Drugs of Abuse On-Site Screens

Saliva Testing for Drugs & Alcohol

Breath Testing for Alcohol

Useful Information

For further information visit our website:

www.apc.co.nz/drug&alcoholtesting
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Check out our website for datasheets and costs on drug screening products: www.apc.co.nz
NO-STEP 5 Panel®

Five Panel Drug Screen™ with a specimen collection cup, ID label, temperature strip, solid lid & tamper evident seal for: Amphetamines, Cocaine, Marijuana, Methamphetamines & Opiates

- Incorporates collection and testing
- Temperature strip on collection cup
- Clear collection cup - allows for visual integrity check
- Tamper-proof - Closed specimen cup - test device is included
- Results ready in 5 minutes
- No timing required: control line indicator
- Each test has built-in procedural control
- Results stable for one hour
- >97.5% correlation to GC/MS at 95% confidence level
- Adulterant (AT) Test included in every test

NO-STEP 10 Panel

Ten Panel Drug Screen™ with a specimen collection cup, ID label, temperature strip, solid lid & tamper evident seal for: Amphetamines, Barbiturates, Benzodiazepines, Cocaine, MDMA (Ecstasy), Methadone, Methamphetamine, Marijuana (THC) Opiates, and Tri-cyclic Antidepressants.

- Incorporates collection and testing
- Temperature strip on collection cup
- Clear collection cup - allows for visual integrity check
- Tamper-proof - Closed specimen cup - test device is included
- Results ready in 5 minutes
- No timing required: control line indicator
- Each test has built-in procedural control
- Results stable for one hour
- >97.5% correlation to GC/MS at 95% confidence level
- Detects drugs at AS/NZ Standard 4308:2008 cut-offs
- Adulterant Test (AT) included in every test
Key Cup™ 5 Panel Drug Screen®

An integrated collection and testing device for up to 10 drugs of abuse. Tests for Amphetamines, Cocaine, Marijuana, Methamphetamines & Opiates

- Temperature strip on collection cup
- Clear collection cup—allows for visual integrity check
- Incorporates collection and testing
- Collect sample—read results in 5 minutes
- No timing required—control line indicator
- Closed cup specimen-tamper-proof
- Ship to lab in same container for confirmation
- Each test has built in procedural control
- Results stable for one hour
- >97.5% correlation to GC/MS at 95% confidence level
- Cut-offs set to AS/NZ Standards 4308:2008 for immunoassay testing

First Sign®

is a single panel drug test - for the detection of drugs of abuse in urine. Simply dip the First Sign into the urine sample for about 15 seconds and read test results once the control line forms, typically in 3—5 minutes. Pipette method also available.

Available for
Marijuana & Methamphetamines

Also available:
Amphetamines, Barbiturates, Benzodiazepines, Cocaine, MDMA (Ecstasy), Methadone, Opiates, Tri-cyclic Antidepressants
Collection cups for specimen collection are available in packs of 10 for testing where cup is not included in package:-

First Sign Single Panel Drug Tests

- 100ml graduated cup
- Temperature strip for test validity
- Clear cup allows for visual integrity check

$1 each +GST (minimum of 10)

Adulterant Tests (AT) ensure the integrity of your drug testing program.

Adulteration is the tampering of a urine specimen with the intention of altering the test results. The use of adulterants in a urine specimen can cause false negatives by either interfacing with the test or destroying the drugs present in urine. Dilution may also be used to produce false negatives results.

Adulterant Tests check urine for three specific common characteristics—
1) Oxidants (OX) bleach, peroxide
2) Specific Gravity (SG)/Creatinine-sample dilution
3) pH tests for the presence of acidic or alkaline adulterants in urine specimens

Adulterant Tests are now included as standard with all our multi panel drug tests.
**ORAL Stat** is a rapid saliva screening test for the simultaneous qualitative detection of amphetamine, methamphetamine, cocaine, opiates and marijuana and their metabolites in human oral fluid.

- Allows real-time testing anybody....anytime...anywhere
- All collections can be observed
- No restroom facilities required
- Specimen collection takes 3 minutes
- No shy bladder issues
- No specimen tampering issues
- Results ready in 15 minutes
- Detects parent THC
- No instrumentation required

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**READING TEST RESULTS**

All our Drug Screens have built in procedural Control Lines (Quality Control) to verify that the test is indeed “working”. (NO-STEP, KEY CUP, FIRST SIGN & STAT Swab)

The control line should appear first on all test windows. If the control line does not appear then the test should be deemed invalid and another test used. A second line should then appear for all tests– this indicates A NEGATIVE TEST (2 lines in each test window).

The intensity of either line is not important.

These guidelines should be followed

1. **A Single Line = POSITIVE**
2. **A Double Line= NEGATIVE**

NO Control Line = NO RESULT**/Invalid

All positive results are presumptive & should be confirmed by lab GC/MS (Gas Chromatograph/Mass Spectrometry)
Alco-Sensor FST

is a pocket-sized, hand-held breath alcohol tester, providing a simple, accurate and economical method of determining a subject's breath alcohol level. The FST accepts breath samples directly or passively. Designed with safety in mind the FST has a backlit LCD display and illuminated mouthpiece guide for low light situations.

- Powered by two AA batteries (1500 tests)
- Responds within 5-10 seconds on both positive and negative samples
- Last Test recall

**A Quantitative Test for the Determination of Equivalent Blood Alcohol Content (BAC) using a Saliva Sample. Approved by the Federal Department of Transportation (DOT) for Commercial Alcohol Testing Programs. Simple as Reading a Thermometer.**

- Non Invasive, Quantitative Results in 2-4 Minutes
- Interpretation like Reading a Thermometer
- Long Shelf Life of 1 Year Plus
- Individually Sealed in Foil Envelope with Cotton Swabs
- Built-in Quality Control and Calibration
- U.S. DOT Approved for Testing and Evidence
- High Correlation ($r=%.098$) to Blood Analysis results
- No Special Equipment or Training Required
**Drugs and Metabolites**

<table>
<thead>
<tr>
<th>Drugs and Metabolites</th>
<th>Urine Detection Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol, Beer, Wine, Liquor</td>
<td>6-12 Hours</td>
</tr>
<tr>
<td>Amphetamine/Methamphetamine</td>
<td>2-4 Days</td>
</tr>
<tr>
<td>Barbiturates</td>
<td>3 Days</td>
</tr>
<tr>
<td>Cocaine and Metabolites</td>
<td>2-3 Days</td>
</tr>
<tr>
<td>Codeine, Morphine</td>
<td>2-3 Days</td>
</tr>
<tr>
<td>Opiates</td>
<td>2-3 Days</td>
</tr>
<tr>
<td>Marijuana (THC)</td>
<td>10-30 Days Average **</td>
</tr>
<tr>
<td>PCP (Phencyclidine)</td>
<td>3 Days</td>
</tr>
</tbody>
</table>

**THC/Marijuana** This is known to remain in the system the longest of all drugs. In some cases if the user is deemed “chronic” (smoked regularly for years) then marijuana can be present in the system for up to 4+ months.

When a urine is tested for drugs of abuse, specific guidelines have been adopted from Federal Mandates on how the urine will be tested and at what cut-off levels must be exceeded before the sample can be reported as positive.

Positive samples undergo a two test criteria before a sample can be reported as “positive”. The first test is a screening procedure. (I will use marijuana as an example, the screening and confirmation rules apply to all of the compounds).

Marijuana has several similar compounds and to varying degrees react with the first screen procedure to produce a positive result; that is why the cut-off of 50ng/ml is used. The screen must exceed 50ng/ml of total cannabinoids before that specimen will be sent forward through the system to a more specific confirmation process. The confirmation procedure singles out one primary metabolite associated with marijuana use. The metabolite Delta-9-THC carboxylic acid has a cut-off of 15ng/ml. For a specimen to be reported as positive, the screen must exceed 50ng/ml and the confirmation must exceed 15ng/ml.

These are the Federal Workplace guidelines (USA) and are also the International Standard and are used by all countries. Cut-off levels vary for each individual drug of abuse, but are all set to the International Standard.

A report of a negative does not mean absolute zero, it means that the sample (marijuana) was under the cut-off of 50ng/ml or 15ng/ml.
OVER THE COUNTER & PRESCRIPTION DRUGS WHICH COULD ALTER OR AFFECT THE OUTCOME OF A DRUG TEST

**ALCOHOL**
All liquid medications containing ethyl alcohol (ethanol). Please read the label for the alcohol content. As an example, Vick’s Nyquil is 25% (50 proof) ethyl alcohol, Comtrex is 20% (50 proof) and Listerine is 26.9% (54 proof).

**AMPHETAMINES**
Obetrol, Biphentamine, Desoxyn, Dexedrine, Didrex, Marinol

**COCaine**
Cocaine HCI topical solution (Roxanne)

**PHENCYCLIDINE**
Not legal by prescription.

**METHAQUALONE**
Not legal by prescription

**OPIATES**
Paregoric, Prepectolin, Donnagel PG, Morphine, Tylenol with Codeine, Empirin with Codeine, APAP with Codeine, Asprin with Codeine, Robituddin AC, Guiatuss AC, Novahistine DM, Novahitine Expectorant, Dilaudid (Hydromorphine), M-S Contin and Roxanol (morphine and sulphate), Percodan, Vicodin etc.

**BARBITURATES**
Phemobarbital, Tuinal, Amytel, Nembutal, Seconal, Lotusate, Florinal, Floricet, Eagic, Butisol, Mebaral, Butubarital, Butabital, Phrenillin, Triad etc.

**BENZODIAZEPINES**
Ativa, Azene, Clonopin, Dalmane, Diazepam, Librium, Xanax, Serax, Tranxene, Valium, Verstran, Halcion, Paxipam, Restoril, Centrax.

**METHADONE**
Dolphine, Methadose

**PROPOXYPHENE**
Darvocet, Davron N, Dolene, etc
ALCOHOL—What is It?

The alcohol we consume is called ethyl alcohol. Most alcohols are highly poisonous to humans, but ethyl alcohol can be tolerated by the body in small amounts. It is classified as a sedative-hypnotic drug because it acts to slow down the activities of the central nervous system.

Alcohol is not digested like a food, but approximately 20% passes into the bloodstream through the walls of the small intestine. Only minutes after drinking, the circulation system begins distributing the alcohol to every part of the body. As the alcohol travels around the body via the bloodstream, it starts to slow down the operation of various sorts of cells. This causes the different stages of intoxication and drunkenness - relaxation, laughter, slurred speech, inability to walk straight and dangerous driving.

Alcohol interferes with your brain activity. It slows your reflexes, impairs co-ordination, reduces visual sharpness and cuts down on your normal caution. Alcohol makes it harder to concentrate. You can’t think as clearly or quickly, or act as fast as you normally do. Even more of a problem is that you are unaware this is happening to you. Alcohol short-circuits the warning light in your brain, so you don’t know you’re impaired. You develop a false sense of confidence and well-being. And this is extremely dangerous for anyone who’s driving, holding responsible positions in industry, involving high concentration or the operation of expensive machinery.

SOURCE: “Alcohol Facts and Effects” Booklet published by ALAC.
Breath Alcohol Testing - The Need

There are a number of reasons why monitoring for alcohol impairment needs to happen. Some of these include:

Costs to Industry

It is estimated that alcohol impairment in the workplace costs New Zealand $670,000,000 annually in lowered productivity. This does not include the cost of workplace accidents and absenteeism.

Human Costs

On average, 1 person per day is killed, and 12 people are injured in alcohol related motor vehicle accidents

About 50% of road accident victims are impaired by alcohol at the time of the accident

In total, there are about 800 deaths every year due to heavy drinking, and many times that number of injuries.

SOURCE: ALAC
**ALCOHOL AND THE HUMAN BODY**

Alcohol Content
We are all aware, its not **what we drink**— but rather the way we drink or how much alcohol we consume, - as you can see from the chart below.

### Alcohol Content of some Typical Drinks

<table>
<thead>
<tr>
<th>DRINK</th>
<th>ALCOHOL CONTENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>330ml can of beer</td>
<td>10g pure alcohol</td>
</tr>
<tr>
<td>100ml glass of table wine</td>
<td>10g pure alcohol</td>
</tr>
<tr>
<td>30ml of straight spirits</td>
<td>10g pure alcohol</td>
</tr>
<tr>
<td>330ml can of beer @ 3% alcohol</td>
<td>approx. 10g pure alcohol</td>
</tr>
<tr>
<td>440ml can of beer @ 4.2% alcohol</td>
<td>10g pure alcohol</td>
</tr>
<tr>
<td>330ml of beer @ 5% alcohol</td>
<td>10g pure alcohol</td>
</tr>
<tr>
<td>330ml of lite beer @ 2.5% alcohol</td>
<td>10g pure alcohol</td>
</tr>
<tr>
<td>750ml bottle of beer @ 4% alcohol</td>
<td>10g pure alcohol</td>
</tr>
<tr>
<td>750ml bottle of wine @ 13% alcohol</td>
<td>10g pure alcohol</td>
</tr>
<tr>
<td>750ml bottle of sparkling wine @ 12% alcohol</td>
<td>10g pure alcohol</td>
</tr>
<tr>
<td>750ml bottle of wine @ 14% alcohol</td>
<td>10g pure alcohol</td>
</tr>
</tbody>
</table>
Alcohol Content of some Typical Drinks

- 3 litre cask of wine @ 12.5% alcohol
- 275ml bottle of RTD spirits @ 5% alcohol
- 335ml bottle of RTD spirits @ 8% alcohol
- 375ml bottle of spirits @ 37.5% alcohol
- 500ml bottle of spirits @ 37.5% alcohol
- 750ml bottle of spirits @ 40% alcohol
- 1 litre bottle of spirits @ 47% alcohol
- 1125ml bottle of spirits @ 45% alcohol
### What are the penalties?

**Court Imposed Penalties**

<table>
<thead>
<tr>
<th>Offence</th>
<th>Amount of Blood</th>
<th>Alcohol Breath</th>
<th>Prison</th>
<th>Penalty Fine</th>
<th>Loss of licence</th>
</tr>
</thead>
<tbody>
<tr>
<td>You kill or injure someone when driving after drinking or taking drugs</td>
<td>more than 80mg per 100ml</td>
<td>more than 400mg per litre</td>
<td>up to 5 years</td>
<td>and/or up to $20,000</td>
<td>1 year or more</td>
</tr>
<tr>
<td>You drive after drinking or taking drugs and you are aged 20 yrs or over</td>
<td>more than 80mg per 100ml</td>
<td>more than 400mg per litre</td>
<td>up to 3 months</td>
<td>and/or up to $4500</td>
<td>6 months or more</td>
</tr>
<tr>
<td>You drive after drinking or taking drugs and you are aged under 20 years</td>
<td>more than 30mg per 100ml</td>
<td>more than 150mg per litre</td>
<td>2 years</td>
<td>$5,000</td>
<td>1 year or more</td>
</tr>
<tr>
<td>You refuse to give blood when asked by a police officer, doctor or approved person</td>
<td></td>
<td></td>
<td>up to 3 months</td>
<td>and/or up to 6 months</td>
<td>more or less</td>
</tr>
<tr>
<td>You refuse to go with a police officer for an evidential breath or blood test</td>
<td></td>
<td></td>
<td>2 years</td>
<td>$6000</td>
<td>1 year</td>
</tr>
<tr>
<td>You are in charge of a vehicle after drinking or taking drugs and do not hand over the keys when requested by police</td>
<td></td>
<td></td>
<td>up to $500</td>
<td>your licence may be cancelled</td>
<td></td>
</tr>
</tbody>
</table>
### SAMHSA Cut-offs

**SAMHSA CUT-OFF LEVELS**

(Substance Abuse & Mental Health Services) FOR DRUGS OF ABUSE/urine/immunoassay screens

<table>
<thead>
<tr>
<th>Substance</th>
<th>Cut-off ng/ml</th>
<th>Substance</th>
<th>Cut-off ng/ml</th>
</tr>
</thead>
<tbody>
<tr>
<td>amphetamine</td>
<td>1000</td>
<td>propoxyphene</td>
<td>300</td>
</tr>
<tr>
<td>barbiturates</td>
<td>300</td>
<td>Tri-cyclic antidepressants</td>
<td>1000</td>
</tr>
<tr>
<td>benzodiazepines</td>
<td>300</td>
<td>marijuana</td>
<td>50</td>
</tr>
<tr>
<td>cocaine</td>
<td>300</td>
<td>THC</td>
<td></td>
</tr>
<tr>
<td>ecstasy</td>
<td>1000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>methamphetamine</td>
<td>1000</td>
<td>buprenorphine glucuronide</td>
<td>10</td>
</tr>
<tr>
<td>methadone</td>
<td>300</td>
<td>buprenorphine</td>
<td>12.5</td>
</tr>
<tr>
<td>opiates</td>
<td>300</td>
<td></td>
<td></td>
</tr>
<tr>
<td>oxycodone</td>
<td>100</td>
<td></td>
<td></td>
</tr>
<tr>
<td>phencyclidine</td>
<td>25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>propoxyphene</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tri-cyclic antidepressants</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>marijuana</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>THC</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>buprenorphine</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>buprenorphine glucuronide</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>phencyclidine</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**NEW**
Australia/New Zealand Standard 4308:2008

In 2008 our own standard was jointly written with Australia for on-site immunoassay collection and testing for the drugs of abuse in urine. Below are the AS/NZ Standard 4308:2008 Cut-Off Levels

### Amphetamine type Substances

**Cut-off Levels (ng/mL)**

- AMP/METH: 300

### Benzodiazepines

**Cut-off Levels (ng/mL)**

- BZO: 200

### Cannabis metabolites

**Cut-off Levels (ng/mL)**

- THC: 50

### Cocaine metabolites

**Cut-off Levels (ng/mL)**

- COC: 300

### Opiates

**Cut-off Levels (ng/mL)**

- OPI: 300

### GC/MS Confirmation Cut-off Levels

- Amphetamine: 150 ng/mL
- Methylamphetamine: 150 ng/mL
- Methyleneoxymethylamphetamine: 150 ng/mL
- Methylenedioxyamphetamine: 150 ng/mL
- Benzylpiperazine*: 500 ng/mL
- Phentermine*: 500 ng/mL
- Ephedrine*: 500 ng/mL
- Psuedoephedrine*: 500 ng/mL
- Diazepam: 200 ng/mL
- Nordiazepam: 200 ng/mL
- Oxazepam: 200 ng/mL
- Temazepam: 200 ng/mL
- 4-hydroxy-alprazolam: 100 ng/mL
- 7-amino-clonazepam: 100 ng/mL
- 7-amino-flunitrazepam: 100 ng/mL
- 7amino-nitrazepam: 100 ng/mL
- 11-nor-delta-9-Tetrahydrocannabinol-9-Carboxylic acid: 15 ng/mL
- Benzoylecgonine: 150 ng/mL
- Ecgonine methyl ester: 150 ng/mL
- Codeine: 300 ng/mL
- Morphine: 300 ng/mL
- 6-Acetylmorphine*: 10 ng/mL

*These drugs may be optionally tested within each class and the specified cut-off levels shall apply.
All our Drug Screens (NO-STEP, KEY CUP, FIRST SIGN & STAT Swab) have built in procedural Control Lines to verify that the test is indeed “working”.

The control line should appear first on all test windows. If the control line does not appear then the test should be deemed invalid and another test used.

A second line should then appear for all tests—this indicates **A NEGATIVE TEST**
(2 lines in each test window).
The intensity of either line is **not important**.

These guidelines should be followed

1. **A Single Line** = **POSITIVE (NOT-NEGATIVE)**
2. **A Double Line** = **NEGATIVE**

**NO Control Line = NO RESULT**/**Invalid**

**No result/invalid** cards should be returned to us with their batch #, Lot # and expiry date noted (from foil pouch). Our manufacturer retain tests from each Batch and Lot # for integrity issues should they arise. We will replace any invalid test.

All positive results are presumptive & should be confirmed by lab GC/MS (Gas Chromatograph/Mass Spectrometry).

Tests should always be stored at room temperature and have a shelf life of 12+ months.
## COST COMPARISONS

### COST COMPARISON BETWEEN APC GROUP MULTI PANEL DRUG SCREEN DEVICE - VERSUS OTHER COMPETITORS

<table>
<thead>
<tr>
<th>5 PANEL TEST / cup &amp; Adulterant Test</th>
<th>COST</th>
<th>X QTY 20</th>
<th>Additional cost to customer (on 20 units)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NO-STEP 5 Panel</td>
<td>$15.00</td>
<td>$300</td>
<td>+ $200</td>
</tr>
<tr>
<td>PROSCREEN 5 Panel</td>
<td>$25.00</td>
<td>$500</td>
<td>+ $200</td>
</tr>
<tr>
<td>SURE STEP 5 Panel</td>
<td>$23.00</td>
<td>$460</td>
<td>+ $160</td>
</tr>
<tr>
<td>Others 5 Panel</td>
<td>$28.00</td>
<td>$560</td>
<td>+ $260</td>
</tr>
</tbody>
</table>

**$\$ Cost Savings on 20 units** **BETWEEN $200-$260**

### COST COMPARISON BETWEEN APC GROUP DRUG SCREEN DEVICE VERSUS COMPLETE LABORATORY TESTING

<table>
<thead>
<tr>
<th>5 Panel Test</th>
<th>Total # of tests</th>
<th>Positive</th>
<th>Negative</th>
<th>Cost per positive</th>
<th>Cost per negative</th>
<th>Total cost NZ$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Using Laboratory testing 1000</td>
<td>30</td>
<td>970</td>
<td>Up to $300</td>
<td>Up to $75</td>
<td>$81,750</td>
<td></td>
</tr>
<tr>
<td>Using NO-STEP DRUG SCREEN 1000</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Negative Screens</td>
<td>970</td>
<td></td>
<td>$15</td>
<td>$14,550</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laboratory Confirmations for positive screens</td>
<td>30</td>
<td></td>
<td>Up to $300</td>
<td>$9,000 $23,550</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**TOTAL COST SAVINGS/ON-SITE SCREENING/1000 TESTS** **$58,200**
1/15 PURIRI STREET
NEW LYNN
AUCKLAND 1007
NEW ZEALAND

Telephone (64) 9 827 6001
Fax (64) 9 827 7897

Email : apc@apc.co.nz
Website - www.apc.co.nz

For further information or pricing on any of the products in this catalogue or assistance with any aspect of drug and alcohol detection please contact us by any of the above methods - or to contact a particular staff member see below:

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