

SCRAM Remote Breath Program Participant Agreement



Participant Name

Agency

Agent Name

Date Placed on Program

I, _____, have been placed in the SCRAM Systems Program. As a condition of being allowed to participate in this Program, I agree to comply with all Program requirements set forth in this Agreement and to strictly follow the instructions of my Probation Officer or Pre-trial Services Agent. I understand that any failure by me to comply with this Agreement or the instructions of my officer or agent will be considered a violation of my supervision and may result in adverse legal consequences.

As a condition of my participation in the Program, I agree to properly use the SCRAM Remote Breath device provided to me by my officer or agent. I understand that the SCRAM Remote Breath device will, at pre-programmed intervals, prompt me to perform a breath test. I am fully aware that performing a breath test while driving a motorized vehicle is dangerous and, if I am prompted to take a test while driving, I will pull over before completing the test. I also understand that when the SCRAM Remote Breath device detects the presence of alcohol, it will record a positive reading and will transmit an alcohol alert to the client management system. When maintenance is required, I agree to come into the office within 48 hours after being notified by my agent and to allow authorized personnel to inspect the SCRAM Remote Breath device upon demand.

I acknowledge receipt of:

SCRAM Remote Breath Device Number	RB1037Q	Initial Here
1 Power Cord		_____

I understand that I may be required to pay the daily cost of my SCRAM Remote Breath monitoring. If so ordered, I agree to pay the following cost per day on a schedule set forth in a separate payment agreement and will submit payments as directed by my officer or agent:

Daily Monitoring Cost	Initial Here

Courtesy Reminders: I have been given the option to receive text-message courtesy reminders on my cell phone. If I have chosen this option, I understand that message and data rates may apply, and I may be charged by my wireless carrier.

Initial Here _____

I understand that I will be held responsible for damage to the SCRAM Remote Breath device. I am aware that any efforts to disable the SCRAM Remote Breath device, including covering or obstructing the camera on the device, will be reported to my Probation Officer or Pre-trial Services Agent as an attempt to defeat the device in violation of this agreement. I also understand that if I do not return the equipment in good working condition, I will be charged for the repair or replacement of the device as follows:

Full Replacement of the SCRAM Remote Breath Device	\$1190.00	Initial Here
Charger	\$35.00	
Device Case	\$12.00	_____

I understand that as a participant in the Program that I am to abstain from any and all alcohol consumption and to avoid the use of products containing alcohol and to avoid certain restricted activities, as described as follows:

Initial Here **Health and Safety Notice:**
_____ I verify that I read the Health and Safety Notice at the end of this document and my officer or agent has given me the opportunity to ask questions.

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Health and Safety information is available at www.scramsafety.com.

Initial Here **Testing Responsibilities:**

I understand that I am responsible for taking all scheduled and on-demand breath tests. I understand that I am the only person that is allowed to submit a breath test using the SCRAM Remote Breath device. I also understand that I will perform the following prior, during, and after the test:

- Be in a well-lit area away from direct sunlight
- Remove hats, sunglasses, and any hair hanging over my face
- Ensure that nothing is in my mouth during testing
- Hold the device up to the mouth with the breath tube level with the floor
- Look directly into the camera during the test
- Immediately retake the test if prompted to do so by the device

Initial Here **Device Responsibilities:**

I understand that I will monitor the battery light on the SCRAM Remote Breath device and when the light is amber or red, charge the device until the battery light is green. I will not expose the SCRAM Remote Breath to water.

Initial Here **Alcohol-Based Products:**

I understand that I am to abstain from consuming any product that contains alcohol while being monitored using the SCRAM Remote Breath device and any positive readings that are received due to ingesting an alcohol-based product will be considered a violation of this Agreement.

I acknowledge that I have received a copy of this Agreement and that it has been explained to me before signing. I understand that I must comply with the requirements of this Agreement until notified otherwise by my probation officer or pretrial services agent. I agree to call my officer or agent immediately if I have any questions about this Agreement or if I experience any problems with the SCRAM Remote Breath device. I further understand that any violation of this Agreement will constitute a violation of the Program and may cause immediate adverse legal action to be taken against me.

Participant

Date

Field Representative/Witness

Title

Date

SCRAM Remote Breath Program Participant Agreement



HEALTH AND SAFETY NOTICE FOR SCRAM SYSTEMS PRODUCTS

MEDICAL WARNINGS

- Certain medical conditions may prevent you from wearing a SCRAM Continuous Alcohol Monitoring® (SCRAM CAM®), SCRAM House Arrest®, or SCRAM GPS® bracelet. If you have experienced or been diagnosed with any of the following conditions, you should consult a doctor before attempting to wear any SCRAM Systems bracelet:
 - Circulation problems
 - Neuropathy
 - Deep Vein Thrombosis
 - Leg ulcers
 - Tendonitis
 - Diabetes
 - Pregnancy
 - History of Swelling
 - Nickel or other metal allergies
- Some side effects may occur when beginning to wear a bracelet even if you have not experienced any of the conditions above. If you experience any of the following conditions, you should immediately contact your supervising authority for further instructions and seek medical attention if needed.
 - Sores
 - Open wounds
 - Bruising
 - Severe irritation or redness

MEDICAL EMERGENCIES

- Immediately **cut the strap** and remove the bracelet if a medical emergency or safety issue occurs. Then contact your supervising authority.

COMPATIBILITY WITH MEDICAL DEVICES

- SCRAM products may not be compatible with medical devices such as pacemakers or other implanted medical devices. Consult with your healthcare provider before using a SCRAM product. Technical specifications are available upon request.
- MRI and other medical equipment may produce magnetic fields that may not be compatible with SCRAM products. Always inform the medical equipment operators if you are wearing any SCRAM Systems bracelet.
- Medical alert systems may not function or call for help when a SCRAM Base Station is used. Consult your medical alert system provider to determine if the wired SCRAM Base Station or wireless SCRAM Base Station will affect it. Technical specifications are available upon request.

GENERAL SAFETY INSTRUCTIONS

- Do not use SCRAM Systems products in environments where explosive vapors may exist.
- Follow your employer's rules to avoid any hazards of wearing SCRAM Systems bracelets when working around machinery or ladders.
- Immediately **cut the strap** and remove the bracelet if you suspect its battery has leaked. Wash affected area and clothing. Then contact your supervising authority.
- Do not submerge the SCRAM Systems Bracelet under water.

PERSONAL HYGIENE

- If you are wearing any SCRAM Systems bracelet, clean around and underneath the bracelet each day as part of a shower. Use mild soap, rinse thoroughly, and dry. Inspect the area for skin redness, sores, or bruising. Do not submerge the SCRAM CAM Bracelet under water.
- Breath tubes for SCRAM Remote Breath® come sealed in sanitary packages. Do not use a breath tube if not received in a sanitary package. Clean breath tubes periodically with soap and water or in a dishwasher. Obtain new tubes as needed from your supervising authority.

PRECAUTIONS AND INSTRUCTIONS FOR INSTALLERS

- Wear gloves and a facemask when installing bracelets or when handling bracelets that have not been cleaned and disinfected. This will minimize the risk of contracting communicable diseases.
- Do not install SCRAM Systems bracelets too tightly. The wearer should easily be able to insert their fingers between the bracelet and skin in order to clean underneath.
- Properly clean and disinfect all SCRAM Systems bracelets before installation using instructions provided on the SCRAMNET Help Page.
- Replace SCRAM CAM and SCRAM House Arrest bracelet batteries as recommended by SCRAMNET or SCRAM Systems Customer Service. Always use 3V lithium CR2 batteries in SCRAM CAM or SCRAM House Arrest Bracelets.
- Do not reuse or attempt to recharge SCRAM CAM or SCRAM House Arrest batteries.
- Replace wired SCRAM Base Station, wireless SCRAM Base Station, and SCRAM Remote Breath batteries when they no longer hold a charge. Always use replacement batteries provided by SCRAM Systems.
- Do not attempt to replace a SCRAM GPS bracelet battery.