

## Instructions for Online Reporting of DOT FMCSA Drug and Alcohol Testing Results

The Federal Motor Carrier Safety Administration (FMCSA) collects drug and alcohol (D&A) testing results to quantify the incidence of drug and alcohol abuse in the commercial motor vehicle industry; this data is used to determine FMCSA's random drug and alcohol testing rate for the next year.

Each year FMCSA collects data from:

- A random sample of companies with fewer than 1,000 drivers
- All companies with 1,000 or more drivers

FMCSA notifies companies of reporting requirements by email and physical mail. Only new users receive an activation code, currently registered users will login using previously established login.gov credentials. All interstate and intrastate commercial motor vehicle operators (including owner operators) that are selected for the annual survey are required to participate in a U.S. Department of Transportation (DOT) drug and alcohol program.

**Users must respond to this notice and complete the DAMIS filing for the previous year drug and alcohol results by June 15, 2025. If you encounter technical problems with the DAMIS survey site call **1-800-832-5660**.**

### FMCSA DAMIS Updates

What's new with the DOT's Drug and Alcohol Management Information System (DAMIS)?

[Login.gov](https://login.gov) is a secure sign-in service used by the public to access participating government agencies' systems.



As of 2024 all **NEW** DAMIS system users are required to register at Login.gov to access DOT's DAMIS system. FMCSA DOT-regulated employers required to input and submit drug/alcohol testing data will go to <https://damis.dot.gov>. **NEW** users should click "**register**" and enter the provided 32-character activation code to register an email address with DAMIS. If you already have a registered account with DAMIS click "login".



**NOTE: Active users (last year's DAMIS system users):** If your DAMIS account from last year has not changed go to <https://damis.dot.gov>. Click "login" and enter your Login.gov credentials from last year to enter your data.

You will only click 'register' if your email needs to be added to a different company's DAMIS account. In this case, you will need a new activation code by contacting FMCSA's Customer Contact Center at 1-800-832-5660. Request to speak with FMCSA's DAMIS Helpdesk. Notify the helpdesk that you are adding your email to a different company's DAMIS account and need a new activation code.

## Instructions: Employers Section

Once you have accessed your account:

Enter or Edit Your Company Data (Displays Pages 2-3)

United States Department of Transportation  
Federal Motor Carrier Safety Administration

2023 Drug & Alcohol Testing Management Information System Logout

Status			
Company Name	Data	Status	Users
FMCSA TEST COMPANY Adams, WA	<a href="#">Enter or Edit your Data</a> <a href="#">View Your Data (Read Only)</a> <a href="#">MIS Data Collection Form (PDF Format)</a>	● 02/23/2024 11:47:44 AM	Add/Edit Users

**Legend** ● Completed and Signed ● Data is Incomplete ● No Data Has Been Entered

In order to view PDF files, you will need the Adobe Reader®™, available from Adobe Systems, Inc. You may obtain this free plug-in at: <https://get.adobe.com/reader/>

DOT Privacy Policy  
Paperwork Reduction Act Notice  
(as required by 5 CFR 1320.21)

1. Enter your company's information:
  - a. Name
  - b. "Doing Business As (DBA)" Name
  - c. Address
  - d. Email
2. Enter the name and complete telephone number of the company official, certifying the accuracy of the report and the date that the person certified the report.
  - a. The company official cannot be a service agent (e.g., representative of a consortium or third-party administrator).
  - b. A service agent can prepare the report, but a company official (e.g., safety officer or other authorized company representative) must certify the accuracy of the report by submitting it.
  - c. If someone other than the certifying official completed the D&A testing form, enter that person's name and phone number.
3. If you use a Consortium/Third Party Administrator (C/TPA), enter the name and phone number.
4. Verify that "FMCSA" is filled (this may be auto populated).
5. Enter your company's USDOT number.

6. If you are the only employee at the company, select “Yes” for owner-operator. If you have more than one employee, select “No”.
7. If you are operating vehicles that require CDLs on the public roads in intrastate or interstate commerce, please select “no” for exempt. In addition, an owner-operator is required to be registered in a consortium. (A consortium is a DOT random pool comprised of many different companies.) Please make sure you have the consortium name and phone number listed in the D&A testing report if you are an owner-operator.
8. A selection period reflects how often a motor carrier conducts random draws among drivers for testing – typically monthly or quarterly. If you conduct quarterly random draws, you will need to determine the number of drivers in your company during each quarter.
  - For example, if your company had 30 drivers in quarter 1, 20 drivers in quarter 2, 40 drivers in quarter 3, and 25 drivers in quarter 4, you would divide the total of 115 drivers by 4 – resulting in an average of 28.75. Always round up the average results. Therefore, in this instance, the average number of driving positions to be entered is 29. If you conduct monthly random draws (or more frequent random draws), add the total number of drivers for all selection periods, and then divide by the number of selection periods to get the average number of drivers. Thus, for monthly random draws, you would add all drivers and then divide by 12 for the average number of drivers.
9. Enter the total (or total average) number of drivers.

## Drug & Alcohol Testing Data Section

Enter Your Driver Drug Testing Data (Display Pages 4-6).

### Covered Employees Tab

1. Enter the total number of drivers that fall within the drug and alcohol testing requirements for your company.



The screenshot shows the '2023 Drug & Alcohol Testing Management Information System' interface. The top navigation bar includes the U.S. Department of Transportation logo and the Federal Motor Carrier Safety Administration name. Below this is a blue header with the system name and a 'Logout' button. A secondary navigation bar contains tabs for 'Employer Information', 'Covered Employees', 'Drug Testing Data', 'Alcohol Testing Data', and 'Wrap Up'. The 'Covered Employees' tab is active, displaying a table titled 'II. Employees Subject to Testing'. The table has two columns: 'Employee Category' and 'Total Number of Employees in this Category'. A row is shown for 'Driver' with a value of '6' in the second column. Below the table, it states 'Total Number of Employees in all Categories: 6'. Navigation buttons '<< Employer Information' and 'Drug Testing Data >>' are visible. A 'Back to Status' button is also present. In the bottom right corner, there is a link for 'DOT Privacy Policy Paperwork Reduction Act Notice (as required by 5 CFR 1320.21)'.

Employee Category	Total Number of Employees in this Category
Driver	6
Total Number of Employees in all Categories: 6	



## Drug Testing Data Tab

1. “Total Number of Test Results” (column 1) is the total for columns 2, 3, 9, 10, 11 and 12. Column 1 will be filled out automatically while all other fields must be filled out manually. Therefore, skip to column 2 to begin entering your data.
2. In column 2, enter the number of verified negative DOT drug test results.
3. In column 3, enter the number of verified positive DOT drug results.
4. If your company had any verified positive DOT drug test results, you must enter the totals in columns number 4 through 8 for each drug for which DOT requires testing (e.g., marijuana, cocaine, etc.).
  - a. The total number of verified positive results in column 3 cannot be greater than the aggregate total for columns number 4-8. However, the aggregate totals of columns number 4-8 can be greater than the total in column 3, because a donor can be positive for more than 1 controlled substance.
5. If there are zeros for all columns, use the button “Set Blanks to Zero” at the bottom that will fill the remaining columns with zeros for this row. Follow the same procedure for the remaining 5 types of DOT drug tests.
6. In column 9, enter the number of medical review officer-verified adulterated DOT drug test specimens ([49 CFR § 40.145](#)). This is considered a refusal to test under 49 CFR § 40.191(b).
7. In column 10, enter the number of medical review officer-verified substituted DOT drug test specimens ([49 CFR § 40.145](#)). This is considered a refusal to test under 49 CFR § 40.191(b).
8. In column 11, enter the number of donors who did not provide an adequate DOT drug test urine specimen in 3 hours and went through the Shy Bladder procedure, but were determined by the medical review officer to not have a valid medical condition that precluded giving an adequate specimen. This is considered a refusal to test under [49 CFR § 40.191\(a\)\(5\)](#).
9. In column 12, enter the appropriate number of *employer-determined* refusals based on refusal information in [49 CFR § 382.107](#) and [49 CFR § 40.191](#), including employer determined shy bladder refusals in situations where the driver leaves the testing site before the test is complete or refuses to get a medical examination. *Do not* include adulterated, substituted, and MRO determined shy bladder refusals, which are covered in columns 9 thru 11. In addition, “[What Employers Need to Know about DOT Drug and Alcohol Testing](#)” lists the deciding official for each refusal situation on pages 25-27.
10. In column 13, enter the number of medical review officer cancelled DOT drug tests based on cancellation criteria in [49 CFR Part 40, Subpart I](#).



Employer Information

Covered Employees

Drug Testing Data

Alcohol Testing Data

Wrap Up

Back to Status

COMPLETE

Driver

III. Drug Testing Data ? : Driver

Type of Test	1	2	3	4	5	6	7	8	Refusal Results ?			Cancelled Results ?	
	Total Number of Test Results ? [Should equal the Sum of Columns 2,3,9,10,11 & 12]	Verified Negative Results ?	Verified Positive Results ~For One or More Drugs ?	Positive for Marijuana ?	Positive for Cocaine ?	Positive for PCP ?	Positive for Opioids ?	Positive for Amphetamines ?	Adulterated ?	Substituted ?	"Shy Bladder"~ with No Medical Explanation ?		Other Refusals to Submit to Testing ?
Pre-Employment ?	0	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Random ?	0	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Post-Accident ?	0	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Reasonable Suspicion ?	0	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Return-to-Duty ?	0	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Follow-up ?	0	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
<b>Total:</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Set blanks to zero

Clear all

Undo

<< Covered Employees

Alcohol Testing Data >>

## Alcohol Testing Data Tab

1. "Total Number of Test Results" (column 1) is the total for columns 2, 3, 7, and 8, and will be populated by the system. Skip to column 2 to begin entering your data.
2. Enter a number for columns 2-9.
3. If there are zeros for all these columns, please see the button "Set Blanks to Zero" at the bottom that will fill the remaining columns with zeros. Please follow the same procedures for the remaining 5 types of DOT alcohol tests.
4. In column 7, enter the number of DOT alcohol test refusals for "Shy Lung", [49 CFR § 40.265\(c\)](#).
5. In column 8, enter the number of "other" DOT alcohol test refusals, per [49 CFR § 40.261](#).
6. In column 9, enter the number of cancelled DOT alcohol tests based on cancellation criteria.


Federal Motor Carrier Safety Administration

2023 Drug & Alcohol Testing Management Information System
Logout

Employer Information
Covered Employees ✔
Drug Testing Data ✔
Alcohol Testing Data ✔
Wrap Up

[Back to Status](#)

COMPLETE  
 Driver

### IV. Alcohol Testing Data ? : Driver

Type of Test	1	2	3	4	5	6	Refusal Results <span style="color: white;">?</span>		9
	Total Number of Screening Test Results <span style="color: white;">?</span> <small>[Should equal the Sum of Columns 2,3,7 &amp; 8]</small>	Screening Tests With Results below 0.02 <span style="color: white;">?</span>	Screening Tests with Results 0.02 or greater <span style="color: white;">?</span>	Number of Confirmation Tests Results <span style="color: white;">?</span>	Confirmation Tests with Results 0.02 through 0.039 <span style="color: white;">?</span>	Confirmation Tests with Results 0.04 or greater <span style="color: white;">?</span>	"Shy Lung"~with No Medical Explanation <span style="color: white;">?</span>	Other Refusals to Submit to Testing <span style="color: white;">?</span>	Cancelled Results <span style="color: white;">?</span>
Pre-Employment <span style="color: white;">?</span>	0	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Random <span style="color: white;">?</span>	0	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Post-Accident <span style="color: white;">?</span>	0	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Reasonable Suspicion <span style="color: white;">?</span>	0	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Return-to-Duty <span style="color: white;">?</span>	0	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Follow-up <span style="color: white;">?</span>	0	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
<b>Total:</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Set blanks to zero
Clear all
Undo

<< Drug Testing Data
Wrap Up >>

DOT Privacy Policy  
 Paperwork Reduction Act Notice  
 (as required by 5 CFR 1320.21)

## Wrap Up Tab

The user will be prompted with an error notice to correct any problems with your submission.

Once the data makes it through data validation without errors, a dialog box will ask the user to certify the results, provide an electronic signature, and submit the data. Select the **“Sign and Submit”** button to complete the report submission. The user will get an option to receive an email confirmation of the completed submission.

United States Department of Transportation Federal Motor Carrier Safety Administration

2023 Drug & Alcohol Testing Management Information System Logout

Employer Information Covered Employees Drug Testing Data Alcohol Testing Data Wrap Up

Back to Status

**▲ Your data has passed all validation checks.**

**You have not yet signed and submitted your data.** Print and/or Save a copy of your MIS submittal

I, Madison Monroe, certify that the information provided on this FMCSA - Motor Carrier Drug and Alcohol MIS web site is, to the best of my knowledge and belief, true, correct, and complete for the period stated.

**Sign and Submit**

<< Alcohol Testing Data

DOT Privacy Policy  
Paperwork Reduction Act Notice  
(as required by 5 CFR 1320.21)

## Questions or Concerns

Please reach out to the FMCSA Customer Service team:

**Email:** <https://ask.fmcsa.dot.gov/app/ticket>

**Phone:** 1-800-832-5660