

# Washington State Toxicology Laboratory - Washington State Patrol

## Driving Under the Influence/DRE – Request for Analysis

WSP Toxicology Lab  
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**LABEL ALL EVIDENCE WITH SUBJECT NAME AND/OR AGENCY CASE NUMBER**

### Subject's Information (Please print clearly)

Name \_\_\_\_\_  
Last First MI

Date of Birth \_\_\_\_\_ Gender: M  F  X

Date of Incident/Arrest \_\_\_\_\_

Agency Case # \_\_\_\_\_

Agency \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Attention \_\_\_\_\_

Address \_\_\_\_\_

City State ZIP

E-Mail \_\_\_\_\_

### Laboratory Use Only Laboratory #

Date \_\_\_\_\_

### Specimens Received

Note all volumes are approximate

A Blood - Peripheral  
\_\_\_\_\_ ml \_\_\_\_\_

B Blood - Peripheral  
\_\_\_\_\_ ml \_\_\_\_\_

C \_\_\_\_\_  
\_\_\_\_\_ ml \_\_\_\_\_

D \_\_\_\_\_  
\_\_\_\_\_ ml \_\_\_\_\_

### Other/Notes:

Traffic Information Accident? Y  N  Vehicular Assault/Homicide? Y  N

Was medical treatment given prior to blood draw? Y

If yes, list any drugs:

Case History (Brief description of the incident and attach copy of the investigation report/DRE Face Sheet):

Was the HGN test administered?  
Y  N

If yes, number of clues?  
1-2  3-4  5-6

Drugs Suspected or Admitted (List symptoms, observations, drug history, prescriptions, etc.):

### DRE Information

Was a complete DRE Evaluation performed? Y  N

Please attach  
DRE Face Sheet.

Evaluator Name: \_\_\_\_\_

*If not available at time of  
submission, e-mail to  
toxlab@wsp.wa.gov*

### DRE Opinion (check box)

- Narcotic Analgesics
- CNS Depressants
- CNS Stimulants
- Hallucinogens
- Dissociative Anesthetic
- Cannabis
- Inhalants
- Not impaired

Lot #:

Sealed Y  N

Box sealed

Bag sealed

Tubes sealed

Samples leaked Y

1st Class  UPS  
 Certified  Fed Ex

Registered  
 Campus Mail  
 Hand Delivered

Received by: \_\_\_\_\_

Chain of Custody: PLEASE **PRINT** NAME (signature not required)

From \_\_\_\_\_ To \_\_\_\_\_ Date \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Date \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Date \_\_\_\_\_

Accessioned by \_\_\_\_\_

Logged in by \_\_\_\_\_