

Reasonable suspicion checklist



This checklist is to be used by Principal Contractors who suspect one of their Personnel may be impaired by alcohol or other drugs (please tick appropriate box and comment where necessary).

1. Breath

(smell of intoxicating liquor):

- ☐ Nil
☐ Slight
☐ Strong

Other _____

2. Attitude

- ☐ Hallucinating
☐ Sedated
☐ Hostile
☐ Irritable

Other _____

3. Actions

- ☐ Disruptive
☐ Vomitting/unwell
☐ Fighting/violent
☐ Excessively active
☐ Excessively drowsy

Other _____

4. Body

- ☐ Flushed skin
☐ Sweating
☐ Twitching
☐ Dizziness

Other _____

5. Eyes

- ☐ Watery/Glazed
☐ Pupils contracted
☐ Pupils dilated
☐ Involuntary movements

Other _____

6. Breathing

- ☐ Normal
☐ Short
☐ Jerky
☐ Rapid
☐ Shallow
☐ Slow

Other _____

7. Speech

- ☐ Incoherent
☐ Slurred
☐ Confused
☐ Fast
☐ Slow

Other _____

8. Balance

- ☐ Unsteady
☐ Swaying
☐ Sagging
☐ Falling
☐ Staggering

Other _____

9. Movements

- ☐ Needs support
☐ Clumsy
☐ Jerky
☐ Sluggish
☐ Tremor

Other _____

Site

Name of Contractor Personnel

Name of Principal Contractor

Name of Territory Manager

Time and date

Designation (Employee or Contractor)

Signature

Territory Manager agrees with Principal Contractor's need to discuss with the local manager. ☐ Yes ☐ No

Provide completed form to your Personnel's local manager. They will contact Australia Post's National AOD Coordinators to arrange testing.