MINNESOTA
HEALTH PROFESSIONALS
SERVICES PROGRAM

1360 Energy Park Drive, Suite 220
St. Paul, MN 55108
651-642-0487 | 651-797-1380 (Fax)
mn.gov/boards/hpsp

APPENDIX A
of Participation Agreement

Toxicology Screening Instructions

For quick access, use this QR code to access our toxicology webpage. Save this to your bookmarks. Doing so will allow you to easily return to this packet whenever questions arise.

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TOXICOLOGY OVERVIEW AND REQUIRED FORMS FROM THIS DOCUMENT

Your signature will be required upon reading this document thoroughly and completely.

These Toxicology Screening Instructions provide you with information about the Health Professionals Services Program's (HPSP) toxicology screening processes. It is important to your successful completion of monitoring to thoroughly review this document. Your case manager is available to address your questions and concerns throughout your monitoring.

HPSP receives many questions from participants that are already addressed within this packet. Thoroughly reading and referring to this information throughout your participation in HPSP will help you understand expectations, processes, and toxicology guidance, and can save you time when questions arise.

Once you have reviewed and are familiar with the Toxicology Screening Instructions, read, complete and return the following forms from these instructions to HPSP:

- **Participant Signed Acknowledgement** form (page 12) and
- **Collection Site Protocols Agreement** (page 15)

HPSP recognizes that toxicology screening may be inconvenient for participants. However, toxicology screens effectively document and support ongoing recovery. Toxicology screening is also a way to assure employers and treatment providers that you are maintaining your recovery.

You are responsible for the costs associated with specimen collections and testing (Statute 214.32 subd.3). Contact the Hennepin Healthcare (HHC) lab to set up a MyChart account through HHC. You will then be able to link a method of payment to your account.

It's important to pay your bill to HHC in full or have a consistent payment schedule in place. If HHC no longer allows you to collect due to an unpaid bill, this may result in a report to the board or discharge from HPSP.

Any arrangements related to toxicology screening that are not identified in this document require prior approval from HPSP. In addition to urine toxicology screening, HPSP may request other biological substrates such as breath (breathalyzer), blood (PETH), hair, and/or nails.

Refer to this document whenever questions arise. Communicate immediately with your case manager problems or concerns arise. You can also reach HPSP's main line at 651-642-0487. Thank you for your cooperation.

GETTING STARTED

To start toxicology screening through HPSP you need to:

1. Complete and return the enclosed participant signed acknowledgement form (Page 12), to HPSP
2. Set up an HHC MyChart account and add a payment method on file with HHC. If you need assistance, email Anita.Wong@hcmed.org
3. Establish a collection site(s). Collection sites are where you provide your specimens. You may have more than one collection site. HHC is a pre-approved collection site. You may be able to coordinate your urine collections through your employee health service. For other approved collection sites with active agreements, review the search feature on the HPSP website Collection Site Search.
    a. If you plan to use a collection site other than HHC, you must ensure that the collection site completes and returns to HPSP the **Collection Site Protocols Agreement** form.
    b. There is a collection site search tool on the HPSP Portal landing page Collection site search – if you do not see your collection site on the list you will need to have the lab supervisor complete the **Collection Site Protocols Agreement** form.

Hennepin Healthcare (HHC)

Initial toxicology kits will only be mailed when payment plans have been set up through your HHC MyChart account. Each kit is a small pre-addressed box that holds a biohazard bag and a sterile plastic collection cup. Your kits will come together in a larger box directly from HHC. The box will contain both the kits and Chain of Custody Forms.

Need more kits and chain of custody forms? Call Hennepin Healthcare at 612-873-3018 or email them at ms.clab.toxtesting@hcmed.org to reorder toxicology mail kits and chain of custody forms. Kits will only be mailed when payment plans have been received through MyChart. We ask that you have a minimum of three toxicology kits and chain of custody forms available for use at all times. Once requested, it can take up to 14 days to receive kits, so ensure you are preparing ahead of time to reorder.

Lab Contact Information:
Hennepin County Medical Center
701 Park Ave Minneapolis, MN 55415
Phone: 612-873-3018

Directions to HHC: Park at the main hospital ramp attached to the main hospital. The address for this ramp is: 615 South 6th Street, Minneapolis, MN 55415. Once you have parked, take the stairs or elevators to the Skyway Level to check in. Once you cross the Skyway, you will be on the 2nd floor of the Purple Building. Take the elevators to 4th floor. Look for the Clinical Laboratories sign. Once you've arrived at the lab, tell the staff at the front desk area that you are here for an HPSP collection.

There is a separate lab location for PEth tests. If you are called for a PEth test, you must go to the Hennepin Healthcare Clinic & Specialty Center Lab. This lab is open Monday – Friday and you must arrive before 3:30 pm to have your specimen taken. Alternatively, you may complete the PEth test with your primary care clinic or another HPSP approved site found using the Collection Site Search.

Directions for PEth: There is a parking ramp beneath the building. The address for this ramp is: 821 Park Avenue S, Minneapolis, MN 55415. Otherwise, there is street parking available. Proceed to the 2nd floor and check in at the Client Services Area. Please identify yourself and state that you are there for an unscheduled HPSP PEth collection.

Lab Contact Information:
Hennepin Healthcare Clinic & Specialty Center Lab
715 S. 8th Street Minneapolis, MN 55404
Phone: 612-873-6963

IMPORTANT

- Promptly inform your case manager of any toxicology screening issues, such as forgetting to check the color(s) of the day or collecting a specimen after the 6:00 PM deadline.
- Inability to provide a specimen due to a lack of toxicology kits will be considered a problem screen.
- Inability to provide a specimen due to bad debt with Hennepin Healthcare will be considered non-compliance.

Identify a Collection Site

You may have your specimens collected directly at HHC or at an alternate location using toxicology mail kits. Alternate collection sites must receive prior approval from HPSP. To verify if a collection site is pre-approved, use the "Search Collection Sites" tool available on the portal landing page. HPSP recommends you call the collection sites you find using this tool to confirm the information provided. We do work to keep this list as up to date as possible.

If you wish to use a collection site that is not pre-approved, the collection site must complete and return the **Collection Site Protocols Agreement** form (page 15) to HPSP. This process ensures the site can collect specimens in accordance with HPSP standards. HPSP will notify you if the proposed site is not approved.

It is important for you to read and be familiar with the information on the **Collection Site Protocols Agreement**. Review this document thoroughly to ensure your chosen collection site follows the instructions.

You may designate more than one collection site.

Potential Collection Sites	Unacceptable Collectors
➢ Hospital or Clinic Laboratory ➢ Hospital Emergency Room or Urgent Care ➢ Employee Health Program or Laboratory ➢ Paramedic Station ➢ Detox Center ➢ Probation Work Release Program ➢ Supervisor	➢ Self ➢ Co-worker ➢ Friend ➢ Family member ➢ Aftercare or AA/NA group member ➢ Someone you supervise or employ

At the Collection Site

Collection sites are responsible for mailing specimen mail-kits to HHC. Confirm with the collection site whether the cost of mailing is included in the collection fee or if you must provide a pre-stamped toxicology kit. If it is requested that you provide the pre-stamped kit, see page 16 for directions on how to create a USPS account to complete this task successfully.

Never mail specimens to HPSP.

The toxicology kits must have the collection site listed as the return address.

HPSP advises you to keep copies of your chain of custody forms following the screen date for documentation that you provided the specimen.

To provide reliable specimens you must:

- Bring picture identification to the collection site.
- Provide a **minimum of 30mL of urine**.
- Ensure that the chain-of-custody forms are accurately completed, signed and dated by you and the collector.
- List all prescribed and over-the-counter medications taken within the past 30 days on the chain-of-custody form.
- Write your color and panel number on the chain of custody form. Not doing so may result in re-testing a specimen and additional charges.
- If the first specimen's temperature is not within the normal range (normal range is between 90 and 100 degrees), remain at the collection site and provide a second specimen. This should be visually witnessed if there is a same sex collector and both specimens should be sent to HHC for testing; and
- If you are concerned that a specimen appears dilute, you may provide another specimen.

If you have questions or concerns about your collection, contact your case manager.

WHEN TO PROVIDE A SCREEN

HPSP uses a color system to request when participants need to provide screens. You will call the tox-line or check the portal for the color(s) of the day.

- Tox-Line: 651-642-0389
- Portal https://hpsp.hlb.state.mn.us/#/Login
  (no login is needed to see the colors of the day)

You will receive a letter/email upon HPSP's receipt of your signed Participation Agreement. The letter/email will identify your assigned color(s) and corresponding panel number(s). It will also provide you with the tox-line phone number and a portal link (shown above).

You will call the tox-line and/or check the portal Monday through Friday starting at 4:00am daily to obtain the color(s) of the day. You need to submit your specimen by 6:00 p.m. on the day your color(s) is called. HPSP staff may also contact you directly to request additional screens.

If you forget to call the tox-line or check the portal contact your case manager.

HHC's laboratory is open 24 hours a day for HPSP participants. If the door to the lab is not open, please call the lab at 612-873-3018 and let them know you are an HPSP participant. Also, call your case manager to provide the reason for the late collection.

If the tox-line appears to be out of service or does not announce the correct date, please check the portal. If the portal does not show the appropriate date or is not accessible, call the tox-line. If neither system works, please communicate with your case manager.

PRODUCTS THAT INTERFERE WITH SCREENING

You are responsible for providing reliable specimens. Specifically, you are responsible for all the foods, liquids, and other products you consume or come into contact with. As a participant in monitoring, you are asked to refrain from consuming or coming into contact with substances/products that have been found to interfere with the screening process.

These include, but are not limited to:

- Foods and products containing ethyl alcohol, such as:
  - Nyquil or other over the counter medications that contain alcohol or dextromethorphan (see information about the role of your primary health care practitioner below)
  - Fermented foods (ie: Kombucha, kimchi, sauerkraut, etc.)
  - Non-Alcoholic beer or wine, such as O'Doul's
  - Cooking wine
  - Mouthwash products that contain alcohol
  - Salad dressings that contain wine
  - Vitamins or herbal products suspended in alcohol
  - Any menu item that lists a type of alcohol in the title (i.e. beer battered fish or Jack Daniels steak);
- Kratom
- Products containing CBD (i.e. teas, lotions, balms)
- Foods and products containing hemp seeds; and
- Foods and products containing poppy seeds

Exposure to, use of, or ingestion of any substance known to interfere with the toxicology screening process is not an acceptable reason for a positive toxicology screen.

IMPORTANT:

- **It is a myth that alcohol burns off while cooking.** For information about this and products that contain alcohol, please refer to page 12 of: http://www.ars.usda.gov/SP2UserFiles/Place/12354500/Data/retn/retn06.pdf.

- **Your primary care practitioner (PCP) is responsible for managing your use of all over the counter medications.** You may take aspirin, acetaminophen, anti-inflammatory agents, diphenhydramine and antacids without your PCP's preapproval. However, your PCP must provide HPSP with documentation PRE-APPROVING your use of any other over the counter medications, including but not limited to, ephedrine, pseudoephedrine, cold, cough, and allergy medications. This approval shall indicate whether it is for a specific timeframe or for the duration of monitoring.

"It [urine screens] gave such an added incentive to do the right thing. Thoughts of using were easily corrected by, 'I can't do that, I may have a urine tox tomorrow.' They were very necessary." -A former HPSP participant-

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CLEARANCE FROM SCREENING

At HPSP clearance is defined as time away from screening with HPSP. This includes vacations, work conferences, illness, etc.

HPSP does not approve clearance from screening during the first six months of monitoring. If you have planned travel, alert your case manager prior to signing your Participation Agreement. If you do not communicate in advance, you will be expected to screen while traveling.

To request time off from screening, **contact your case manager at least 72 business hours in advance**. If your case manager is unavailable, please call the HPSP mainline -or- e-mail (651-642-0487/hlbhpsp@state.mn.us) and provide the following information:

- Your name
- The dates you are requesting clearance
- The reason you are requesting clearance
- Any supporting documents
    - Supporting documents can include items such as flight itineraries, lodging confirmations, gas receipts, conference agendas, etc.

If you are given clearance from screening, you may need to provide a screen immediately before and/or after the time you are cleared from screening. Your case manager will let you know the date(s) on which you must provide specimens.

If you are NOT cleared from screening, locate and arrange a collection site in the event your color is called. Bring toxicology kits with you and call the tox-line or check the portal daily. A search list of potential collection sites can be found on HPSP's portal, this is **not** an exhaustive list. If you need assistance in arranging an alternate collection site, contact your case manager.

If you are unable to provide a specimen because of illness or an emergency, contact your case manager **within 24 hours**. In the event of illness, obtain a doctor's note indicating your illness warrants missing work.

In the event of an emergency, contact your case manager to coordinate next steps once you are medically stable. Retain all copies of your visit summary and send them to your case manager.

REGARDING SCREENS ON HOLIDAYS

All HPSP participants are exempt from screening on the following state-recognized holidays:

- New Year's Day
- Martin Luther King Day (Monday)
- Presidents' Day (Monday)
- Memorial Day (Monday)
- Juneteenth
- Independence Day
- Labor Day (Monday)
- Veterans Day
- Thanksgiving (both the Thursday of, and Friday after, Thanksgiving)
- Christmas Day

"Urine screens kept me very honest in my recovery." -A former HPSP participant

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REGARDING PROBLEM SCREENS

This document describes several types of problem screen results. Problem screens may result in reports being filed with your regulatory board, treatment providers, and work site monitors, and/or may result in your discharge from HPSP. Information in this section will help you identify ways to minimize the possibility of problem screen results.

- **Specimens not completed on the date of request:**
  Please call the tox-line or check the portal daily and provide specimens in response to the HPSP color code system, as well as upon request by HPSP staff. Notify your case manager as soon as possible if you forget to call the tox-line or check the portal.

  To ensure that you remember to check the color, we suggest you set your phone or other alarm to remind you and write down the color(s) of the day on a calendar, even on days your color is not called. By doing this, you will be able to confirm that you checked each day.

  In the event you forget or if extenuating circumstances prevent you from providing a specimen:
  call your case manager immediately and provide a specimen the following day. It is better to provide an additional screen rather than risk missing a screen.

- **Specimens that are suspect of dilution:**
  You are responsible for your own hydration. A urine specimen is reported as suspect of dilution when the creatinine level is less than 20 mg/dl, and the specific gravity is less than 1.003. Dilute specimens tend to appear clear or very light in color. If you provide a specimen that is suspect of dilution, HPSP will contact you to request a make-up screen. You may also be asked to provide specimens within a specific

timeframe, provide visually witnessed/observed specimens or obtain a medical evaluation.

To prevent providing dilute specimens:

- Provide specimens as early in the day as possible;
- Do not drink more than 16 ounces of liquids for three hours prior to providing a specimen;
- Do not take a prescribed diuretic until after providing your specimen, unless otherwise directed by your physician; and
- Limit your caffeine intake, as caffeine is a natural diuretic.

- **Specimens with the temperature outside the normal range:**
  The temperature of a specimen is the first indicator of the specimen's validity. Normal urine specimen temperatures are between 90 and 100 degrees.

  To avoid providing specimens with a temperature outside the normal range, provide a minimum of 30mL of urine.

  Before you leave the collection site, ensure that the specimen has a temperature within the normal range. If it does not, stay at the collection site and provide another specimen (whenever possible it should be visually witnessed/observed). Both specimens should be mailed to HHC for testing. You and the collection site should notify HPSP immediately of any specimens with a temperature outside the normal range.

- **Specimens not provided between 4:00AM and 6:00PM:**
  If you are unable to provide a urine specimen by 6:00PM, contact your case manager immediately.

- **Specimens that test positive:**

When HPSP receives a confirmed positive screen result that cannot be accounted for by a current prescription, HPSP staff will contact you to discuss a possible return to use or cause for the positive screen. All positive results are confirmed before being reported to HPSP. HHC does charge you for confirmations.

- **Specimens that test positive due to a prescription:**
  Notify your case manager within 24 hours of receiving a prescription for a controlled substance and ensure HPSP receives copies of prescriptions for all controlled substances you are prescribed **within 24 hours** of obtaining the prescription. If you have not provided HPSP with a copy of your prescription, HPSP has the discretion to ask you to refrain from practice until verification of a valid prescription can be made.

- **Specimens that test positive for alcohol with bacteria and/or yeast present:**
  HPSP will notify you of specimens that test positive for alcohol and indicate the presence of bacteria or yeast. HPSP may ask that you provide a make-up screen and that you obtain a medical evaluation to address the cause of the positive result.

- **Specimens with insufficient urine to produce a testable sample:**
  Ensure that you provide at least 30mL of urine. If you are unable to produce enough urine, drink water, wait one hour, and provide another specimen. Please follow any policies of the collection site.

- **Specimens that are adulterated or substituted:**
  Adulterated and substituted specimens are considered a REFUSAL TO TEST and will result in a report being filed with your regulatory board, treatment providers and work site monitors, and possible

discharge from HPSP.

<u>If you have a problem screen result, HPSP may:</u>

- Modify your Monitoring Plan;
- Extend your length of monitoring;
- Request a substance use or medical evaluation;
- File a report with your regulatory board;
- Notify your treatment providers and work site monitors; and/or
- Discharge you from the program.

HPSP staff will contact you as soon as HPSP becomes aware of problem screen results. Follow-up on problem screen results may be delayed due to shipping and processing times.

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PARTICIPANT SIGNED ACKNOWLEDGEMENT

******Complete and return this form to HPSP******

This form is provided to you in conjunction with the Toxicology Screening Instructions. After reviewing the document, complete and return this form to HPSP with your signed Participation Agreement or as otherwise requested.

As part of HPSP's toxicology screening process, I agree to:

1.) **Register with Hennepin Healthcare (HHC)**
Complete and return the attached ***HHC Account Generation*** form to HPSP (page 13).

2.) **Set up MyChart with Hennepin Healthcare (HHC)and add payment for toxicology screening.**

3.) **Establish a Collection Site**
I will provide my urine specimens at the following preapproved sites (check all that apply):

☐ HHC ☐ Mayo EHS (Rochester)* ☐ Park Nicollet EHS*

**Participants must be employees and should contact employee or occupational health programs to register prior to providing specimens.*

OR

I will provide my urine specimens at: ☐ Other

The proposed collection site must complete and return a copy of the **Collection Site Protocols Agreement** form (page 16) to HPSP, if not already in the approved potential collection sites list.

The proposed collection site(s) is: _____

Additional Collection Site Protocols Agreement forms can be found on HPSP's website at: https://mn.gov/boards/hpsp/toxicology/.

I have read and understand the information provided in the Toxicology Screening Instructions and I authorize HPSP to communicate with my specimen collectors and lab regarding the collection or screening processes or results.

Print Name: _____

Signature: _____ **Date:** _____

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URINE COLLECTION SITE PROTOCOLS AGREEMENT

PART 1 OF CHAIN OF CUSTODY FORM (COC)

Collector:

- Check that the specimen ID number at the upper right of Hennepin Healthcare (HHC) Drug Screening Consent/COC matches number on the security strip on the bottom of COC form.
- Print donor's name on line 1a COC form.
- Ask the donor to state full name and date of birth for ID match.
- Verify and document Subject's ID and Date of Birth on line 1b. Picture identification required.
- Document collection site on line 1e. *Print collection site name and address. Include a phone number for the site in case of questions. Include a fax number. If there are any errors in the chain of custody form, an affidavit will be faxed to this number. Indicate if it is not a secured fax; you will be notified before faxing.*
- Check *Urine* for specimen type

PART 2 OF COC

Donor: Check the HPSP box and write panel number.
Collector: Instruct donor to remove extra clothing and personal belongings and to wash and dry hands thoroughly.
Donor: Unwrap a HHC urine collection kit.
Collector:

- Instruct the subject to provide at least 30 milliliters of urine. This can be measured from the side of the collection container.
- Instruct the subject NOT to flush the toilet.
- The donor provides the specimen, and the collector obtains it directly from the donor.
- In the presence of the donor:
  - Tightly screw on cap of the collection container and affix the initialed/dated security seal over the top and down the sides of the container.
  - Read temperature strip within 4 minutes of collection.
  - The temperature strip changes color in sequence as the temperature changes.
  - Read the green color.
- Check in either the YES or NO boxes on line 2 if: 1) the specimen's temperature had been read within 4 minutes of its collection and 2) whether the temperature is within the acceptable range of 90°F to 100°F.
- If the temperature is not within the acceptable range inform the donor and ask for a second sample. If possible, the second sample should be visually witnessed. Both samples should be mailed to HHC. If donor refuses or is unable to void, document on COCRF and indicate in the REMARKS the actual temperature from the temperature strip. If no temperature read out was obtained, indicate whether the specimen felt hot or cold. Proceed to next step.
- An observed collection is one where the collector visually witnesses the urine sample being collected into the urine container. Check the Observed Box if it is an observed collection. Otherwise leave it unchecked.

PART3 OF COC

Donor: Sign and date the COC form and list any medications taken within the last 30 days.

PART4 OF COC

Collector:

- Sign and print name. Write collection time and date. Check *Mailer*
- Place specimen into the rear pocket of the self-sealing biohazard bag.
- Remove copy of COC form and give to donor.
- Place COC form into the front pocket of the self-sealing biohazard bag.
- Peel off the release liner from the biohazard bag and seal bag.
- Place the biohazard bag into the mailer box.
- Initial the box seal and secure it on the mailer box.

Participants are responsible for the cost of collections.

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BLOOD COLLECTION SITE PROTOCOLS AGREEMENT

PART 1 OF CHAIN OF CUSTODY FORM (COC)

Collector:

- Check that the specimen ID number on the upper right of HHC Drug Screening Consent/COC matches number on the security strip on the bottom of COC form.
- Print donor's name on line 1a COC form.
- Ask the donor to state full name and date of birth for ID match.
- Picture identification is required. Verify and document the donor's ID and date of birth on line 1b.
- Document collection site on line 1e. (Print collection site name and full address. Include a phone number where the collector can be reached in case of questions about the collection. Include a fax number. If there are any errors in the chain of custody form, an affidavit will be faxed to this number. Please indicate if it is not a secured fax; you will be notified before faxing.)

PART 2 OF COC

Collector: Check ***HPSP Panel*** and write in ***PEth.***

Blood collection Procedure:

- **Collector:** Follow department standard operating procedures for venipuncture collection -for PEth collect 1 **lavender-top tube** and collect the specimen directly from the donor.
- **Donor:** Date and initial security strip on the bottom of the COC form.
- **Collector:** In the presence of the donor affix the initialed and dated security seal over the top and down both sides of the container.

PART3 OF COC

Donor:

- Read *Consent* Portion in Part 3 of COC form.
- Sign and date the COC form.
- List any medications taken with the last 30 days.

PART4 OF COC

Collector:

- Sign and print name.
- Write collection time and date.
- Check *Mailer.*
- Place specimen into the rear pocket of the self-sealing biohazard bag.
- Remove copy of COC form and give to donor.
- Place COC form into the front pocket of the self-sealing biohazard bag.
- Peel off the release liner from the biohazard bag and seal bag.
- Place the biohazard bag into the mailer box.
- Initial the box seal and secure it on the mailer box.

The collection site must mail specimen to HHC. The cost of mailing may be included in collection fee, or the collection site may request that the mailer be pre-posted.

Participants are responsible for the cost of collections.

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COLLECTION SITE PROTOCOLS AGREEMENT

Complete the below fields & keep the original form at the collection site:

Name of collection site						
Collection Site Representative Name & Title						
Address of Collection Site						
Phone Number				**Fax Number**		
Days and hours of availability						
Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.

Method of Obtaining Service

Walk-in ☐ Call Ahead ☐ Appointment Required ☐ Appointment Preferred ☐

HPSP Participant's Name	**Cost of Collections**

The collection site will act as a collection site (collector) for other HPSP participants? ☐ Yes ☐ No

Postage:

☐ Participant provides pre-stamped mail-kit
☐ Postage is included in collection fee

The collection site will collect urine samples: ☐ Yes ☐ No

The collection site will collect blood samples: ☐ Yes ☐ No

Special Instructions:

On behalf of the collection site, I have read, understand, and agree to adhere Collection Site Protocols.

Signature of collection site staff: _____ **Date:** _____

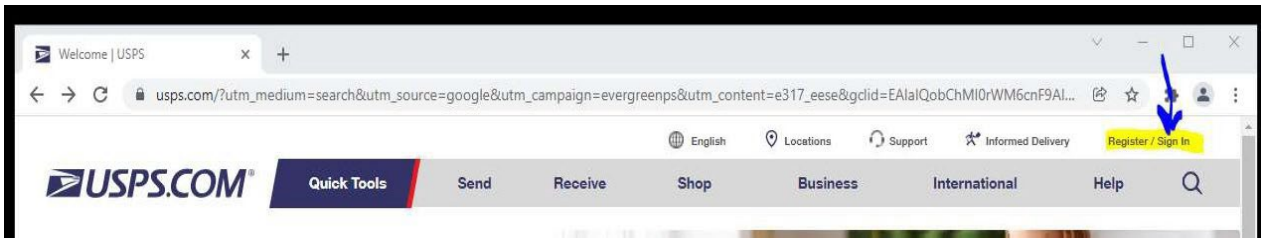
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CREATING A USPS ACCOUNT

Some collection sites have had difficulty mailing toxicology kits to Hennepin Healthcare Center. To address this, you may create an account with the USPS and create mailing labels to affix to the toxicology kits. The following instructions are provided to assist you develop an account with the USPS.

1. Go to **www.usps.com**
2. In the top right corner (above "Help") click on "**Register/Sign In**"
   a. Sign into your account at **www.usps.com**

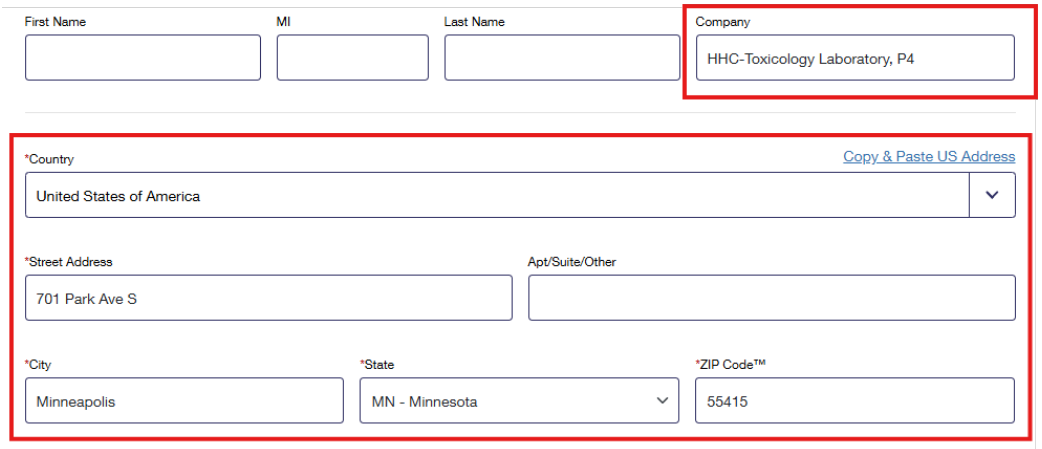


   b. Select the "**Click-N-Ship**" icon



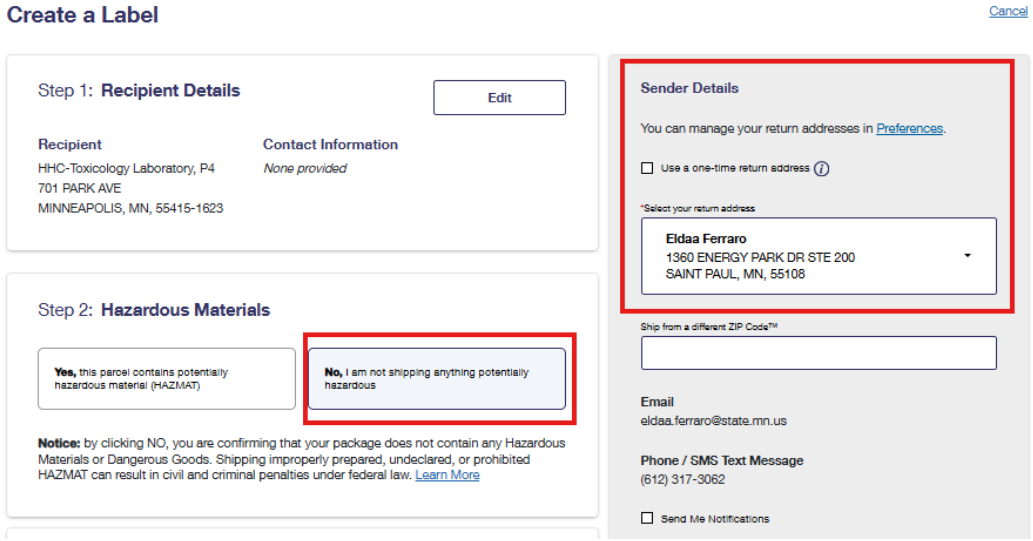
   c. Enter Shipping information:

HHC - Toxicology Laboratory, P4
701 Park Ave. S.
Minneapolis, MN 55415

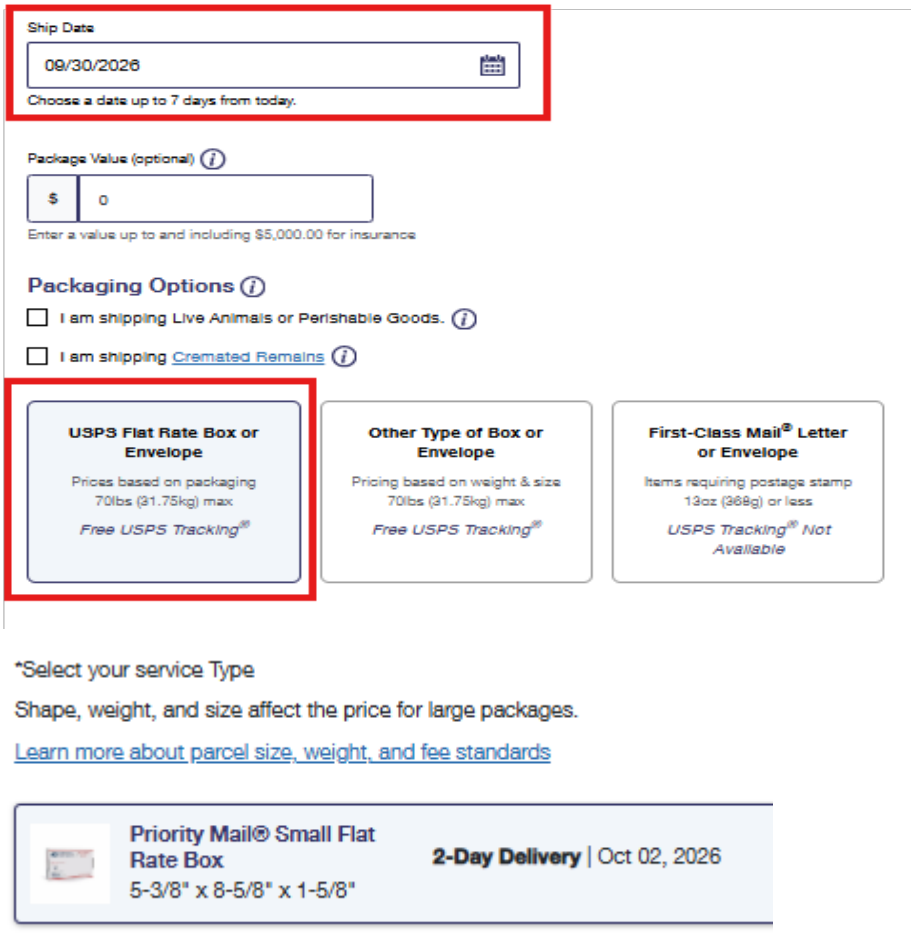


   d. Click on 

e. The return address under sender details should be the **collection site** address



f. Select your ship date and click on flat rate box



g. Add to cart and pay to print the label and affix it to the collection box

3. Now that you have an account, you can create mailing labels with tracking.