



Drug Testing Order Form

State Court Diversion Program

(Report to Drug Treatment Laboratory, Probate Court Basement)

Name: _____ **Case #:** _____

Test is ordered by:

Judge: _____

Assistant Solicitor: _____

Results are needed by: (date/time or immediate)

Results are to be reported:

In Courtroom -- Fax -- Phone -- Email

Special instructions for order (fax or phone #):

Test Ordered:

Standard Panel with Alcohol EtG (\$35 payment)

Laboratory Hours of Operation

Monday, Tuesday, Wednesday, Thursday 9:00am – 4:30pm

Friday 8:30am – 12:00pm

Closed for Lunch (Mon – Thurs) from 11:30am – 1:00pm

The last screen before lunch will be 11:30am and last screen before close will be 4:30pm

*****Testing will require one – two business days for results. Please plan accordingly with court dates.**

***** Subject must present payment (cash, money order, cashier's check or credit card; \$2.50 service charge if payment is made with a credit/debit card) and valid state or federally issued picture ID before the screen can be analyzed.**

***** Subject must be able to produce a urine sample within 20 minutes or a failure to produce result will be reported**

***** There are no extensions, substitutions or refunds once funds are collected.**