

**QUARTERLY URINE MONITOR REPORT**

(Please Print Clearly)

Urine Monitor Name: \_\_\_\_\_ CPH Participant Number: \_\_\_\_\_

CPH Assistant Director: \_\_\_\_\_

**REPORTING PERIOD: (Please CHECK)**

\_\_\_\_ 1<sup>st</sup> Quarter (January – March) – **Due March 31**

\_\_\_\_ 3<sup>rd</sup> Quarter (July – September) – **Due September 30**

\_\_\_\_ 2<sup>nd</sup> Quarter (April – June) – **Due June 30**

\_\_\_\_ 4<sup>th</sup> Quarter (October – December) – **Due December 31**

1. Please list any additional testing (fentanyl, breathalyzer, etc...)

\_\_\_\_\_  
\_\_\_\_\_

	<u>Weekday</u>	<u>Weekend</u>
2. Number of random urine screens required by CPH:	_____	_____

3. Number of random urine screens collected/ordered by you:	_____	_____
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4. Please indicate medication(s) taken by participant (if applicable): \_\_\_\_\_

\_\_\_\_\_

5. Did participant miss any screens? (If yes, please explain in comment section below.) ( ) Yes ( ) No

6. Did this participant respond within **EIGHT** hours of call for urine specimen collection? ( ) Yes ( ) No

7. Did you directly observe urine specimen collection? ( ) Yes ( ) No

8. Would you like CPH to call you about this individual? ( ) Yes ( ) No

Please comment on participant's compliance regarding urine monitoring. Indicate any concerns that you may have and/or any recommendations.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please complete urine calendar on back by circling the dates screens were collected.**

\*My signature verifies that I have directly observed all urine specimen collections for the above mentioned participant:

\_\_\_\_\_  
Monitor Signature

\_\_\_\_\_  
Date

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

Please list the testing date and requisition number (which is located in box #3 on the chain of custody form) for each sample collected.

Date	Requisition Number	Date	Requisition Number

# 2019

January '19						
Su	M	Tu	W	Th	F	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

February '19						
Su	M	Tu	W	Th	F	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28		

March '19						
Su	M	Tu	W	Th	F	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

April '19						
Su	M	Tu	W	Th	F	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

May '19						
Su	M	Tu	W	Th	F	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

June '19						
Su	M	Tu	W	Th	F	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

July '19						
Su	M	Tu	W	Th	F	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

August '19						
Su	M	Tu	W	Th	F	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

September '19						
Su	M	Tu	W	Th	F	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

October '19						
Su	M	Tu	W	Th	F	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

November '19						
Su	M	Tu	W	Th	F	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

December '19						
Su	M	Tu	W	Th	F	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				