



## CITY OF LAUDERHILL

Request For Proposal # 2025-040

"Drug and Alcohol Testing Services"

## STATEMENT OF WORK

Provided By:

DSI MEDICAL SERVICES, INC.

Roger Hornby

*Vice President – Business Development*

200 Precision Rd, #200-A

Horsham PA 19044

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04/14/2025



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## TABLE OF CONTENTS

1. Qualifications Statement .....	pg. 3
2. Statement of Capabilities .....	pg. 5
3. SAMHSA Laboratory .....	pg. 10
4. Staff Experience .....	pg. 12
5. Medical Review Officer (MRO) Services.....	pg. 13
6. Client Experience / References .....	pg. 14
7. Local Collection Sites .....	pg. 15
8. Pricing & RFP Required Documents	



## QUALIFICATIONS STATEMENT

### Contact

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### Summary

DSI Medical Services Inc., **founded in 1991, CELEBRATING over 34 years of extensive experience of State & Federal laws outlined in the Omnibus Transportation Employee Testing Act of 1991 and The Drug-Free Workplace Act of 1988**, is a NATIONAL TPA that will provide drug & alcohol management services utilizing a HHS / SAMHSA Certified Laboratory for both initial screening and GC/MS confirmation of non-negative specimens, in order to permit CITY OF LAUDERHILL to meet its regulatory responsibilities under Department of Transportation (DOT) regulations including, but not limited to, 49 CFR Parts 40, 219, 382, 383, 390-397, 399 and 655, as well as 20 CFR Part 29. Additionally, CITY OF LAUDERHILL's policies mandate a drug free workplace for all its employees, so DSI Medical will provide drug testing services under NON-DOT environments, with the same legal defensibility as its Federally-mandated programs.

The HHS / SAMHSA Certified Laboratory will provide account coded chain of custody and control forms to respective CITY OF LAUDERHILL departments. **For walk-in clinics, DSI Medical will provide an online portal for locating and placing orders for UDS collections, BATs, and/or DOT Physicals, utilizing the ELECTRONIC chain of custody and control form.** Additionally, (if necessary) any compliant urine collection kits will accompany supply orders generated via our website by respective company contacts. **All laboratory testing will be conducted in full compliance with Federal DOT regulations, as well as for NON-DOT testing in the same fashion.**

DSI Medical will provide medical review officer (MRO) services through its contract with i-3 Medical Review Services. All MRO's are fully certified through the American Association of Medical Review Officers (AAMRO), representing accreditation in all 50 states, and are current & in compliance with Federal & State regulations.

DSI Medical will provide management oversight to the corporate substance abuse testing programs up to & including: maintenance of the random pool selections, alternate selections, result reporting following MRO review, electronic notification to DER when negative results are posted, blind specimens, litigation support packages, expert witness testimony, **MIS and management reports**, & onsite mobile collection services and/or local collection centers for CITY OF LAUDERHILL, for any pre-employment, random, post-accident, reasonable cause, return-to-duty, and/or follow up drug & alcohol tests annually. **Additionally, DSI will provide administrative management services, regulatory guidance, updates, & interpretation, as well as labor grievance support, and education, to help ensure compliance of your employees with your company drug testing program.**

### Profile Data

DSI Medical's drug testing policies, procedures and practices are in accordance with and comply with the requests in this RFP, as well as all applicable governmental laws, rules and regulations at both the Federal and State levels. **Neither DSI Medical, nor any individuals assigned to this agreement, are disbarred, suspended, or otherwise prohibited from professional practice by any federal, state, or local agency. DSI Medical is not part of any pending civil litigation, arbitration, or proceedings that would affect its capability of providing the requested services.**

### Insurance

Included is the Liability Insurance Certificate of DSI Medical Services Inc. by Provider: The Greater Rochester Assurance Company. DSI has coverage under General Liability (\$2,000,000), Workers Compensation & Employers' Liability (\$1,000,000), Professional Liability (\$2,000,000), Automobile Liability (\$1,000,000), and Excess Liability (\$5,000,000) which is over General Liability and Auto & Employers Liability only. CITY OF LAUDERHILL to be listed as "Additionally Insured" upon request.

### Acceptance of Terms

This Statement of Work (Professional Services Agreement) for DRUG AND ALCOHOL TESTING SERVICES, dated April 2025, is a proposed agreement entered into by and between DSI Medical Services (DSI) Inc., for three (3) years, with the option to renew for up to two (2) additional one (1) year periods, and is subject to the same terms and conditions, including the PRICE SHEET, and valid for ninety (90) days from opening date of RFP.

**DSI Medical will maintain full acceptance of proposed services, with acknowledgement of all addendum, throughout the duration of said purchase order or contract resulting from this RFP / Technical Proposal. In addition, DSI Medical will comply with the Standard Contract Clauses required by the CITY OF LAUDERHILL. Executed on the dates set forth below by the undersigned authorized representatives of both Parties.**

**CITY OF LAUDERHILL**

**DSI Medical Services, Inc.**

200 Precision Rd, #200-A  
Horsham PA 19044  
800.770.0531 x1729

By:

Signature: \_\_\_\_\_

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

Title: \_\_\_\_\_

Date: \_\_\_\_\_

By:

Signature:  \_\_\_\_\_

Name: Roger Hornby

Title: VP Business Development

Date: 04/14/2025



## STATEMENT OF CAPABILITIES

DSI Medical will manage the drug and alcohol testing services for CITY OF LAUDERHILL. Program management includes urine specimen testing at a HHS / SAMHSA laboratory under Federal & State & protocols, associated supplies for specimen collection, and overnight specimen transportation, to the laboratory from the collection site and/or mobile collector.

The HHS / SAMHSA laboratory will report all results to a designated certified Medical Review Officer (MRO) who will in conjunction with MRO staff will review all non- negative results. MRO staff will coordinate and verify receipt of the MRO copy or equivalent copy of the chain of custody and control form permitting MRO ruling and result release in an expeditious manner. Any non-negative specimen will result in the medical review officer contacting the donor and providing the opportunity for the donor to explain (and provide) medical justification for the laboratory findings. Absent medical justification the MRO will rule the test result accordingly. **DOT positive drug test result reviewed by the MRO will first be reported telephonically** to the respective designated employer representative (DER) before the result is release electronically to the confidential account and password protected DSI web site.

DSI Medical will serve as a single point of contact for any drug or alcohol test inquiries from CITY OF LAUDERHILL management. DSI senior management is readily available to provide regulatory guidance or interpretation to any management representative as currently is the practice. DSI will provide quarterly/monthly random drug selections to the respective district contacts. **DSI utilizes the scientifically validated i-3 program for CITY OF LAUDERHILL's random selections. This highly acclaimed random software program assures completerandomness of the employees selected.**

Additionally, result information will be data entered into the confidential password protected web-based account for random statistical accounting and MIS reporting. DSI Medical will provide drug test result reporting (**typically less than 24-48 hours for negatives**) via the confidential account & password DSI web site. **DSI Medical will maintain records & data collected of each donor on our server, with results accessible 24 /7 online to respective CITY OF LAUDERHILL contacts.**

CITY OF LAUDERHILL management will electronically forward an updated pool roster to our random pool administrator to load on our secure FSTP site. Alternate selections are readily available electronically should an initial random selection not be available during the selection period. Random statistical reports will be provided at any time to reflect current random statistical data and demonstrate the programs tracking for annual compliance and MIS reporting.

### Deliverables

All services and supplies will be in place for CITY OF LAUDERHILL within the agreed upon implementation period (generally within 1 week), following approval and acceptance of DSI Medical serving as CITY OF LAUDERHILL's Third Party Administrator (TPA), including creating & delivery of Chain of Custody forms to designated locations, collection kits, shipping materials, etc., at NO ADDITIONAL CHARGE.



## Employee Education & Supervisor Training (If Needed)

Any training regarding DSI Medical's system utilization & functionality, location of network providers, supply order capability, or any additional needs, will be coordinated with respective CITY OF LAUDERHILL contacts. **Senior Management remains versed & up-to-date on Federal regulatory updates/changes & will provide guidance so that the CITY OF LAUDERHILL has the right tools in place to be in compliance at all times.**

**DSI Medical program management training is included with our service.** However, if requiring FEDERAL compliant "Reasonable Suspicion" training for supervisors and/or employees, this service is available online, and can be purchased on a "Per License" basis. DSI Medical offers this training through their online curriculums, and these trainings meet the DOT requirements in accordance with 49 CFR Part 382.603 and 382.307, as well as your company's unique needs, including, but not limited to, the following: Reasonable Suspicion, Drug & Alcohol Awareness, General Hazardous materials, driver file documentation, etc., and training is available on an "as needed" or "refresher" basis.

## Random Drug Testing Selections

DSI utilizes the scientifically validated i-3 Random Selection Software program for random selection. **This highly acclaimed random software program assures complete randomness of the employees selected, for multiple pool requirements of DOT entities including: FMCSA, FRA, FTA, USCG, PHMSA, and FAA.** The selection process has withstood labor challenges including a NLRB challenge. Since the early challenges surrounding random testing, there has not been any claim whereby the selection process has been disputed.

**Selections are done on a monthly or quarterly basis, dependent upon your preference. Selections are posted to our confidential password protected web site and permit client monitoring and requests for alternates.** Selected donors are removed from a pending status as random tests are completed. Monitoring of your random program by DSI's staff assists in adjusting the number of employees selected to assure the clients' compliance with Federal & company random testing requirements, along with notification of all DOT selected individuals who did not complete their testing during selection period.

(In accordance with HIPAA, outside facing client portal has successfully passed numerous penetration / vulnerability and application scans. Mobile devices can also use this Symantec Encryption, however USB ports are disabled using Symantec Endpoint Protection. As well, end users are required to change password every 90 days, containing strong encryption features (with a minimum 8 characters, Upper, Lower, Number, Special Character). Users are also susceptible to being locked out after 5 unsuccessful attempts. In addition, the web portal utilizes SFAX and Protected Trust email encryption.)

## Urine and/or Breath Alcohol Mobile On-Site SCHEDULED Collections

DSI Medical Services, Inc. employs a sub-contracted team of Federally-certified drug / BAT collectors whom can perform on-site collections for CITY OF LAUDERHILL. These collectors will be responsible for transportation of specimen to lab & necessary paperwork to DSI Medical. Mobile collectors are available by scheduled appointments for onsite collection needs.



## Urine / BAT Emergency Mobile On-Site UNSCHEDULED Accident / Suspicion Services

For any “After Hours” Emergency testing needs, DSI Medical will make available, upon calling an Emergency phone line, a team of Federally certified UDS & BAT collectors if requested:

- Our national mobile collection team, managed by **24/7 Onsite Mobile Collectors**, an affiliate of our lab partners, will be available to provide both “after hours” and during normal business hour mobile collection needs. Please see cost Quotation for charges for both “scheduled” and “unscheduled” emergency service needs.
- Per the Federal Regulations, any post-accident breath alcohol testing will be performed no more than 2 hours, to a max of 8 hours (with documentation), and drug testing no more than thirty-two (32) hours, after an accident, unless unforeseen circumstances prevent from doing so. Any additional CITY OF LAUDERHILL specific requests will be met to the best of our abilities.

## Transition, Implementation, & Counseling

Transition & implementation will occur over a 1 - 2 week period. An initial conference call between DSI Medical & CITY OF LAUDERHILL management can be scheduled to establish expectations for training timelines, creation & delivery of Chain of custody forms to designated locations, proper destruction of existing Chain of custody forms, discussion of CITY OF LAUDERHILL’s random pool management, and introduction to our website reporting system, collection site finder, billing system, etc. with your Designated Employee Representative (DER).

## Litigation Support / Labor Grievance Consulting – Exclusive to DSI customers!

- DSI Medical Services will assist your company with grievance preparation and/or unemployment claims analysis and review. The following are some of the ways in which assistance and support can be given:
- Pre-case discussion highlighting strengths, weaknesses, previous decisions, and potential conflicts (if any) with collective bargaining agreement.
- Provision of support documentation for case preparation and discussions with labor representative presenting the case.
- Provision of support documentation for case preparation and discussions with Human Resource representative presenting the case for unemployment challenges.
- Review Company Substance Abuse and Testing Policies and provide input.
- Act as liaison between company and laboratory toxicologist(s) to assure that all claims are addressed in an expert opinion that can be submitted at any hearing that might occur.
- Additionally, DSI’s professionals are available to clients for questions and counseling on drug and alcohol testing issues or matters.

## Billing and Recordkeeping

Test result reporting occurs immediately upon release from the medical review officer. GC/MS negative results are released and reported, **on average, 24 hours (or less) with e-mail notification** to respective DER advising new results have been posted to the confidential password protected web site (*Faxed & Email attached results available upon request*). **Positives & Refusal to Test drug test rulings are first communicated telephonically to the respective DER prior to release to the confidential password protected web site.** Immediate communication of Positive & Refusal to Test results is also made for breath alcohol testing.

**All services are invoiced monthly, VIA 1 SIMPLE INVOICE!!!** Billing can be itemized / subtotaled per CITY OF LAUDERHILL location for tracking convenience. Acceptable payments include: Net 15, Net 30, or Credit Card accepted. Invoices will be billed inclusive of Lab costs, MRO services, UDS & BAT collection fees, and Physicals when placing orders online through the ONE Portal. Mobile / Emergency fees, online training course licenses, and onsite services will be billed in arrears of services performed.

## Record Keeping / Data Collection

**DSI Medical Services Website, accessible 24/7, [www.dsimed.com](http://www.dsimed.com)**

- Immediate release of negative results available in MRO ruling format to the confidential website following your Medical Review Officer's review, typically less than 24 hours.
- **Ability to locate & coordinate with additional local or out-of-area collection sites to facilitate DOT and/or Non-DOT drug testing.**
- Ability to retrieve rulings electronically securely and forward to designated company locations via e-mail.
- **Access to current year and previous 4 years of results (non-negative) available at your convenience and retrievable according to your company's requirements.**
- E-mail OR Secure Faxed Result (fax # provided by customer) to the designated employer representative (DER) every time a new result is posted to the web site.
- E-mail notification to the DER, along with a call to collection site during normal business hours of 9am-6pm Monday – Friday, for every pending result that cannot be released due to the MRO not receiving the MRO copy of the chain of custody form.
- The ability to print your company's individual MRO rulings (secure encrypted data) based on your selection criteria e.g. by date, by test reason, by DOT vs. Non –DOT.
- Customized Reports to facilitate your program management (Random Testing Monitoring).





## Management Reports

- DSI Medical, via i3 software that powers our website [www.dsimed.com](http://www.dsimed.com), generates the following reports for our clients:
- **DOT Annual MIS Summary:** This summary includes all drug & alcohol testing information required with the exception of refusals, education and disposition of drivers.
- Random Recap Report - provides detailed information including “donors not tested” - (available monthly/quarterly depending on client’s random program).
- Positive Recap Report - details the client’s positive donors for a requested period of time - (issued upon request).
- Donor List - details donors by a variety of sorts (i.e., location, reason for test) - (issued upon request).
- Customized Monthly Reports as required by the client are accessible anytime.
- **Bi-Annual Lab Reports** - sent directly to client from the labs.

## HHS/SAMHSA LAB: ALERE TOXICOLOGY LABORATORIES

- Alere Toxicology Services, 1111 Newton St, Gretna LA 70053, 504-361-8989
- Alere Toxicology Services, 450 Southlake Blvd, Richmond VA 23236, 804-378-9130

All Alere Toxicology Laboratory procedures are documented in their Standard Operating Procedure Manual. As a SAMHSA / HHS certified laboratory this manual is reviewed, and all actions are scrutinized to assure strict compliance with the SOPs every six months by independent inspectors assigned by SAMHSA. Chain of Custody procedures are included in every aspect of the drug testing, from the time a kit is received by an Alere employee until it's disposal, be that a day later as in the case of a negative specimen, or a year later, should the specimen be positive. Alere's quality assurance program includes both internal and external "blind specimen" submission. Alere Toxicology surpasses required quality assurance measures through outside contracts for constant submission of blind proficiency specimens.

In accordance with Department of Health and Human Services Regulations (Mandatory Guidelines for Federal Workplace Drug Testing Programs) will be performed in the following manner:

- Each specimen is accessioned upon arrival at Alere Toxicology Labs. A series of bar-coded numbers is applied to the specimen, as well as all accompanying documentation. After accessioning, each "primary" specimen is sampled for the initial testing. During the aliquoting process, each specimen is observed for signs of adulteration or tampering.
- Immunoassay screening via the EMIT method is performed on all urine specimens. For those companies performing DOT required testing, the initial screening is for marijuana, cocaine, phencyclidine, opiates/opioids, amphetamines, 6-AM, and MDMA, MDA. Cutoff levels utilized in the screening are as follows --

DRUG CLASS	INITIAL TEST LEVEL	CONFIRMATORY TEST LEVEL
AMPHETAMINES	500 ng/mL	
Amphetamine		250 ng/mL
Methamphetamine		250 ng/mL
COCAINE METABOLITES	150 ng/mL	100 ng/mL
MARIJUANA METABOLITES	50 ng/mL	15 ng/mL
MDA-ANALOGUES	500 ng/mL	
MDA		250 ng/mL
MDMA		250 ng/mL
OPIATES	2000 ng/mL	
Morphine		2000 ng/mL
Codeine		2000 ng/mL
OPIATES (SEMI-SYNTHETIC)	300 ng/mL	
Hydromorphone		100 ng/mL
Hydrocodone		100 ng/mL
6-ACETYLMORPHINE	10 ng/mL	10 ng/mL
OXYCODONES	100 ng/mL	
Oxycodone		100 ng/mL
Oxycodone		100 ng/mL
PHENCYCLIDINE	25 ng/mL	25 ng/mL



- During the EMIT process each specimen is analyzed for CREATININE (a non-protein nitrogenous constituted of normal urine) to check for dilution of the specimen; Specific Gravity is performed on those specimens with a low creatinine measure, pH, and oxidizing adulterants. Additionally, any specimen identified by the laboratory as “suspicious” is subjected to testing for a wide variety of adulterants.
- Results on those specimens testing Negative via immunoassay screening are released from the laboratory to the Medical Review Officer. In the case of specimens testing “positive” via immunoassay screening, a second aliquot of the primary specimen is taken to confirmatory testing utilizing Gas Chromatography/Mass Spectrometry. Specimens reported Positive via GC/MS must be at or above the following cutoff levels –
- Additionally, Methamphetamine positives must contain a minimum of 200 ng/mL Amphetamine (Methamphetamine metabolite). Specimens confirmed Positive via GC/MS would be reported as positive to the Medical Review Officer.
- A Non-DOT lookalike panel will be made available to order for Non-Federal testing needs. Cutoffs will mirror exactly as listed for the DOT cutoff levels & procedures.

**Alere Toxicology laboratories has scientifically validated procedures in place to perform testing for “d” and “l” (amphetamine) isomer testing. This test is performed upon written request from the Medical Review Officer, and at NO ADDITIONAL CHARGE to the client.** These procedures are scrutinized during audits and have been found to provide the forensic quantum-of-proof necessary for any challenges during litigation.

**QUALITY ASSURANCE:** Data handling procedures are dictated by SAMHSA / HHS to be highly secure at every step. Additionally, accession numbers applied to each specimen and accompanying documentation are bar coded for the data entry process. A multi-level review within the laboratory is carried out by accessioners, analysts and a certifying scientist prior to any (positive or negative) results being released from the lab. Restricted access to each program, within the computer system only, permits only approved and authorized laboratory personnel to enter results, and provides yet additional protection within the data entry/data handling process. All of these procedures, combined with their multi-level review, assure 100% accuracy 100% of the time.

**QUALITY ASSURANCE:** SAMHSA and the U.S. Department of Transportation mandate that specimens testing positive be maintained in locked freezer storage for one year. Alere Toxicology maintains a highly secure area within an extremely limited access area for this purpose. Freezer temperatures are examined and documented on a daily basis, and procedures are in place should a problem be identified. Chain of Custody forms for each specimen stored are maintained with the specimens during the analysis procedure and then filed in a secure manner acceptable to SAMHSA / HHS regulations. The current system of storage is highly expandable, and more than adequate to meet the needs of future contracts.

# Certificate of Accreditation



The Substance Abuse and Mental Health  
Services Administration  
*certifies that*

## **Alere Toxicology Services, Inc.**

**Gretna, LA**

NLCP Laboratory Number: 0083

has successfully completed the requirements  
of the National Laboratory Certification Program for urine laboratories in accordance  
with the Mandatory Guidelines for Federal Workplace Drug Testing Programs.

*Effective June 26, 1989*

A handwritten signature in cursive script, reading "Pamela S. Hyde".

Pamela S. Hyde, J.D.  
Administrator  
Substance Abuse and Mental Health Services Administration



A handwritten signature in cursive script, reading "Frances M. Harding".

Frances M. Harding  
Director  
Center for Substance Abuse Prevention



## STAFF EXPERIENCE

DSI Medical presently has seven representatives assigned to CITY OF LAUDERHILL. Most of the representatives possess in **excess of a decade of experience in regulated substance abuse testing and both state & federal regulations, as a tenured employee of DSI Medical**. Each representative will be well versed on the necessary CITY OF LAUDERHILL protocols and will continue to handle CITY OF LAUDERHILL's business through constant communication, with timely resolution to any concerns.

**Senior management remains available on a 24/7 basis to respond and provide guidance and regulatory interpretation.** The seven representatives are as follows:

### DSI Medical Services

- **Tony Damico**  
*Business Unit Manager*  
P 267.960.3497  
E [Tony.damico@drugscan.com](mailto:Tony.damico@drugscan.com)
- **Joseph Whelan**  
*Forensic Specialist,  
/ Expert Witness Testimony*  
P 800.770.0531 x1720  
E [Joseph.Whelan@dsimed.com](mailto:Joseph.Whelan@dsimed.com)  
(see resume on following pages)
- **Roger Hornby (Primary  
Contact –13+ years with DSI  
Medical)**  
*Vice President of Business Development*  
P 800.770.0531 x1729  
C 215.740.3689  
E [Roger.Hornby@dsimed.com](mailto:Roger.Hornby@dsimed.com)
- **Ryan Bogas (over 6 years w/ DSI Medical)**  
*Customer Service / Supplies / Account Set Up*  
P 800.770.0531 x1727  
E [Roger.Hornby@dsimed.com](mailto:Roger.Hornby@dsimed.com)
- **Susan Hough (over 25 years with DSI Medical)**  
*Manager, Customer Service / Alcohol Testing  
Compliance / MRO Assistant*  
P 800.770.0531 x1722  
E [Susan.Hough@dsimed.com](mailto:Susan.Hough@dsimed.com)
- **Kathy Pontarelli (over 8 years with DSI  
Medical) – Customer Service / MRO Assistant**  
P 800.770.0531 x1723  
E [Kathy.Pontarelli@dsimed.com](mailto:Kathy.Pontarelli@dsimed.com)
- **Kevin McCown (over 30 years with DSI  
Medical) – Random Program Administrator /  
MRO Assistant**  
P 800.770.0531 x1724  
E [Kevin.McCown@dsimed.com](mailto:Kevin.McCown@dsimed.com)
- **Candance Heil (over 12 years w/ DSI Medical)**  
*MRO Assistant / Assistant Random  
Program Administrator*  
P 800 770 0531 x1735  
E [Candance.Heil@dsimed.com](mailto:Candance.Heil@dsimed.com)
- **Nicole Ratliff (over 6 years w/ DSI Medical)**  
*MRO Assistant / New Account Set Up*  
P 800 770 0531 x1721  
E [Nicole.Ratliff@dsimed.com](mailto:Nicole.Ratliff@dsimed.com)

### Alere Toxicology Laboratories

- **Mark Wuest**  
*Alere Lab Director, Richmond VA (resume on following pages)*

**Joseph F. Whelan**  
**Senior Vice President DSI Medical**  
**Director Contracts & Regulatory Oversight**  
**DRUGSCAN, Inc**  
**Horsham, PA 19044**

- Manage and direct client contracts providing drug & alcohol testing services to over five hundred nationwide clients. Oversee three hundred thousand + drug test rulings per year in both regulated and non-regulated testing environments.
- Subject Matter Expert on FMCSA Part 391.41- Physical Qualifications for Drivers
- Twenty-three + years freight transportation experience as corporate Director of HR & Labor with hands on experience in management, employment litigation, substance abuse testing, addiction and treatment, labor, human resources, and training.
- 35 + years experience with substance abuse testing and addiction; human metabolism of drug metabolites and alcohol, forensic toxicology, hydration, and opiate addiction / pain medication.
- Former lead member of MFCA/TMI subcommittee on Drug and Alcohol Testing. Responsible for drafting the drug and alcohol testing language of the National Master Freight Agreement (NMFA) Article 35, Section 3 & 4 which covers 100,000+ unionized truck drivers across the country.
- Adjudicated drug/alcohol grievance cases under the NMFA rendering decisions that comply with DOT Regulations and the Collective Bargaining Agreement.
- Served as "Expert Witness" involving 49 CFR Parts 40, 382, 655, 199, & 46 CFR Parts 16 & 4 in labor / civil litigation procedures.
- Submitted comments, facilitated testimony during NPR on re-write of 49 CFR Part 40 and the current drug and alcohol testing regulations implemented August 2001.
- Lectured / Trained on Department of Transportation Regulations:  
49 CFR Part 40, 49 CFR FMCSA Part 382, FTA Part 655, PHMSA Part 199 USCG 46 CFR 4, 5, & 16, and NRC 10 CFR Part 26
- Certified Breath Alcohol Technician (BAT) / Urine Specimen Collection Trainer
- Regulatory Consultant to Medical Review Officers (MRO), Substance Abuse Professionals (SAPS), and Medical Directors on forensic toxicology, regulated testing process, and substance abuse addiction.
- Conducted workshops in conjunction with Drug Enforcement Agency (DEA)  
Titled: "Drug Testing / Overcoming the Barriers".
- Past Advisory Board Member - Partnership for Drug Free Workplace.
- Lecturer / Participant for New Jersey Forum: "Linking Community and Workplace Substance Abuse Prevention Programs"

- **Lecturer / Trainer: “Substance Abuse Disorders & Disease Of Addiction and Its Impact On The Workplace” “Signs & Indicators, Addiction In The Workplace”**
- **City of Philadelphia, Mayor’s Task Force to Combat Opioid Epidemic**
- **Past Chairman - New Jersey Personnel Group**

**Education: Rutgers University**



## CURRICULUM VITAE

**NAME:** MARK WUEST, D-ABFT-FD

**ADDRESS:** Alere Toxicology Services  
450 Southlake Blvd  
Richmond, VA 23236  
804-378-9130

**EDUCATION** Bachelor of Science, Major - Microbiology  
The Ohio State University - Columbus, Ohio

### EXPERIENCE:

- August 2014 to Present **Laboratory Operations Director / Responsible Person**  
Alere Toxicology Services – Richmond, VA
- ❖ Manage daily operations of forensic drug testing laboratory. Laboratory tests for drugs of abuse in urine and oral fluids.
  - ❖ Responsible for maintaining SOP's, quality assurance and quality control, method validations, testing and evaluation of proficiency testing surveys, training of staff.
  - ❖ Serve as an expert witness in federal, state and local courts.
- September 2010 to August 2014 **Laboratory Manager, Confirmations Department**  
Quest Diagnostics, Inc. – Lenexa, KS
- ❖ Manage supervisors and testing personnel in the extraction and GC/MS areas.
  - ❖ Write and revise SOP's for the department, method validations, coordinate testing and evaluation of proficiency testing surveys, oversee training of confirmation staff, certify screening and confirmation data as needed.
- August 2010 to August 2014 **Responsible Person**  
Quest Diagnostics, Inc. - Lenexa, KS
- ❖ Responsible for daily operations of forensic drug testing laboratory. Laboratory tests for drugs of abuse in urine, oral fluids and hair.
- August 2006 to August 2010 **Alternate Responsible Person**  
Quest Diagnostics, Inc. (LabOne) - Lenexa, KS
- ❖ Responsible for daily operations of forensic drug testing laboratory.
- June 2007 to September 2010 **Supervisor, Confirmations Department**  
Quest Diagnostics, Inc. (LabOne) – Lenexa, KS
- ❖ Manage supervisors and testing personnel in the extraction and GC/MS areas.
  - ❖ Write and revise SOP's for the department, method validations, coordinate testing and evaluation of proficiency testing surveys, oversee training of confirmation staff, certify screening and confirmation data as needed.
- January 2005 to July 2007 **Supervisor, Non-Negative Certifying Scientists**  
Quest Diagnostics, Inc. (LabOne) - Lenexa, KS
- ❖ Review and certify test results of initial screen and confirmation tests of urine drug screens, oral fluid drug screens and blood alcohols.
  - ❖ Provide technical oversight to the Non-Negative Certification area.
  - ❖ Consult with clients and physicians regarding testing and results.

June 2004 to  
January 2005

**Team Lead, Non-Negative Certifying Scientists**

LabOne, Inc. – Lenexa, KS

- ❖ *Review and certify test results of initial screen and confirmation tests of urine drug screens, oral fluid drug screens and blood alcohols.*
- ❖ *Provide technical leadership and direct workflow in the Non-Negative Certification area.*
- ❖ *Consult with clients and physicians regarding testing and results.*

November 2000 to  
April 2004

**Responsible Person (RP)/Certifying Scientist**

Alliance Laboratory Services- Cincinnati, Ohio

- ❖ *Manage daily operations of HHS/SAMHSA certified forensic urine drug testing laboratory.*
- ❖ *Write and revise SOP manual.*
- ❖ *Oversee training and education of personnel; quality assurance/quality control; analytical methods and method validation.*
- ❖ *Serve as expert witness for urine drug testing and blood alcohol cases.*
- ❖ *Perform duties of certifying scientist and quality control coordinator.*
- ❖ *Assumed RP duties June 2000.*

December 1999 to  
November 2000

**Alternate RP/Certifying Scientist**

Alliance Laboratory Services- Cincinnati, Ohio

- ❖ *Supervisor of accessioning staff, positive and negative certifying scientists.*
- ❖ *Perform duties of certifying scientist and quality control coordinator.*

June 1997 to  
December 1999

**Certifying Scientist/Quality Control Coordinator**

Alliance Laboratory Services- Cincinnati, Ohio

- ❖ *Certify positive and negative drug screens in HHS/SAMHSA certified laboratory.*
- ❖ *Supervise GC/MS and immunoassay testing.*
- ❖ *Supervise the quality control program for the forensic drug testing.*
- ❖ *Consult with clients and physicians regarding testing and results.*

January 1993 to  
June 1997

**Toxicology Supervisor**

Jewish Hospital Laboratory - Cincinnati, Ohio

(Lab changed name to Alliance Laboratory Services, Health Alliance 1/97)

- ❖ *Supervise 2<sup>nd</sup> shift operation of forensic drug testing (accessioning, screening and confirmations) in HHS/SAMHSA certified laboratory and clinical toxicology laboratory.*
- ❖ *Certify negative drug screens.*
- ❖ *Review results of clinical toxicology tests.*

March 1989 to  
December 1992

**Laboratory Manager/Technical Supervisor**

Toxicology Associates, Inc. - Columbus, Ohio

- ❖ *Manage daily operations of clinical/forensic toxicology lab.*
- ❖ *Review results and reports of testing.*
- ❖ *Supervise quality control and quality assurance.*
- ❖ *Supervise technical, clerical and support personnel.*

September 1987 to  
March 1989

**Laboratory Technologist**

Toxicology Associates, Inc. – Columbus, Ohio

- ❖ *Perform drug screens and quantitative drug analysis on blood and urine specimens using GC/MS, GC, TLC, HPLC, FPIA, EMIT and Spectrophotometry.*

**PROFESSIONAL CERTIFICATIONS AND MEMBERSHIPS:**

- Diplomat – Forensic Drug Toxicology – American Board of Forensic Toxicology (ABFT)
- Inspector – National Laboratory Certification Program (NLCP)
- Member - Society of Forensic Toxicologists (SOFT)
- Member - Midwest Association for Toxicology and Therapeutic Drug Monitoring (MATT)





## MEDICAL REVIEW OFFICER (MRO) SERVICES

**Dr. Philip Lopez, M.D.**  
**MROCC Certification #22-143732 (Expires 7/8/2027)**

**MRO Express**  
**18241 Daybreak Dr**  
**Boca Raton, FL 33496**

MRO Services are provided through i-3 Medical Review Services with whom DSI contracts with. Both the **American Association of Medical Review Officers (AAMRO)** and **Medical Review Officer Certification Council (MROCC)** certification allows the medical doctor to be able to perform DOT certified lab analysis review for ANY STATE within the United States of America. Along with this certification, MRO services provided include the following:

- Administrative review of all negative results.
- Review of all confirmed positive results by a licensed Medical Physician who is qualified in accordance with CFR Part 40.121, under the Omnibus Act.
- Interpretation of each confirmed positive test results.
- Provide an opportunity for a donor to discuss a positive test result with the Medical Review Officer.
- Consultation with the forensic toxicologist from the HHS/SAMHSA laboratory to review concerns or questions regarding test results.
- Order a reanalysis of the original urine sample, if necessary. (Only the MRO has the authority to issue this directive).
- Determine whether a laboratory positive test resulted from legally prescribed medication. If so, report test results as negative. Alert DER on those medications that may pose a safety risk suggesting CITY OF LAUDERHILL employee obtain a safety sensitive letter from prescribing physician.
- Any and ALL positive THC / Marijuana results will be reported to the DER as positive, including those where the donor possesses a medical marijuana certificate.
- Discuss any conflicts between CITY OF LAUDERHILL policy and Federal standards of practice with the designated employee representative (DER) of the CITY OF LAUDERHILL.
- Notify the employer regarding the results of the test.

Each company's designated MRO will be the sole custodian of individual test results. The MRO will retain the reports of individual test results for a minimum of five (5) years, in compliance with federal regulations.

# MROCC

## Medical Review Officer Certification Council

certifies that

**Philip A. Lopez, M.D.**

has successfully met all eligibility and examination criteria  
and is hereby designated a

**Certified Medical Review Officer**

Certification Number: 22-143732

Effective from July 08, 2022  
to July 08, 2027





AN ACM GLOBAL COMPANY

## CLIENT EXPERIENCE / REFERENCES

Here is what our clients are saying about DSI MEDICAL SERVICES with their current programs....

1. "For over 20 years, ABF Freight System, Inc. has partnered with DSI MEDICAL SERVICES for all of our drug testing needs. In addition to providing reliable, timely drug test results, we have found their customer service exceptional."

**Marla K. Scales**, *Manager of Human Resources* | P 479.785.8942 | E [mkscales@abfs.com](mailto:mkscales@abfs.com)  
**ABF Freight System, Inc.** 3801 Old Greenwood Rd, Fort Smith AZ 72903. DOT Regulated company, Transportation, 1000+ employees

2. "Just a few words of appreciation for the outstanding service provided by DSI MEDICAL SERVICES in administering all aspects of our nationwide Substance Abuse Program. DSI MEDICAL SERVICES consistently surpasses our expectations from the initial testing to issuing the final report to the MRO. Your firm is at the top of a very short list of service providers that excels in the delivery of the highest quality, always timely and most professional services in a very litigious and scientifically demanding field. We look forward to ten more years of satisfaction guaranteed service from your company."

**David Gunnoe**, *Risk Manager* | P 713.475.4512 | E [David.Gunnoe@ge.com](mailto:David.Gunnoe@ge.com)  
**Atlantic Plant Maintenance, Inc. A Division of General Electric** 3225 Pasadena Ave, Pasadena TX 77503 Non-DOT Regulated company, Utility Services, 1000+ employees

3. "The Philadelphia Area Labor-Management Committee (PALM) has been using DSI MEDICAL SERVICES since 1996. During this time, the relationship between the management and employees of DSI MEDICAL SERVICES and PALM has grown to one of respect, cooperation and reliability. The staff and services of DSI MEDICAL SERVICES have been outstanding in getting results in a timely manner. Questions, if they arise, are given thorough answers. The scheduling of collections is handled masterfully, even on a last minute basis. Collectors are efficient and professional. Office personnel, have always handled issues with prompt and cheerful dispositions. PALM is extremely proud to work with such an organization."

**Gert Anthony**, *Manager* | P 215.732.7476 Ext 20 | E [ganthony@palmnet.org](mailto:ganthony@palmnet.org)  
**Philadelphia Area Labor-Management Committee (PALM)** 731 S. Broad St, Philadelphia PA 19147 Non-DOT Union company, Oil Refinery, 200+ employees

### 4. Additional Municipality References

**Ramsey County MN**  
Contact: Scott Jahnke  
P 651.248.5178  
E [scott.jahnke@co.ramsey.mn.us](mailto:scott.jahnke@co.ramsey.mn.us)

**St Charles County MO**  
Contact: Debbie Moore  
P 636.949.7320 x7198  
E [DMoore@sccmo.org](mailto:DMoore@sccmo.org)

**Burlington Conty NJ**  
Contact: Kate Mahan  
P 609.265.5480  
E [kmahan@co.burlington.nj.us](mailto:kmahan@co.burlington.nj.us)

**Meridien Energy LLC**  
Contact: Angela Schettine  
P 716.358.2131  
E [aschettine@meridienenergy.com](mailto:aschettine@meridienenergy.com)



Prices are the  
same at ALL these  
sites!

## LOCAL COLLECTION SITES

### ➤ **Xpress Urgent Care** (electronic CCF enabled)

7229 W. Oakland Park Blvd, Lauderhill FL 33313

(954)824-2616

Mon - Sat 8AM – 6PM | Sun 9AM – 2PM

### ➤ **MD Now Locations** (electronic CCF enabled)

> 7007 W. Broward Blvd, Plantation FL 33317

(954)791-3636 Mon - Fri 8AM – 8PM | Sat / Sun 8AM – 5PM

> 4640 W. Commercial Blvd, Tamarac FL 33319

(954)425-9449 7 DAYS A WEEK 8AM – 8PM

> 5817 N. University Dr, West Tamarac FL 33321

(954)720-1111 7 DAYS A WEEK 8AM – 8PM

> 10081 W. Oakland Park Blvd, Sunrise FL 33351

(954)578-6858 Mon - Fri 8AM – 8PM | Sat / Sun 8AM – 5PM

### ➤ **CareSpot** (electronic CCF enabled)

10251 W. Commercial Blvd, Sunrise FL 33351

(954)580-4100

Mon - Fri 8AM – 5PM | Sat / Sun 8AM – 4PM

### ➤ **Concentra Medical Center** (electronic CCF enabled)

> 1007 W. Commercial Blvd, Ft Lauderdale FL 33309

(954)5642592 Mon - Fri 8AM – 5PM

> 12170 W. Sunrise Blvd, Plantation FL 33323

(954)474-4403 Mon – Fri 8AM – 6PM | Sat 9AM – 1PM

ATTACHMENT C

**COST SCHEDULE**

The testing of urine and/or alcohol samples will be requested on an as-needed basis. The number of donors to be tested will vary. Proposer shall use the space provided below to quote the cost per negative and positive sample.

---

**DRUG AND ALCOHOL TESTING**

<b>Testing Category</b>	<b>Unit Cost</b>
Alcohol Breathalyzer Test	\$ <u>48.50</u>
Drug Screen – DOT – 5-Panel	\$ <u>48.50</u>
Drug Screen – 10-Panel	\$ <u>49.50</u>
Drug Screen – DOT – 5-Panel (After hours/weekends/holidays)	\$ <u>48.50</u>
Drug Screen – 10-Panel (After hours/weekends/holidays)	\$ <u>49.50</u>
GC/MS Testing	\$ <u>included</u>

---

**Is your company a local vendor?** (if yes, please provide a copy of your valid city-issued business license)

Yes \_\_\_\_\_ No X \_\_\_\_\_

Our corporate office is in PA, but local collection sites will be performing all services

---

**Name & Address of Company Submitting Bid:**

DSI Medical Services, Inc. 200 Precision Rd #200-A, Horsham PA 19044 (Corporate office)

---

**Zip** 19044

---

**Federal Employer Identification #:** 80-0270114

---

**Telephone Number:** (800)770-0531 x1729

**Fax Number:** (215)443-0670

**Email:** roger.hornby@dsimed.com

---



## ADDITIONAL SERVICE PRICING (IF NEEDED)

- [illegible]



**ATTACHMENT A**  
**PROPOSER'S QUALIFICATIONS STATEMENT**

PROPOSER shall furnish the following information. Failure to comply with this requirement will render the Bid non-responsive and cause its rejection. Additional sheets may be attached as required.

---

**PROPOSER'S Name and Principal Address:**

DSI Medical Services, Inc. 200 Precision Rd #200-A, Horsham PA 19044 (Corporate office)

---

**Contact Person's Name and Title:**

Roger Hornby, VP-Business Development

---

**PROPOSER'S Telephone and Fax Number:**

Tel: (800)770-0531 x1729 Fax: (215)443-0670

---

**PROPOSER'S Email:**

(Insert email address)

Roger.Hornby@dsimed.com

---

**PROPOSER'S License Number:**

---

**PROPOSER'S Federal Identification Number:**

80-0270114

---

**Number of years your organization has been in business, in this type of work:**

34+ years

---

Names and titles of all officers, partners, or individuals doing business under trade name:

see proposal

---

**The business is a:**

- Sole Proprietorship ☐
  - Partnership ☐
  - Corporation ☒
- 

Name, address, and telephone number of surety company and agent who will provide the required bonds on this contract:

Marsh USA LLC, 1166 Ave of Americas, 22nd Flr, New York NY 10036, (213)624-5555

---

Have you ever failed to complete work awarded to you? If so, when, where, and why?

No

---

Have you personally inspected the proposed WORK, and do you have a complete plan for its performance?

Yes, but I would like to have a further discussion around BLOOD testing as a medium

---

Will you subcontract any part of this WORK? If so, give details including a list of each subcontractor(s) that will perform work in excess of ten percent (10%) of the contract amount and the work that will be performed by each subcontractor(s):

We will use an onsite mobile collector for the times the City requires a collection to be performed  
at City sites

---

The foregoing list of subcontractor (s) may not be amended after the award of the contract without the prior written approval of the Contract Administrator, whose approval shall not be reasonably withheld.

Ok

---

List and describe all bankruptcy petitions (voluntary or involuntary) which have been filed by or against the Proposer, its parent or subsidiaries or predecessor organizations during the past five (5) years. Include in the description the disposition of each such petition:

N/A

---

List and describe all successful Bond claims made to your surety(ies) during the last five (5) years. The list and descriptions should include claims against the bond of the Proposer and its predecessor organization(s):

N/A

---

List all claims, arbitrations, administrative hearings, and lawsuits brought by or against the Proposer or its predecessor organizations(s) during the last five (5) years. The list shall include all case names; case, arbitration, or hearing identification numbers; the name of the project over which the dispute arose; and a description of the subject matter of the dispute:

N/A

---

List and describe all criminal proceedings or hearings concerning business-related offenses in which the Proposer, its principals, or officers or predecessor organization(s) were defendants:

N/A

---

Has the Proposer, its principals, officers, or predecessor organization(s) been CONVICTED OF a Public Entity Crime, debarred, or suspended from bidding by any government during the last five (5) years? If so, provide details:

N/A

---

The PROPOSER acknowledges and understands that the information contained in response to this Qualification Statement shall be relied upon by the CITY in awarding the contract and such information is warranted by the PROPOSER to be true. The discovery of any omission or misstatement that materially affects the PROPOSER'S qualifications to perform under the contract shall cause the CITY to reject the Bid, and if after the award, to cancel and terminate the award and/or contract.



*Roger Hornby*

---

**By:**

(Insert signature of authorized representative)

ATTACHMENT B

**NON-COLLUSIVE AFFIDAVIT**

---

**STATE OF** \_\_\_\_\_  
**COUNTY OF** \_\_\_\_\_

*DSI Medical Services, Inc.*

---

**[Name of Bidder]**, being first duly sworn, deposes and says that:

*Roger Hornby*

---

**BIDDER** is the  
*VP - Business Development*

---

(Owner, Partner, Officer, Representative, or Agent)

---

**BIDDER** is fully informed respecting the preparation and contents of the attached Bid and of all pertinent circumstances respecting such Bid;

---

Such Bid is genuine and is not a collusive or sham Bid;

---

Neither the said **BIDDER** nor any of its officers, partners, owners, agents, representatives, employees, or parties in interest, including this affidavit, have in any way colluded, conspired, connived, or agreed, directly or indirectly, with any other **BIDDER**, firm, or person to submit a collusive or sham Bid in connection with the Contract for which the attached Bid has been submitted; or to refrain from bidding in connection with such Contract; or have in any manner, directly or indirectly, sought by agreement or collusion, or communications, or conference with any **BIDDER**, firm, or person to fix the price or prices in the attached Bid or any other **BIDDER**, or to fix any overhead, profit, or cost element of the Bid Price or the Bid Price of any other **BIDDER**, or to secure through any collusion, conspiracy, connivance, or unlawful agreement any advantage against **[Recipient]**, or any person interested in the proposed Contract;

---

The price of items quoted in the attached Bid are fair and proper and are not tainted by collusion, conspiracy, connivance, or unlawful agreement on the part of the **BIDDER** or any other of its agents, representatives, owners, employees, or parties in interest, including this affidavit.

By

(Signature of Bidder)

Subscribed and sworn to before me this 18<sup>TH</sup> day of  
April, 2025

Notary Public (Signature)

My Commission Expires: Oct. 15<sup>TH</sup>, 2026

Commonwealth of Pennsylvania - Notary Seal  
MARY MOORE - Notary Public  
Philadelphia County  
My Commission Expires October 15, 2026  
Commission Number 1341439

Be sure to complete all blanks with the appropriate information, and have the affidavit notarized before submission. Let me know if you need further assistance with any part of this!



ATTACHMENT D

**CONFIRMATION OF DRUG-FREE WORKPLACE**

---

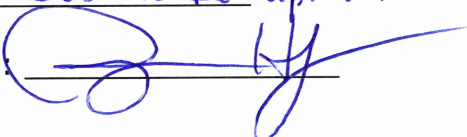
In order to have a drug-free workplace program, a business shall:

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibitions.
2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are under Bid a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employee that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 893 or of any controlled substance law of the United States or any State, for a violation occurring in the workplace no later than five (5) days after the conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community by, any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

A signed copy of your **Drug-Free Workplace Policy** must be attached to this signed copy and submitted with the Bid Documents.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

**Signer's Name** (Typed or Printed): Roger Hornby  
**Title of Signer:** VP- Business Development

**Vendor's Signature:** 

ATTACHMENT E

**SIGNATURE PAGE**

---

The undersigned attests to his (her, their) authority to submit this Submittal and to bind the firm(s) herein named to perform as per agreement. Further, by signature, the undersigned attests to the following:

1. The Proposer is financially solvent and sufficiently experienced and competent to perform all of the work required of the Proposer in the Contract;
2. The facts stated in the Proposer's response pursuant to Request for Submittals, instructions to Proposer and Specifications are true and correct in all respects;
3. The Proposer has read and complied with, and submits their proposal agreeing to all of the requirements, terms and conditions as set forth in the Request for Proposals.
4. The Proposer warrants all materials supplied by it are delivered to the CITY of Lauderhill, Florida, free from any security interest, and other lien, and that the Proposer is a lawful owner having the right to supply the same and will defend the conveyance to the CITY of Lauderhill, Florida, against all persons claiming the whole or any part thereof.
5. Proposer understands that if a team is shortlisted and selected to make oral presentations to the selection committee and/or CITY, only the team members evaluated in the written submissions may present at the oral presentations. Any changes to the team at the oral presentations will result in that team's disqualification.
6. The undersigned certifies that if the firm is selected by the City, the firm will negotiate in good faith to establish an agreement.
7. Proposer understands that all information listed above may be checked by the City of Lauderhill and Proposer authorizes all entities or persons listed above to answer all questions. Proposer hereby indemnifies the City of Lauderhill and the persons and entities listed above and holds them harmless from any claim arising from such authorization or the exercise thereof, including the dissemination of information pursuant thereto.

---

Submitted on this 18<sup>TH</sup> day of April, 2025

---

(If an individual, partnership, or non-incorporated organization)

**Witness:** \_\_\_\_\_

**Company:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**By:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Printed Name, Title:** \_\_\_\_\_

(If a corporation, affix seal)

**Company:** DSI Medical Services, Inc.

**By:** \_\_\_\_\_

**Attested by Secretary:** \_\_\_\_\_

**Printed Name, Title:** Roger Hornby, VP-Business Development

**Incorporated under the laws of the State of:** Delaware



### CERTIFICATE (For Partnership)

I HEREBY CERTIFY that a meeting of the partners of \_\_\_\_\_, a Partnership under the laws of the State of \_\_\_\_\_ held on \_\_\_\_\_, **20**, the following resolution was duly passed and adopted:

"RESOLVED, that \_\_\_\_\_ as \_\_\_\_\_ of the Partnership, is hereby authorized to execute the Bid Form dated \_\_\_\_\_, **20**, between the City of Lauderhill, Florida, and this Partnership, and that the execution thereof, attested by the \_\_\_\_\_ of the Partnership be the official act and deed of this Partnership."

I further certify that said resolution is now in full force and effect.

IN WITNESS WHEREOF, I have hereunto set my hand this \_\_\_\_ day of \_\_\_\_\_, **20**.

**(Signature)**

**(Title)**

STATE OF FLORIDA

COUNTY OF \_\_\_\_\_

Sworn to and subscribed before me on this \_\_\_\_\_ day of \_\_\_\_\_, **20** by \_\_\_\_\_ who ☐ is personally known to me or who ☐ has presented the following type of identification: \_\_\_\_\_.

**Signature of Notary Public, State of Florida**

**Notary seal (stamped in black ink)**

OR

**Printed, typed or stamped name of Notary and Commission Number**

CERTIFICATE (For Corporation)

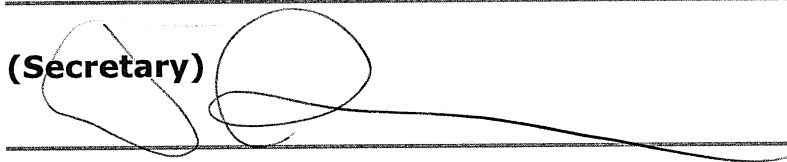
I HEREBY CERTIFY that a meeting of the Board of Directors of DSI Medical Services, Inc, a corporation under the laws of the State of Delaware held on April 17<sup>th</sup>, **20<sup>25</sup>**, the following resolution was duly passed and adopted:

"RESOLVED, that Roger Hornby, as VP- Business Development of the Corporation, is hereby authorized to execute the Bid Form dated April 18<sup>th</sup>, **20<sup>25</sup>**, between the City of Lauderhill, Florida, and this Corporation, and that the execution thereof, attested by the Secretary of the Corporation and with corporate seal affixed, shall be the official act and deed of this Corporation."

I further certify that said resolution is now in full force and effect.

IN WITNESS WHEREOF, I have hereunto set my hand this 18<sup>th</sup> day of April, **20<sup>25</sup>**

(Secretary)





~~STATE OF FLORIDA~~  
Pennsylvania

COUNTY OF Philadelphia

Sworn to and subscribed before me on this 18<sup>TH</sup> day of  
April, 2025 by Roger J. Hornby who ☐ is  
personally known to me or who ☒ has presented the following type of  
identification: PA Drivers  
License

  
\_\_\_\_\_  
**Signature of Notary Public, State of Florida**  
**Notary seal (stamped in black ink)**

OR

**Printed, typed or stamped name of Notary and ~~Commission Number~~**

Commonwealth of Pennsylvania - Notary Seal  
MARY MOORE - Notary Public  
Philadelphia County  
My Commission Expires October 15, 2026  
Commission Number 1341439

ATTACHMENT F

**LIST OF SUBCONTRACTORS**

---

The Proposal shall list below the names and business address of each subcontractor who will perform work under this Proposal in excess of one-half of one percent of the Contractor's Total Proposal Price, and shall also list the portion of the Work that will be done by such subcontractor. The listing of more than one subcontractor for each item of work to be performed with the words "and/or" will not be permitted. Failure to comply with this requirement will render the Proposal as non-responsive and may cause its rejection.

---

<b>Work to Be Performed</b>	<b>% Total Contract</b>	<b>Contractor License No. (if applicable)</b>	<b>Subcontractor Name/Address</b>
Mobile/onsite Collections	15%		Orion Health Services 2832 Stirling Rd, Suite C Hollywood FL 33020
Mobile/onsite Collections	15%		Flightline Drug Testing 650 SW 34th St, #301 Ft. Lauderdale FL 33315

---

*Please ensure to list the specific work to be performed, the percentage of the total contract the subcontractor will complete, the contractor's license number (if applicable), and the subcontractor's name and address as requested.*

---

## ATTACHMENT G

### REFERENCES

Please list a minimum of five (5) government agencies, with whom you have done business during the last five years, as well as the types of advertising service provided. (Please use additional sheets if you wish to provide additional references).

---

<b>Agency/Firm Name</b>	<b>Contact Name</b>	<b>Address, City, St., Zip</b>	<b>Phone/Fax Email</b>	<b>Services Provided</b>
1. Central Ohio Transit Authority (COTA)	Geena Crosby	1600 McKinley Ave Columbus OH 43222	614-275-5813 CrosbyGK@cota.com	Drug & Alcohol Test Management
2. County of Burlington	Kate Mahan	49 Rancocas Rd Mt. Holly NJ 08060	609-265-5480 kmahan@co.burlington.nj.us	Drug & Alcohol Test Management
3. Somerset County	Lori Call	20 Grove St Somerville NJ 08876	908-231-7127 Call@co.somerset.nj.us	Drug & Alcohol Test Management
4. St. Charles County	Paul Hunt	201 N. 2nd St St. Charles MO 63301	636-949-7900 x7192 phunt@sccmo.org	Drug & Alcohol Test Management
5. Alabama Forestry Commission	Nikki Barnes	64 N. Union St Montgomery AL 36130	334-462-7159 nikki.barnes@forestry.alabama.gov	Drug & Alcohol Test Management

---

*Please ensure all requested information is filled out for each reference, providing a complete and accurate listing of your past clients.*

ATTACHMENT H

**ACKNOWLEDGEMENT OF ADDENDUM**

---

**RFP** 2025-040

**TITLE** Drug and Alcohol Testing Services

---

Acknowledgement is hereby made of the following Addenda received since issuance of Specifications:

- Addendum No. \_\_\_\_\_ - Dated \_\_\_\_\_
  - Addendum No. \_\_\_\_\_ - Dated \_\_\_\_\_
  - Addendum No. \_\_\_\_\_ - Dated \_\_\_\_\_
- 

**Name of Vendor's Service Contact:**

DSI Medical Services, Inc.

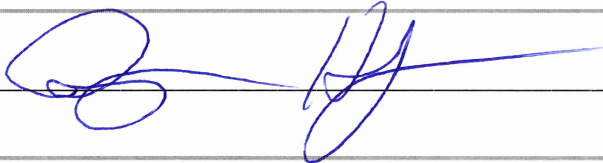
**Address:**

200 Precision Rd #200-A

Horsham PA 19044

---

**Signature**



Date 04/14/2025

---

*This page must be submitted with the RFP. Failure to provide the requested documents may result in your proposal being deemed Non-Responsive.*



## **Affidavit of Compliance with Anti-Human Trafficking Laws**

Pursuant to Section 787.06(13) of the Florida Statutes, the undersigned, on behalf of Entity, hereby affirms under penalty of perjury the following:

1. Entity does not engage in the use of coercion for labor or services as defined in Section 787.06, Florida Statutes, relating to "Human Trafficking."
2. The undersigned is duly authorized to execute this affidavit on behalf of the Entity, and affirms that the statements made herein are true and correct under penalty of perjury.

Dated this 14th day of April, **20**25

Signed: 

Name: Roger Hornby

Title: VP - Business Development

Entity: DSI Medical Services, Inc.