before printing to ensure that all pages will print the way you would like it to.

- [Administrative Referral Form](#)
- [Agreement To Submit to Alcohol and/or Drug Test](#)
- [ACA Healthcare Marketplace Notice](#)
- [ACT 264 Acknowledgement Form](#)
- [Act 372 - Selective Service Registration](#)
- [Per 3 \(Hourly - Full-time Classified\)](#)
- [Per 3 \(Salary\)](#)
- [Per 3 Online Form - Additional Compensation Guide](#)
- [Additional Compensation Request Form](#)
- [Per 3 Online Termination Guide](#)



REQUEST FOR ADDITIONAL COMPENSATION

Attach this approved form to the PER-3. All sections below must be completed.

Requested for (Name): _____ Empl ID: _____
Above employee's current title: _____
Employee's current department: _____ Dept. supporting: _____
Requestor's name: _____

Reason for Request/Need for additional support: _____

Additional Duties to be assumed: _____

Why is it outside of the scope of normal duties: _____

Estimated hours per week required to do these duties: _____

How will the person carry out this duty along with their regular full time job duties? _____

Dates for Additional duties (up to 6 months, cannot cross fiscal years): _____ to _____

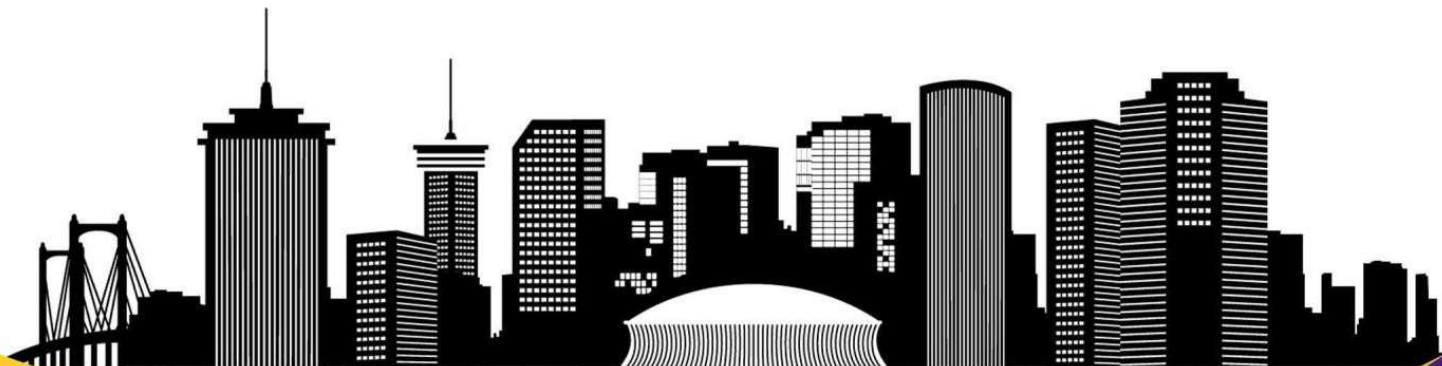
Is this a new request or a continuation of prior additional comp? _____

If continuing, dates of prior additional compensation: _____

Consult with compensation if unsure of amount to recommend. Typical additional compensation amounts:

- Coordinator level filling in for another coordinator role: \$500 per month
- Coordinator level filling in for management level role: \$800 per month
- Management level filling in for similar role: \$1,000 per month

Monthly amount requested: _____



LSU Health
NEW ORLEANS

Campus Assistance Program

Scott Embley, *Director of Campus Assistance Program*

Post Job Offer Drug Testing

Drug Testing Office

Human Development Center
411 S. Prieur, Suite 233

(504) 568-8888

drugtesting@lsuhsc.edu

Substance Abuse and Drug Free Workplace Policy - CM-38

- Alcohol abuse and the illegal use or abuse of other drugs is associated with numerous health, safety, and social problems. The performance of faculty, staff, residents, students and other LSUHSC-NO affiliated individuals may be adversely affected by engaging in substance abuse.
- This policy, including the prohibitions and provisions, shall be used to promote and safeguard the workplace/school environment from the consequences of alcohol and drug use.

Substance Abuse and Drug Free Workplace Policy - CM-38

- Providing a safe, productive, and healthy environment that is consistent with providing the highest quality services to patients and the most effective learning environment for students.
- Creating and maintaining a drug-free workplace pursuant to the Federal Drug-Free Workplace Act of 1988, the Drug Free Schools and Communities Act Amendment of 1989, and the Louisiana Drug Testing Act of 1990.
- Providing a safe and healthy environment for our patients, employees, students, visitors, vendors, suppliers, contractors, and members of our community.

Pre-Employment | Drug Testing / Post Job Offer

- Third Party Administrator – Premier BioTech
<https://www.i3screen.net/login/>
- LSUHSC Drug Testing Office
 - Shauntel Jones Phone (504) 568-8888
 - Scott Embley Email: drugtesting@lsuhsc.edu
- Business Office Managers or designee “order” post job offer testing
- Post job offer testing can occur 90 days prior to the candidate’s start date
- Candidates can not start until drug test is complete and you have received clearance for hire from the Drug Testing Office
 - Clear for hire email must be dated before the start date

Post Job Offer Drug Panel

- 7 Panel + Oxy
 - Amphetamines
 - Barbiturates
 - Benzodiazepines
 - Cannabinoids
 - Cocaine Metabolite
 - Opiates
 - Phencyclidine (PCP)

Medical Marijuana

- La. R.S. 49:1016 (“No state employer shall subject an employee or prospective employee to negative employment consequences based solely on a positive drug test for marijuana, marijuana components, including tetrahydrocannabinols, or marijuana metabolites if the employee or prospective employee has been clinically diagnosed as suffering from a debilitating medical condition and a licensed physician has recommended marijuana for therapeutic use by the employee in accordance with La. R.S. 40:1046.”)
- In accordance with La. R.S. 49:1016, LSUHSC-NO shall not be construed to prohibit from imposing negative employment consequences on an employee who uses or is impaired by marijuana on the premises of the employer or during work hours or an employee whose principal responsibility is to operate a state vehicle, maintain a state vehicle, or supervise any employee who drives or maintains a state vehicle.

Medical Marijuana

- In accordance with La. R.S. 49:1016, LSUHSC-NO shall provide an employee with the opportunity to show that he/she has been clinically diagnosed as suffering from a debilitating medical condition and a licensed physician has recommended marijuana for therapeutic use by the employee in accordance with La. R.S. 40:1046.
- La. R.S. 49:1016 does not apply to emergency medical services, law enforcement, public safety officials, any state employee of the horse racing commission, and firefighter services.

Before Drug Screen can be submitted

- Two Documents
 - Agreement to Submit to an Alcohol and/or Drug Test and Authorization for the Release of Test Result
 - LSUHSC New Orleans Campus Post Job Offer Drug Testing Instructions for Job Candidates and House Officers
 - <https://www.lsuhs.edu/orgs/campushealth/drugtesting.aspx>
- The “agreement to submit to an alcohol and/or drug test and authorization for the release of test result” must be signed by the candidate and returned
- The “agreement to submit to an alcohol and/or drug test and authorization for the release of test result” must be placed in the candidate's file

AGREEMENT TO SUBMIT TO AN ALCOHOL AND/OR DRUG TEST
AND AUTHORIZATION FOR THE RELEASE OF TEST RESULTS

I have been requested by LSUHSC to submit to an alcohol and/or drug test.
(Referring Source)

I have been informed and I understand that my agreement to submit to the requested alcohol and/or drug test is completely voluntary on my part and that I have the right to refuse to submit to the test(s). I am aware and have been told that my refusal to submit to the tests will make me ineligible to be considered for employment and I will be disqualified from employment to an LSUHSC facility for up to one year or may be grounds for disciplinary action against me up to and including termination/expulsion. I am aware that if I refuse to submit to drug screening or if my test is positive, I will be disqualified for employment or appointment. Additionally, a prospective employee who intentionally tampers with the sample, the chain of custody (COC), identification procedures, or test results may be disqualified from employment for a period of three years.

I understand that if the Medical Review Officer (MRO) (and/or the MRO agent and/or staff) or Drug Testing Coordinator (DTC) calls me about my drug test results I should call them back immediately. I understand that if I do not contact and talk with the MRO (and/or the MRO agent and/or staff) then I have turned down the opportunity to discuss the results and the MRO (and/or the MRO agent and/or staff) will report my drug test as a positive.

I have been informed and am aware that the results of the alcohol and/or drug test(s) are protected by confidentiality requirements for alcohol and drug patient records under Federal laws and regulations. Therefore, I voluntarily agree to the below stated release of the test results.

I, _____ (please print), authorize the MRO (and/or the MRO agent and/or staff) and the DTC who will receive the results of my alcohol and/or drug test to disclose the results of the test(s) to the appropriate Human Resource Director, my supervisor (as appropriate for employees, students, non-employees, or job applicants), the Administrative Body over me, and/or their designee for the purpose of determining the appropriateness of my eligibility for continued employment/enrollment. I authorize the above individuals and/or their designee to disclose those results to other Human Resource Directors, divisions, hospitals, facilities or their designees within the LSUHSC, and to other state and federal agencies, including the Department of State Civil Service, and LSU Health Care Network if appropriate, and /or to the above mentioned referring source.

I understand that the MRO (and/or the MRO staff) may inform the Human Resource Director, my supervisor (as appropriate for employees, students, non-employees, or job applicants), the Administrative Body over me, their designee and/or above referring source of any legally obtained prescription medication I may be taking if it is felt that the usage of this medication(s) can or has compromised my fitness for duty in my capacity as an employee, student, or non-employee.

I also understand that withdrawal of this permission prior to, or any time after, the release of the results of the alcohol and/or drug test to the above named individuals is grounds for terminating my employment/enrollment.

Daytime Phone # _____ Evening Phone # _____
Date of Birth _____ Social Security # (last 5 digits only) _____
Street Address _____
City _____ State _____ Zip Code _____
Email _____ Printed Name _____

Signature: _____ Date: _____
Witness Signature: _____ Date: _____

***** TO BE COMPLETED BY LSUHSC-NO DESIGNATED AUTHORITY ONLY *****
Collection Deadline: _____
Dept: _____ Peoplesoft # _____
Designated Administrative Body _____
Email Address for Results _____

"This consent form is subject to revocation at anytime except to the extent that the program which is to make the disclosure has already taken action in reliance on it. If not previously revoked this consent will terminate upon conclusion of any proceedings, administrative, judicial or internal, as to which the test results are sought to be used."
NOTE: To the Party receiving this information: This information has been disclosed to you from the records whose confidentiality is protected by federal law. Federal regulations (42 CFR Part 2.31(a)(2)) prohibit you from making any further disclosure of it without the specific written consent of the person to whom it pertains, or as otherwise permitted by such regulations. A general authorization for the release of medical or other information is not for this purpose.

LSUHSC NEW ORLEANS CAMPUS POST JOB OFFER DRUG TESTING
INSTRUCTIONS FOR JOB CANDIDATES & HOUSE OFFICERS

The following is being provided to you in order to comply with the Louisiana State University Health Sciences Center, New Orleans (LSUHSC-NO) campus Substance Abuse and Drug Free Workplace Policy. LSUHSC-NO requires drug testing of all full time faculty, staff, and house officers once a position has been offered. If you have accepted the position, please follow these steps closely. Failure to comply with these guidelines could result in ineligibility for employment. If you have any questions, please contact the department who is hiring you.

LSUHSC-NO and its drug testing third party administrator (TPA), Premier Biotech, has established several Pre-Authorized Collection Sites within the New Orleans Metropolitan Area, Louisiana, and all 50 states. Only authorized collection sites can be used for your post job offer drug screen. LSUHSC-NO will pay for your post job offer drug screen performed at another location only if prior authorization is obtained. You will have five (5) working days to obtain this drug test after notification.

Please follow the sets of instructions carefully.

1. PRE-AUTHORIZED COLLECTION SITES

- The "Agreement To Submit To An Alcohol And/Or Drug Test And Authorization For The Release Of Test Results" form will be provided to you by either your business office manager, program coordinator, or Human Resource Management.
- Read, complete, and sign the Agreement To Submit To An Alcohol And/Or Drug Test And Authorization For The Release Of Test Results form and return the document to your business office manager, program coordinator, or Human Resource Management prior to taking your post job offer drug screen.
- You will receive an email from Premier Biotech or i3screen with a "Donor Pass." The "Donor Pass" will have the name and address of the approved collection site, collection site hours, your order number, and collection deadline.
- Take the "Donor Pass" and one of the following with you to the approved collection site: 1) valid driver's license, 2) valid picture state identification, or 3) passport.
- You must take your post job offer drug screen by the collection deadline date.
- If you are in a location where there are no pre-authorized collection sites in a reasonable distance, Premier Biotech and the LSUHSC Drug Testing office will attempt to locate an alternate collection site for you.

2. PRESCRIPTION MEDICATION

- If you are taking prescription medication(s) that could result as non-negative on your post job offer drug screen, you do not have to share this information with your department, Human Resource Management, or the collection site.
- The MRO (physician trained to determine urine drug screen results) will contact you and request medical information and prescription(s) pertaining to any medications that have shown up on your post job offer drug screen. If the MRO or a staff member from the LSUHSC Drug Testing Program calls you about your drug test results, you must respond within 72 hours. If you fail to do so, the results will be reported without your input.

3. CHALLENGE THE RESULTS OF A DRUG TEST

- LSUHSC-NO allows any individual who wishes to challenge the drug test results to do so. You must do so within 72 hours of notification of a positive test result.
- If you believe a drug test is in error or wish to challenge the drug test results, it is your responsibility to notify the MRO and the appropriate Administrative Body or their designee. You must have the same sample retested at your own expense at a laboratory that is SAMHSA certified. The second test must be of equal or greater sensitivity for the drug in question as was the initial test.

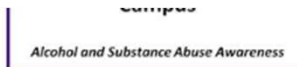
4. PRE-EMPLOYMENT DRUG TESTING WILL SCREEN FOR THE FOLLOWING:

- Amphetamines, Barbiturates, Benzodiazepines, Cannabinoids, Cocaine, Opiates, Phencyclidine
- LSUHSC New Orleans Campus complies with the Federal Drug-Free Workplace Act which prohibits cannabis use.
- Note: Certain CBD products can test positive for Cannabis which will disqualify you from employment if test results are positive.

5. Questions concerning your hiring and your "Agreement To Submit To An Alcohol And/Or Drug Test And Authorization For The Release Of Test Results" form should be directed to the department who is hiring you.

I have read and understand these instructions.

Signature: _____ Date: _____



Location and Contact Information

Human Development Center
411 S. Prieur St., Suite 233
New Orleans, LA 70112

Phone: (504) 568-8888

Email: drugtesting@lsuhsc.edu

Laboratory Testing

The types of urine drug tests conducted are Post Job Offer, Reasonable Suspicion/Cause, Periodic Monitoring/Aftercare, Post-Accident, and Random.

Confidentiality

All client information and records are held strictly confidential and are shared only with individuals authorized by our clients.

Drug Testing Forms and Instructions

- [Administrative Referral Form - Electronic Form](#) (Google Chrome recommended) or [Print and complete by hand](#)
- [LSUHSC Employee Random Drug Testing Form](#)
- [Questions Regarding LSUHSC Drug Testing Program](#)
- [LSUHSC New Orleans Supervisor's Instructions - Drug Testing and Fitness For Duty \(Call Us At 568-8888\)](#)
- [LSUHSC Baton Rouge/Lafayette/Other Supervisor's Instructions - Drug Testing and Fitness for Duty](#)
- [Post Job Offer Drug Testing Instructions for Job Candidates & House Officers](#)
- [Agreement To Submit to Alcohol and/or Drug Test](#)
- [Random Drug Testing FAQ for Supervisors](#)

DER Drug Test Training and Instructions

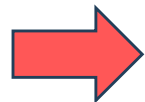
- [Drug Testing Procedures for Pre-Employment Handbook \(PDF\)](#)

Order Post Job Offer Drug Testing - Premier Biotech / i3screen

- [Premier Biotech / i3screen](#)

If you have questions or comments about our website, [click here](#) to contact us. We appreciate your feedback.

- Forms
- Handbook
- Premier Biotech Site





If you are a current i3screen user, please sign in.

This is a password protected website.

Remember me

Log In

- If you need access, email Drugtesting@lsuhsc.edu
- You will receive an email from **Premier Biotech** and you'll have 24 hours to access your account once you receive the email
- Username is your lsuhsc.edu email
- Temp password will be provided
- You create your own password

Customer Administration

Navigation

- Account Administration
- Occupational Health Screening
 - Create New Order
 - All Recent Cases
 - Pending Orders
 - Expired Orders
 - Pending Results
 - Completed Results
 - New POCT Order
 - New i3ccf Order
 - i3ccf Orders
 - Completed Collections
 - My Provider Network
- Participants
- Details

HRO Certification Documents

Reminder that while oral fluid has been approved for DOT testing, there are currently no laboratories certified to perform testing.

OLD FORM

STEP 2: COMPLETED BY COLLECTOR (make remarks when appropriate). Collector make appropriate temperature within 4 minutes.

REMARKS:

STEP 3: Collector affixes seal(s) to bottle(s); Collector dates seal(s); Donor initials seal(s); Donor completes STEP 3 on Copy 1 (HRO Copy)

NEW FORM

STEP 2: COMPLETED BY COLLECTOR (make remarks when appropriate). URINE ORAL FLUID

COLLECTION: Split Single New Provided; Enter Remark

ORAL FLUID: Self Type Serial Concomitant Substituted Each Device With Separate Code? Yes No Volume 9 (OXY) (Optional)

STEP 3: Collector affixes seal(s) to bottle(s); Collector dates seal(s); Donor initials seal(s); Donor completes STEP 3 on Copy 2 (HRO Copy)

WHAT IF I DON'T HAVE THE NEW PAPER CCFs?
 Order a supply of new CCFs NOW through your normal channels!
 OR
SWITCH TO eCCFs!

There is no better time to start ordering your DOT drug testing electronically. Save time and money without paper CCF reorders and shipping to donors, while reducing errors at the collection site and gaining valuable tracking insight into the process.

PREMIER BIOTECH - LA - Labor Day Hours

Premier Biotech will be closed to observe Labor Day on Monday, September 4th. We will resume normal business hours (8-5 EST) on Tuesday, September 5th. Please make sure you are reaching out to the collection sites to verify their holiday hours.

Wishing you a happy and safe holiday.

PREMIER BIOTECH - LA - Collection Site List

To view the PREMIER BIOTECH team collection site list, please click the button below

[PREMIER BIOTECH - LA -Collection Site List](#)

PREMIER BIOTECH - Team Contact List

To view the PREMIER BIOTECH team contact list, please click the button below

[PREMIER BIOTECH Team Contact Sheet 2023](#)

Premier BIOTECH Create New Order

Step 1: Order Information | Step 2: Participant Information | Step 3: Cho

Order Information

Company Location
 EMP. CAP/DT

Package
 7 PANEL URINE + OXY

Order Reason
 PRE-EMPLOYMENT

Testing Package Details


Company Location
 EMP. CAP/DT

Package Name
 7 PANEL URINE + OXY

Program
 NON-DOT

Default Order Expiration
 09/21/2023 11:59

Continue

 Create New Order

Step 1: Order Information | **Step 2: Participant Information** | Step 3: Choose Collection Site | Step 4: Sub

Participant Information
Use the form below to enter participant information. All required fields are in **bold**.

Participant

First Name Scott	Middle Name	Last Name Embley
SSN/EID 12345	DOB	
Phone 1 504-568-8888	Phone 2	
People Soft ENTER PEOPLE SOFT NUMBER	Order Expires 09/21/2023 11:59:59 PM	Observed Collection? <input checked="" type="radio"/> No <input type="radio"/> Yes

Participant Address
Select this to view Collection Sites near the participant's address.

Address	Address 2	
City	State ▼	Zip

Order Handling Options

Scheduling Method

- Complete order for participant
- Send link to participant to schedule order

Delivery Method

If you do not select an option you must send the Donor Pass to the participant yourself.

Send Donor Pass to participant via email

Email Address

CC

Continue

Premier BIOTECH Create New Order

Step 1: Order Information Step 2: Participant Information Step 3: **Choose Collection Site**

Choose Collection Site
Choose a collection site for the participant. Use the company location or search for the collection sites in an alternate location.

17 Collection Sites found near: 411 S. Prieur St, New Orleans, LA 70112 [Change Starting Location](#)

View Sites As: [Map](#) [List](#)


Page: < 1 > Show Results: 5 10 20

* Fees subject to change if collection completed at an alternate site from the location selected.

- 1. TULANE DRUG ANALYSIS LAB - NEW ORLEANS, LA (POYDRAS ST)**
1340 Poydras St
STE 2040
New Orleans, LA 70112
Distance 0.62 mi.
Order Type: Electronic
Open: Mon Tue Wed Thu Fri Sat Sun
[Select Site](#)
- 2. LABCORP - NEW ORLEANS, LA (STE 320A)**
3525 Prytania Street
STE 320A
New Orleans, LA 70115
Distance 2.26 mi.
Order Type: Electronic
Open: Mon Tue Wed Thu Fri Sat Sun
[Select Site](#)
- 3. LABCORP AT WALGREENS PSCX05710 - METAIRIE, LA (VETERANS MEMORIAL BLVD)**
1717 Veterans Memorial Boulevard
Metairie, LA 70005
Distance 4.63 mi.
Order Type: Electronic
Open: Mon Tue Wed Thu Fri Sat Sun
[Select Site](#)
- 4. LABCORP - GRETNA, LA (OCHSNER BLVD)**
120 Ochsner Boulevard
Gretna, LA 70056
Distance 6.15 mi.
Order Type: Electronic
[Select Site](#)

[Close](#) [Start Over](#)

Site Details



Quest Diagnostics™

TULANE DRUG ANALYSIS LAB - NEW ORLEANS, LA (POYDRAS ST)
1340 Poydras St
STE 2040
New Orleans, LA 70112

Phone
504-333-6163

Fax
504-333-6164

Site Type
PPN

Order Type
Electronic

Hours of Operation:

Sun	Closed
Mon	8:30 AM - 6:00 PM
Tue	8:30 AM - 6:00 PM
Wed	8:30 AM - 6:00 PM
Thu	8:30 AM - 6:00 PM
Fri	8:30 AM - 6:00 PM
Sat	Closed

[Cancel](#) [Select Site](#)

Step 1: Order Information Step 2: Participant Information Step 3: Choose Collection Site **Step 4: Submit Order** Step 5: View Donor Pass

Submit Order
Review the order details and submit order.

Order Information
Order Reason: PRE-EMPLOYMENT
Package: 7 PANEL URINE + OXY
Company Location: EMP. CAP/DT
Collection Site: TULANE DRUG ANALYSIS LAB - NEW ORLEANS, LA (POYDRAS ST)
Collection Site Address: 1340 Poydras St
STE 2040
New Orleans, LA 70112


Participant Information
First Name: Scott
Last Name: Embley
Primary ID: 12345
Phone: 504-568-8888
Email: semble@lsuhsc.edu
Address: 411 S. Prieur St
New Orleans, LA 70112


Donor Pass | Scheduling Link sent to:
Email: semble@lsuhsc.edu
CC: semble@lsuhsc.edu

Custom Message for Participant on Order Confirmation Form

← → Paragraph B I A [color picker] [background color picker] [bulleted list] [numbered list] [link] [unlink] [undo] [redo] [help]

Send clearance email to NAME + EMAIL



p 

Close Start Over

Back Submit Order



✔ Step 1: Order Information |
 ✔ Step 2: Participant Information |
 ✔ Step 3: Choose Collection Site |
 ✔ Step 4: Submit Order |
 Step 5: View Donor Pass



View Donor Pass
 Review the donor pass.

Order Number: 2023091412596

Your Order was Successfully Placed
 Next Steps:

- [Print](#) or [download](#) this Donor Pass.
- The donor must bring this Donor Pass with them to the collection site.

Donor Pass
1/1
 

DONOR PASS

Your order / registration will expire on September 21, 2023, at 11:59 PM


Participant Name: Scott Embley **ID:** *2345

Test Reason: PRE-EMPLOYMENT

Service Provider:

TULANE DRUG ANALYSIS LAB -		Sun	Mon	Tue	Wed	Thu	Fri	Sat
1340 Poydras St	Open	Closed	8:30 AM	8:30 AM	8:30 AM	8:30 AM	8:30 AM	Closed
STE 2040	Close		6:00 PM	6:00 PM	6:00 PM	6:00 PM	6:00 PM	
New Orleans, LA 70112	Lunch	Closed	Open	Open	Open	Open	Open	Closed
PH: 504-333-6163								
FX: 504-333-6164								

Test/Service: URINE NONDOT

Account: 11272152	Panel Code: 41392N	 Q08557700
Order Number: Q08557700	Location Code: ENTER PEOPLE SOFT	
Lab Name: Quest Diagnostics		

Challenging the Results of a Drug Test

- LSUHSC-NO allows any individual who wishes to challenge the drug test results to do so. You must do so within 72 hours of notification of a positive test result.
- If you believe a drug test is in error or wish to challenge the drug test results, it is your responsibility to notify the MRO and the appropriate Administrative Body or their designee. You must have the same sample retested at your own expense at a laboratory that is SAMHSA certified. The second test must be of equal or greater sensitivity for the drug in question as was the initial test.

Questions?


**The next Hybrid Liaisons Meeting will be held on
Thursday, October 19, 2023 (10:00a-11:00a)**

Please let us know if there is
a topic that you would like to
hear about!

MS Forms: [LINK HERE](#)



Human Resource Management Contacts		
Chief Human Resources Officer	Jill Fragoso	#3-2634
Employee Relations		
Employee Relations Manager	Leila McConnell	#3-4947
Employee Relations Consultant	Carla Popularas	#3-5798
Employee Relations Consultant	Mike Jarvis	#3-1680
Benefits		
Associate Director, Human Resources	Aaron Miley	#3-2954
Benefits Manager	Beth Worthen	#3-8742
Benefits Generalist (Leave Administrator)	Mark Gele	#3-7812
Benefits Consultant	Laurie Kirzner	#3-8741
Benefits Consultant	Maddie Hopkins	#3-2455
Benefits Consultant	Terry Varnado	#3-2799
Benefits Coordinator	Krystal Citty	#3-7780
Human Resource Information Systems (HRIS), Talent and Organizational Development		
Assistant Director, HRIS and Talent/Organizational Development	Jane Behlen	#3-1616
File Room Coordinator	Janet Magee	#3-8158
Administrative Coordinator 3	Michael Mosley	#3-4834
Human Resources Specialist	Myra Christophe	#3-1781
Human Resource Analyst	Beverly White	#3-3916
Manager, Talent and Organizational Development	Braylin Artigues	#3-1609
HRM Talent Development Coordinator	Alexander-Quang Tran	#3-2214
Compensation and Talent Acquisition		
Assistant Director, Compensation and Talent Acquisition	Sara Schexnayder	#3-4226
Talent Acquisition Manager	Shauna Caputo	#3-2047
Human Resources Specialist	Timethia Brown	#3-4835
Compensation Analyst	Kel Brownfield	#3-7378
HR Generalist	Cristina Guillory	#3-2044
HR Generalist	Alicia Rodriguez	#3-8740
HRM Talent Acquisition Coordinator	Tannia Jacob	#3-4832



thank
you