Unit Prevention Leader (UPL) Certification Training

Participant Guide

August 2022
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# UNIT PREVENTION LEADER CERTIFICATION COURSE

## AGENDA

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<td>Preparation to Conduct Drug Testing</td>
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<td>Drug Testing Program (DTP Lite)</td>
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<td>Collection: Check-In the Soldier</td>
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<td>Check-Out Process</td>
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### Day Two:

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<tr>
<td>Post Collection- Quality Control</td>
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<td>Post Collection- Storage / Packaging /Shipment</td>
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<tr>
<td>FTDTL Procedures / Testing / Discrepancies</td>
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<td>Post Collections Results and Records Management</td>
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<td>Practical Exercise</td>
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<td>Final Exams</td>
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<td>End of Course Survey</td>
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## Acronym List

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>AFMES</td>
<td>Armed Forces Medical Examiner System</td>
</tr>
<tr>
<td>AGR</td>
<td>Active Guard Reserve</td>
</tr>
<tr>
<td>AO</td>
<td>Area of Operation</td>
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<tr>
<td>AR</td>
<td>Army Regulation</td>
</tr>
<tr>
<td>ARIMS</td>
<td>Army Record Information Management System</td>
</tr>
<tr>
<td>ASAP</td>
<td>Army Substance Abuse Program</td>
</tr>
<tr>
<td>BAC</td>
<td>Base Area Code</td>
</tr>
<tr>
<td>BACM</td>
<td>Base Area Code Manager</td>
</tr>
<tr>
<td>BH</td>
<td>Behavioral Health</td>
</tr>
<tr>
<td>CO</td>
<td>Command Directed</td>
</tr>
<tr>
<td>DDRP</td>
<td>Drug Demand Reduction Program</td>
</tr>
<tr>
<td>DoD</td>
<td>Department of Defense</td>
</tr>
<tr>
<td>DoDI</td>
<td>Department of Defense Instruction</td>
</tr>
<tr>
<td>DTC</td>
<td>Drug Testing Coordinator</td>
</tr>
<tr>
<td>DTP</td>
<td>Drug Testing Program</td>
</tr>
<tr>
<td>EAPC</td>
<td>Employee Assistance Program Coordinator</td>
</tr>
<tr>
<td>FTDTL</td>
<td>Forensic Toxicology Drug Testing Laboratory</td>
</tr>
<tr>
<td>IAW</td>
<td>In Accordance With</td>
</tr>
<tr>
<td>IO</td>
<td>Inspection Other</td>
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<td>IR</td>
<td>Inspection Random</td>
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<td>IU</td>
<td>Inspection Unit</td>
</tr>
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<td>LCM</td>
<td>Label Correction Memo</td>
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<tr>
<td>MO</td>
<td>Medical Examination</td>
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<tr>
<td>MRO</td>
<td>Medical Review Officer</td>
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### Unit Prevention Leader Course

#### Acronym List

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
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<tbody>
<tr>
<td>MTF</td>
<td>Military Treatment Facility</td>
</tr>
<tr>
<td>NO</td>
<td>New Entrant</td>
</tr>
<tr>
<td>PC</td>
<td>Prevention Coordinator</td>
</tr>
<tr>
<td>PO</td>
<td>Probable Cause</td>
</tr>
<tr>
<td>QC</td>
<td>Quality Check</td>
</tr>
<tr>
<td>RO</td>
<td>Rehabilitation</td>
</tr>
<tr>
<td>RRC</td>
<td>Risk Reduction Coordinator</td>
</tr>
<tr>
<td>RRPC</td>
<td>Risk Reduction Program Coordinator</td>
</tr>
<tr>
<td>RSP</td>
<td>Recruit Sustainment Program</td>
</tr>
<tr>
<td>SJA</td>
<td>Staff Judge Advocate</td>
</tr>
<tr>
<td>SM</td>
<td>Service Member</td>
</tr>
<tr>
<td>SOP</td>
<td>Standard Operating Procedures</td>
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<tr>
<td>SPPM</td>
<td>Suicide Prevention Program Manager</td>
</tr>
<tr>
<td>SUD</td>
<td>Substance Use Disorder</td>
</tr>
<tr>
<td>SUDCC</td>
<td>Substance Use Disorder Clinical Care</td>
</tr>
<tr>
<td>TET</td>
<td>Tamper Evident Tape</td>
</tr>
<tr>
<td>TPI</td>
<td>Test Premise Identifier</td>
</tr>
<tr>
<td>UA</td>
<td>Urinalysis</td>
</tr>
<tr>
<td>UCMJ</td>
<td>Uniformed Code of Military Justice</td>
</tr>
<tr>
<td>UIC</td>
<td>Unit Identification Code</td>
</tr>
<tr>
<td>UPL</td>
<td>Unit Prevention Leader</td>
</tr>
<tr>
<td>UPP</td>
<td>Unit Prevention Plan</td>
</tr>
<tr>
<td>USAP</td>
<td>Unit Substance Abuse Program</td>
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<tr>
<td>VO</td>
<td>Voluntary</td>
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Welcome to the Unit Prevention Leader Certification Course

- UPL Certification Training includes instruction on drug testing procedures, and prevention of alcohol and other illicit drugs.
- As the UPL, you are expected to be the Commander's subject matter expert on all areas of the Army Substance Abuse Program (ASAP), conduct flawless urinalysis collections, assist the Commander in the administration of the unit drug testing; and at the Commander's discretion, provide alcohol and other illicit drug training to the Unit and assist the Commander in the administration of the prevention activities.

Introductions

- Instructor Introduction
- Participant Introduction
Evaluation

- 16 hours to complete the course (ARNG Only)
- Class participation
- Practical exercise(s)
- Certification examination (closed book)
  - Written 50 question multiple choice exam (70% or higher)
  - Practical exam (70% or higher)

General Rules

- Attend all class sessions on time every day
- Take notes
- Turn off cell phones or set to vibrate mode
- Complete the end-of-course evaluation
- Smoking permitted only in the designated area

Course Purpose and Overview

The goal of the UPL Certification Course is to provide UPLs the training, resources, and certification necessary to support Commanders drug testing programs. This certification course and references provides the necessary information for the implementation of a successful Unit Substance Abuse Program that includes:

- Identification (Drug testing)
- Referral process to Civilian Behavioral Health/Certified Substance abuse Counselor for M-Day Soldiers; AGRs will be referred to SUDCC, if enrolled at a Military Treatment Facility)
- Rehabilitation programs
- Prevention education activities
- Separation procedures
Regulations & Policies

- DoD Instruction (DoDI) 1010.01, Military Personnel Drug Abuse Testing Program (MPDATP), (14 February 2018) is the formal mandate given to the military services to implement their substance abuse programs.

- DoD Instruction (DoDI) 1010.16, Technical Procedures for the MPDATP, (15 June 2020) governs the technical and procedural policies for the Forensic Toxicology Drug Testing Laboratory (FTDTL).

- AR 600-85, The Army Substance Abuse Program (23 July 2020) is the regulation that governs the Army Substance Abuse Program.

Note: The above instructions and regulation may not have updated policies included, be sure to check with your ASAP office for more additional policies published that are covered in their training.

Course Materials / References

- UPL Slide Presentation
- Participant Guide
- AR 600-85
- DoDI 1010.16

UPL Qualifications

- E5 or above
- Be designated on Unit Commander’s appointment orders
- Successfully complete UPL Certification Training
- Possess unimpeachable moral character
- Not currently enrolled in the Rehabilitation Program
- No investigations, no alcohol or drug-related incidents, and no SUCC enrollment in prior 36 months
- May have a local background check on Commander’s request
Course Resources

- Additional resources for Commanders and UPLs:
- ASAP public portal: https://sr2.army.mil/PROD_PUBLIC/

Terminal Learning Objective

The objective of this course is to become the subject matter expert for unit drug testing collections

Enabling Learning Objectives

- Conduct the pre-collection tasks
- Conduct the collection tasks
- Conduct the post-collection tasks
UPL Certification Training

Roles and Responsibilities

Six components of ASAP services

• Risk Reduction Coordinator (RRC) / ASAP Manager* (Previously Alcohol and Drug Control Officer, ADCO)
• Prevention Coordinator (PC)
• Drug Testing Coordinator (DTC)
• Employee Assistance Program Coordinator (EAPC)
• Risk Reduction Program Coordinator (RRPC)
• Suicide Prevention Program Manager (SPPM)

* ACTIVE DUTY: RRC/ADCO serves as ASAP Manager IAW AR 600-85, Ch 2

MEDCOM Clinical Services

• Substance Use Disorder Clinical Care (SUDCC)*
• Counselors*

*ONLY applicable to AGRs who are enrolled at Military Treatment Facility (MTF)
Roles and Responsibilities

Commander’s Responsibilities

• Implement a battalion/squadron drug and alcohol testing program

• Appoint on orders two officers and/or noncommissioned officers (E-5 or above) to be trained and certified as Unit Prevention Leaders (UPLs)

• Conduct random unpredictable unit urinalysis at a minimum rate of 10% of their assigned strength a month during Q1-Q4 in addition to testing all Soldiers who have no testing during the FY in Q4 (IAW AR 600-85)

• Deter substance abuse through an aggressive urinalysis program and identify Soldiers with substance abuse problems as early as possible

Roles and Responsibilities

Commander’s Responsibilities cont.

• Initiate administrative separation action

• Refer any AGR Soldier to the BH for evaluation within 5 duty days of notification that the Soldier received a positive urinalysis for illicit drug use or alcohol-related misconduct

• Refer M-Day Soldier to BH for SUD evaluation within 30 days of receiving notification from the DTC

• Support substance abuse prevention campaigns and alcohol-free activities in the unit and on the installation

Roles and Responsibilities

UPL Duties

• Conduct Unit urinalysis in compliance with DoD 1010.01 DoD 1010.16, and AR 600-85

• Ensure that Observers perform their duties correctly and professionally

• Assist the Commander in fulfilling his/her duties and responsibilities in support of the Substance Abuse Program

• Do your duty as a Soldier and stay physically and mentally tough by not misusing alcohol and/or using drugs
Roles and Responsibilities

Unit Standard Operating Procedures

• The UPL will assist in writing the Unit Substance Abuse Program Standard Operating Procedures (SOP)

• Outlines how urinalysis testing, drug and alcohol training and prevention efforts will be conducted at the Unit level

• Collaborate with the Commander and higher Command

• UPLs in garrison also consult with local ASAP

Roles and Responsibilities

Unit Standard Operating Procedures cont.

Unit Prevention Plan (UPP)

• Embedded in the Unit Substance Abuse Program (USAP) SOP

• Identifies how substance abuse issues will be addressed at the Unit level

• Outlines the following issues:
  – Minimum amount of substance abuse training
  – Frequency of contact with higher command or the local ASAP to obtain new information
  – How to identify high-risk populations

Lesson Summary

• Components of ASAP Program

• Commanders Responsibilities

• UPL Duties

• USAP SOP update is required
Q: What is the purpose of a Unit Prevention Plan (UPP)?

A:
Pre-Collection Tasks

Introduction

- This is the phase of drug testing, in this lesson we'll discuss:
  - Smart Testing
  - Testing Code
  - Special Tests / Prohibited Substances / Retests
  - Limited Use Policy
  - Preparation to conduct drug testing
  - Urinalysis Documents
  - Required Briefings
  - Drug Testing Program (DTP) Lite

SMART TESTING

Learning Objectives

- Learn to identify and distinguish Smart Testing techniques from ineffective testing techniques
- Learn approved manual random selection methods
### Smart Testing

#### Requirements for random testing

- Ensure Smart Testing techniques are applied
- Drug Testing rate is 10 percent random of Unit strength each month, in addition to Inspection Other (IO) testing during Q4 for any Soldiers who have not tested in Q1-Q3 (IAW AR 600-85)
- UPLs must be tested at least once every 12 months
- All Soldiers will be tested each fiscal year (IAW DoDI 1010.01)

#### What is Smart Testing?

- Smart Testing is drug testing that is conducted in such a manner that it is **not predictable** to the testing population
- Every Soldier should believe that he or she can and may be tested on any given day, at any given time

#### Purpose of urinalysis testing:

- Unit readiness
- Deters Soldiers from misusing illegal and/or prohibited drugs (including unauthorized use of prescription medication)
- Facilitates the early detection of drug abuse
- Enables Commanders to assess the security, military fitness, good order, and discipline of their Units
- Monitors rehabilitation of those enrolled in the ASAP for alcohol and/or other drug abuse
- Collects data on the prevalence of drug abuse within the Army
Reason for urinalysis testing:

More than 10% of Soldiers responding to a survey said they would be likely to use drugs if the Army did not have a drug testing program.

Smart Testing Techniques

Monthly Testing

- Randomly test part of your Unit each month (10%)
- May conduct several tests of small percentages within the month if mission and organizational structure allow
- Implementing Smart Testing techniques is critical to avoid setting predictable patterns

- Weekend/Holiday Sweeps
  - Test Soldiers during a long weekend
  - Test Soldiers when the alert system is tested

- Back-to-Back
  - Testing Soldiers on a Saturday as well as a Sunday
  - Deters from misusing drugs after an initial UA
Smart Testing Techniques

- **Pre-Deployment/Post-Deployment Testing**
  - Drug abuse does not stop during deployments, Smart Testing allows the command to identify and deter illegal drug use pre, during, and post deployment

- **Avoid Setting a Pattern**
  - Be unpredictable in your approach
  - Alternate testing days, rather than the same day every week

Smart Testing Techniques

- **Testing at the end of the duty day**
  - Test at the end of the day or during end-of-duty routines such as recall formation or afternoon PT

- **Do Not Ask For Volunteers**
  - Asking for volunteers is not random selection
  - Compromises the collection process
  - Results invalid if challenged in a court of law
  - Soldiers unlikely to volunteer if abusing

Smart Testing Techniques

**Manual random selection methods**

- Use a 10-sided die or draw numbers (0-9) from a hat Soldiers with a DoD ID number that ends with the number that you roll or draw are selected to test
- Write every Soldier’s name on a 3-by-5 index card, then shuffle the cards and draw names from the deck. Enter drawn names on the Testing Register
- Select every fourth person from the chow line and test after they eat
- Select every third vehicle at the POL point and test all occupants of the vehicle
Smart Testing Techniques

Do Not Announce Testing Before Notification
- Advance notice may give Soldiers enough time to flush with lots of water which may dilute the amount of evidence in their urine
- Avoid Signaling A Test
  - Soldiers watch all of your actions as a UPL
  - You may provide cues that testing is going to occur, impacting effectiveness of testing
  - Keep supplies out of sight until the day of testing

Smart Testing Techniques cont.
- All Soldiers selected must be tested
- Don’t stop testing because it is the end of the duty day
- Collection is only complete when the last Soldier’s name is signed on the Testing Register
- Give two hours or less notice before the test

We just discussed the final set of Smart Testing techniques:
- Avoid signaling a test
- If you select them, then collect them
- Collect from every soldier on your Testing Register
- Know your options for random selection; approved manual options or use of DTP software
Lesson Summary

• The goal of Smart Testing is unpredictability from the Soldiers’ perspective
• Use multiple Smart Testing techniques
• Random selection is a critical component of Smart Testing

Check on Learning

Q: If a Soldier is given advance notice of a urinalysis test, what may be an implication if they want to avoid drug detection?

A:
Introduction

In this lesson, we’ll discuss:

• Test Basis Codes and how to apply them

• Special testing scenarios

• Circumstances for retesting

Learning Objectives

• Identify the proper testing codes used for urinalysis collection in different scenarios

• Learn to correctly match types of tests to their specific purposes
Testing Codes

Overview

• NOTE: The terms "testing code", "testing basis code", "testing premise identifier (TPI)" are used interchangeably

• There are ten test basis codes used for urinalysis testing

• Commander always orders the test and specifies the type of test for the UPL and/or DTC to generate

• The UPL enters the test basis code on testing forms, and must do so accurately every time

Legal Ramifications

• It is imperative that you assign the correct test basis code every time you conduct a urinalysis test

• Using incorrect testing codes has potential legal ramifications and limits Commander actions

• If you are ever uncertain of the type of test you are conducting, verify it by checking with your Commander, ASAP Representatives and AR 600-85

Categories of Testing Codes

There are (3) different categories that make up the ten testing codes
– Inspection
– Command Directed
– Other
Testing Codes

**Inspection Codes:**
- Inspection Random (IR)
- Inspection Unit (IU)
- Inspection Other (IO)

**Command-Directed Codes:**
- Probable Cause (PO)
- Command Directed (CO)
- Rehabilitation testing (RO)

**Other Codes:**
- Accident (AO)
- Consent (VO)
- Medical (MO)
- New Entrant (NO)

---

**Inspection Random (IR)**
- Use when randomly selecting a portion of your Unit for urinalysis testing
- This is the most commonly used code
- Select a percentage or a specific number of Soldiers (10% per monthly requirement)
- Up to 40% random

---

**Inspection Unit (IU)**
- Use this code when testing 100% of your Unit at once
- Do not conduct IU testing when the Commander suspects only a single Soldier, but does not have sufficient evidence to order a test
- Conduct IU testing as a supplement to a good random drug testing program
- Drug testing is about deterring drug abuse, rather than “playing gotcha”
Testing Codes

Inspection Codes

Inspection Other (IO)
- Use in accordance with a Commander’s policy or Unit SOP outlining circumstances for valid inspection testing
- Soldiers returning from Absent Without Leave (AWOL)
- Soldiers returning from passes or R & R
- Soldiers who were selected for testing, but were unavailable during a recent random inspection

Testing scenario (IO)
- Several Soldiers have returned from R & R, CPT Baker’s policy states that any Soldiers returning from R & R must submit to urinalysis testing, in accordance with this policy CPT Baker has asked his UPL to test them
- Refer to your Commander’s written policy for guidance on applying the IO code

Command-Directed Codes

Probable Cause (PO)
Use when the Commander has sufficient evidence that a Soldier has violated the Uniformed Code Military Justice (UCMJ) through the abuse of alcohol or drugs
- Consult with the local Staff Judge Advocate (SJA) prior to ordering this test
- Steroid testing must be based on PO
Testing Codes

Command-Directed Codes

Testing scenario (PO)

- Commander finds hypodermic needles in PFC Hoke’s room. PFC Hoke has no valid medical reason for possessing the needles.
- Use the Probable Cause (PO) code.
- Consult with the local SJA before ordering PO tests.

Command-Directed Codes

Command Directed (CO)

- Also known as Fitness For Duty/ Competence For Duty.
- Use when the Commander questions the Soldier’s competence for duty on the basis of the Soldier’s unusual or bizarre behavior, but does not have evidence of Soldier’s illegal use of drugs.

Testing scenario (CO)

- Over the past month, SFC Davis frequently has reported late for duty and has displayed a decline in personal hygiene. Today, he reported for work and is acting very bizarre. Prior to this, SFC Davis had an exemplary attendance record and got along well with his fellow Soldiers.
- The UPL uses the Command Direct (CO) code.
Testing Codes

Command-Directed Codes

Rehabilitation (RO)

Commander orders a test as part of a Soldier’s rehabilitation treatment program for drugs or alcohol.

Testing Codes

Command-Directed Codes

Testing scenario (RO)

- SSG Barnes is enrolled in the SUDCC. She is participating in testing in order to comply with the requirements of the program.
- The UPL uses the Rehabilitation (RO) code.

Testing Codes

Other Codes

Mishap Or Safety Inspection (AO)

Testing after a Soldier is involved with an accident that destroys property or causes injuries to personnel.
## Testing Codes

### Other Codes

**Testing scenario (AO)**

- CPT Baker has ordered the UPL to conduct a test on PVT Colin after PVT Colin had an accident on the base that caused the total loss of the vehicle she was driving.
- The UPL uses the Mishap or Safety Inspection (AO) code.

**Consent (VO)**

A Soldier volunteers to provide a sample without being ordered.

**Testing scenario (VO)**

- CPL Hilleman has been plagued by rumors of drug use and volunteers to provide a sample as a way to put the rumors to rest.
- The UPL uses the Consent (VO) testing code.
<table>
<thead>
<tr>
<th>Testing Codes</th>
<th>Other Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medical Examination (MO)</strong></td>
<td>Used when a physician orders a urinalysis test after observing medical signs that a Soldier is misusing drugs</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Testing Codes</th>
<th>Other Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Testing scenario</strong></td>
<td></td>
</tr>
<tr>
<td>• Dr. Brown requests that SPC Ragland undergo urinalysis testing because SPC Ragland exhibited signs of drug abuse during a sick call visit</td>
<td></td>
</tr>
<tr>
<td>• The UPL uses the Medical Examination (MO) testing code</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Testing Codes</th>
<th>Other Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>New Entrant (NO)</strong></td>
<td>Accession Testing: Use collection code 'NO' when a collection is provided during the pre-accession physical or initial period of military service (i.e. RSP Soldiers without DoD ID; only time SSN can be used for collection)</td>
</tr>
</tbody>
</table>
Lesson Summary- Testing Codes

• There are ten testing codes used in urinalysis testing: IR, IO, IU, PO, CO, RO, AO, MO, NO, and VO

• The UPL must assign testing codes properly for every test

• You may encounter special testing situations that have different requirements than common tests

• Consult with the local ASAP office, AR 600-85 CH 4-5, or the local SJA when you have questions

• You must retest Soldiers under (IO) when the laboratory rejects a specimen without testing it

Check on Learning

Testing scenario:

SFC Fuller is enrolled in treatment. He is selected by DTP software when the UPL prepared the monthly inspection random test. SFC Fuller tells you that it should be a Rehabilitation type of test, rather than a random test.

Question: Which testing code should the UPL use?

Answer:
Prohibited Substances & Special Tests

Current Drug Panel

Drug Demand Reduction Program (DDRP) Every specimen collected will be tested for:
- Delta 9 Marijuana (THC9)
- Delta 8 Marijuana (THC8)
- Cocaine
- Amphetamines (which includes methamphetamine, MDMA (ecstasy), and MDA)
- Heroin
- Opiates (morphine and codeine)
- Synthetic opioids (Oxycodone/Oxymorphone and Hydrocodone/hydromorphone)
- Fentanyl/Norfentanyl
- Benzodiazepines
- Synthetic cannabinoids (SYCAN), known commonly as Spice

Prohibited Substances

- Cannabinoids
- Cocaine
- Amphetamines and methamphetamines
- Morphine, codeine, and heroin
- Phencyclidine
- Barbituric acid and lysergic acid diethylamide (LSD)
- Anabolic steroids
- Natural substances (to include but not limited to Salvia Divinorum, Jimson Weed, etc)
- Prescription or non-prescription drugs and medication that are used contrary to intended medical purpose or dosage
- Dietary supplements not approved by US Food and Drug Administration

Operation Supplement Safety provides updates on dietary supplements and products to avoid www.opss.org

Any compound, derivative, or isomer of any such substance listed above
Prohibited Substances

Soldiers also face adverse action for using these substances illegally or illicitly if doing so for the purpose of inducing excitement, intoxication, or stupefaction of the central nervous system:

- Hemp or products containing hemp oil
- Controlled substance analogues (e.g., designer drugs)
- Illicit use of chemicals, propellants, or inhalants (huffing)

Special Tests

Steroid Testing

- Commander must complete a memorandum requesting that a specimen be tested for steroids
- Contact ASAP Representative, or the BACM if deployed, for assistance with steroid testing requests
- All Steroid specimen can be on the same DD Form 2624. DD Form 2624 does NOT get sent to the Forensic Toxicology Drug Testing Laboratory (FTDTL)
- Commander must have probable cause. Consult SJA
- Require more urine than other tests for the sample to be valid (60 ml)
Special Tests

Special Testing

Commander must complete a memorandum to request a test for specific drugs that are not listed on the Drug Demand Reduction Program (DDRP) drug panel

- Memorandum must indicate the specific drug to test and must not list the Soldier’s name
- Contact ASAP representative or the Base Area Code Manager (BACM), if deployed for assistance with this testing request

Special Tests cont.

- Special tests will be sent to the Armed Forces Medical Examiner System (AFMES) or Fort Meade, MD.
- Testing for other drugs such as mushrooms (psilocybin) or prescription drugs not normally tested at the FTDTL
- Commander must complete a memorandum requesting that a specimen be tested for mushrooms, and description situation that lead to the request for a special test.
- Contact ASAP Representative, or the BACM if deployed, for assistance with special testing requests
- Commander must have probable cause

Retesting at Unit

Retesting by the Commander at the next practical opportunity is required when:

- The laboratory rejects a specimen without testing it for critical errors in the specimen or accompanying Label Correction Memo (LCM), the Soldier must be retested
- The laboratory determined it to be untestable due to adulteration, the commander will retest the Soldier as soon as practical

For retests, follow your Unit SOP and conduct the test as soon as practical
Retesting Specimens at Lab

After receiving a positive test result, the following may request a retest at any DoD Forensic Toxicology Drug Testing Laboratory (FTDTL):

- Soldier, but only thru commander or attorney
- Soldier’s legal representative
- Submitting unit commander
- Military judge
- Medical Review Office (MRO)
- Attorney representing the submitting

IAW AR 600-85, Chapter 4-19

Check on Learning

Q: What are the test basis codes that are considered Inspection Codes?

A:
### Limited Use Policy

#### Purpose of the Limited Use Policy

Encourage Soldiers to voluntarily seek the ASAP Program for help with their alcohol or drug problem

- Prohibits the use of protected evidence against a Soldier in UCMJ actions
- Prohibits the use of protected evidence to determine characterization of service in administrative proceedings
- Limits the characterization of discharge to “Honorable” if protected evidence is used

#### Protected Evidence

- Certain information “off limits” in legal proceedings, so Soldier can get help without jeopardizing career

- Examples of Protected Evidence:
  - Soldier voluntarily admits drug use prior to notification of an upcoming drug test
  - Information collected during emergency medical care of a Soldier for an overdose
Limited Use Policy

Exceptions

Situations in which the Limited Use Policy does not apply and evidence can be used against a Soldier:

- Soldier admits to drug use after notification that a drug test is scheduled
- Apprehension by law enforcement before receiving medical care

More Limited Use Policy exceptions

- A positive rehabilitation test (RO test basis) result on a Soldier who is enrolled in SUDCC for substance abuse
- Information regarding continued substance abuse occurring after a Soldier voluntarily admits drug use
- Positive drug test results from a regular Unit urinalysis (e.g., test basis of IR, IU, or IO) on a Soldier who is enrolled in SUDCC or other approved rehabilitation program

If a SM meets any of the exceptions listed, the Limited Use Policy is revoked, consult your SJA

Separation Policy

- Commanders are mandated to initiate separation on all identified drug misusers, unless the misuser voluntarily admits drug use directly or through Command channels prior to notification of testing
- Soldiers who come forward voluntarily may still be discharged, but the Limited Use Policy mandates an Honorable Discharge
- You are not a legal expert. Consult with the SJA to determine if the Limited Use Policy applies
Check on Learning

Q: What is the purpose of the Limited Use Policy?

A:

Preparation to Conduct Drug Testing
Introduction—Testing Station Setup

In this lesson, we’ll discuss these topics:
• Testing day set-up procedures
• Individual roles and responsibilities of personnel involved during testing
• The materials and documentation needed for testing

Learning Objectives

• Select required components for the holding area so the testing area is compliant with testing procedures
• Utilizing the UPL resources, learn to correctly identify the steps required for preparing the latrine for collection so that the latrine is in total compliance with testing procedures
• Learn the individual roles and responsibilities of personnel involved in the testing processes

Learning Objectives cont.

• Identify material and logistical requirements for the testing station with 100 percent accuracy
• Identify all documents and publications required to be on hand at the testing station in accordance with Army guidelines
Required Accessible Reference Materials

- AR 600-85
- Installation (Command) / Unit SOPs
- UPL Appointment Orders
- Unit Alpha Roster or AAA 162

Required Briefings
- Observer Briefing
- Commander’s Briefing
- UPL Unit Briefing

Individual Roles and Responsibilities

- Unit Commander
- Unit Prevention Leader
- Observer (also secondary reviewer)
- Holding area NCO / Officer

Unit Commander’s Responsibilities

- Maintain overall responsibility for the testing procedure
- Deliver Commander briefing, or delegate to the UPL
- Be accessible when testing is in progress
- Ensure UPL certification is current
- Select Observers, or delegate to the UPL
- Select the holding area NCO/Officer, or delegate selection to the UPL
**Preparation To Conduct Drug Testing**

**UPL Responsibilities**
- Conduct the collection and address any questions
- Deliver the verbal observer briefing and demonstration, UPL Unit briefing, and may also conduct the Commander briefing
- Ensures the observers sign the observer briefing
- Serve as the Commander’s liaison for urinalysis testing and substance abuse prevention
- Ensure that the standing operating procedures for urinalysis testing are in place and are followed

**Preparation To Conduct Drug Testing**

**UPL Responsibilities cont.**
- Utilize DTP software as the primary method for randomly selecting Soldiers for drug testing
- Set up the testing station and holding area
- Conduct latrine inspection
- Ensure that all UPL documentation is completed IAW AR 600-85 and DoDI 1010.16
- Ensure that urinalysis testing supplies are available and handled appropriately

**Preparation To Conduct Drug Testing**

**Observer Responsibilities**
- Sign the Memorandum for Observers
- Ensure that all Soldiers follow the proper physical collection procedures
- Directly observe urine leaving each Soldier’s body and entering the specimen bottle or collection cup
- Maintain a continuous line of sight with the specimen bottle (and collection cup, if used) at all times
- Report any unusual circumstances to the UPL upon returning to the UPL station
**Preparation To Conduct Drug Testing**

**Holding Area NCO / Officer Responsibilities**

- Ensure that only personnel who are being tested are present
- Cannot leave the holding area until the last Soldier is tested
- Ensure all Soldiers remain in the holding area until they provide a valid urine sample
- Encourage Soldiers to drink fluids and view substance abuse prevention materials
- Soldiers, who are unable to provide a specimen, should drink eight ounces of fluids every half hour, not to exceed 40 ounces
- Provide briefings if Soldiers arrive after testing begins

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**Preparation To Conduct Drug Testing**

**UPL Testing Station**

- The testing station is the "control center" for the urinalysis test. Soldiers report to the testing station to:
  - Check in
  - Assign Observer to Donor
  - Provide a urine sample
  - Check out

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**Preparation To Conduct Drug Testing**

**UPL Testing Station best practices:**

- Locate the testing station as close as possible to the latrine
- Ensure there is enough space to work
- Position the testing station so that it is separate from the holding area, if possible
- Arrange the area so that your back is to a wall
**Preparation To Conduct Drug Testing**

**Holding Area**
- Soldiers selected for testing report to the holding area
- Post a sign in the holding area to inform people that there is a urinalysis test in progress. Do not post the sign until after the Soldiers have been notified
- Make sure there is enough seating for all participants to avoid overcrowding
- Water must be available for the testing participants
- Trash can

**Selecting the Latrines**
- Select latrines that are as close as possible to the testing station and holding area
- Latrine inspection process is the same regardless of the type of latrine
- Types of latrines include portable toilets, trailer toilets, and commode

**How to perform a latrine inspection**
1. Select a latrine and post a sign on the door to indicate the latrine is closed to the public
2. Remove cleaning supplies, check the area thoroughly – including the sink, floor, and around the toilet to ensure there are no potential adulterants
How to perform a latrine inspection cont.

3. Check for soap and paper towels
   provide hand sanitizer if it is available

4. Inspect the commode and/or urinal to
   ensure they are in working order

Supplies for the Testing Station

- Rubber gloves
- Paper towels
- Disinfectant
- Ruler (optional)
- Ball Point Pen(s)
  (Preferably Blue)
- Black marker

Supplies for the Testing Station

- Urine specimen bottles
- Urine wide-mouth collection cup
- Tamper-evident tape
- Avery Labels 5163 or 5523
- Single Specimen Biohazard Bag(s)
- Absorbent Pads
Urinalysis Testing Documents

In the following slides, we will discuss several forms that you must have to conduct testing.

We will also discuss preparing most tests and print forms with Drug Testing Program (DTP) software.

Urinalysis Documents

DD Form 2624 Specimen Custody Document

- 1 of 3 required testing documents
- 2-sided (front and back)

DD Form 2624 (front)

- The front lists DoD ID of Soldiers selected to test and information about the test
- UPL or DTC retains original
Urinalysis Documents

DD Form 2624 Chain of Custody (back)

- Keep constant record of specimen chain of custody
- Make entries every time you release or accept possession of urine specimens
- UPL or DTC retains original

Urinalysis Documents

Testing Register (Unit Urinalysis Ledger)

- 2 of 3 required documents
- Lists all Soldiers for testing and their assigned Observers
- Only document that links Soldier names and DoD ID
- UPL or DTC retains original and annotates with testing results
Urinalysis Documents

Bottle Labels
- 3 of 3 required documents
- Attached to specimen bottles
- Records Soldier and UPL identifying information

Lesson Summary
- Carefully inspect the latrines prior to testing to remove anything that could be used to contaminate specimens
- Become familiar with all the supplies and documents that you need for testing
- There are several personnel involved with testing, each with specific duties that you must know
- The UPL must ensure all standing operating procedures for testing are followed
**Lesson Summary**

- The Commander may delegate some duties to the UPL.
- The holding area NCO/Officer must limit personnel in the holding area to only those who are participating in testing.
- Carefully determine how to place and set up the testing station.
- Successful urinalysis testing starts and ends with the UPL.

**Check on Learning**

Q: Who is responsible for training Observers on their duties?

A:
Introduction
In this lesson, we’ll discuss:

- The steps and considerations for alerting Soldiers to report for testing
- The personnel briefings and their order to deliver prior to testing
- Tasks that a Commander may delegate to the UPL

Learning Objectives

- Identify approved methods and timing guidelines for alerting personnel about urinalysis testing
- Identify all required briefings to occur prior to specimen collection
Learning Objectives - cont.

• Correctly identify functions that may be delegated to the UPL by the commander

• Correctly select appropriate responses for participation avoidance and appropriate corrective actions to deal with non-compliance

Required Urinalysis Briefings

• Observer Briefing
• Commander’s Briefing
• UPL Unit Briefing

Testing Notification

• Do not give any indication that Soldiers are reporting for urinalysis testing

• Notify Soldiers no more than two hours beforehand to report for a urinalysis test

• Give Soldiers who have to travel from remote locations as little advance notice as possible, but no more than 6 hours

• Ideally, notify and have Soldiers report immediately before the test
• An example of **correct** notification is to notify Soldiers during morning PT to report immediately to the gym

• An example of **incorrect** notification is to notify Soldiers during morning PT, but have them report at 1500 hours and/or to tell them they are reporting for a drug test

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**Observers briefing**

• UPL must brief Observers before each test

• Verbal briefing and demonstration for every collection (including secondary review of specimens)

• Read and sign Memorandum for Observers

• Usually first in the briefing sequence

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**Responsibilities of the Observers**

• E5 and above, same gender as the Soldier and not enrolled in ASAP

• Read and sign the Memorandum for Observers

• For each Soldier, directly observe urine leaving the body and entering the specimen bottle or collection cup

• Maintain visual contact with the specimen bottle at all times

• DO NOT touch the bottle nor hold the bottle cap at any time during soldier’s specimen collection steps
Responsibilities of the Observers

- Notify the UPL of any unusual circumstances upon returning to the UPL testing station
- Ensure Soldiers wash hands with only water before providing a specimen; soap and water after collection
- Conduct secondary review of specimen bottles per UPL's instruction to ensure bottle cap is tight
- Observe that each bottle is properly labeled, sealed and placed in collection box
- Fulfill duties with maturity and integrity

If Observers do not maintain a line of sight with the samples or acknowledge that urination process was directly observed and no adulteration was suspected, they can face disciplinary action under these UCMJ articles:

- Article 92
- Article 107
- Article 134

Article 92
Knowingly failing to obey a lawful general order of regulation by not maintaining direct line of sight of the urine into the bottle

Article 107
Making a false official statement by signing the Testing Register acknowledging the urination process was directly observed and no tampering occurred

Article 134
False swearing by authenticating that no substitution or tampering of the urine sample occurred
Briefings

Commanders Briefing

- Informs Soldiers about the purpose of the test and which drugs the test will detect
- Constitutes a legal order to participate
- Commander should give the briefing, but may delegate
- Deliver before testing begins, usually second in the briefing sequence, before the UPL Unit Briefing
- Commander or designated representative must brief any Soldiers who miss the original Commander Briefing

Commanders Briefing cont.

- Legal order for Soldiers to participate in the test
- Reason that the Soldiers were selected
- The FTDTL screens for several substances, the list of which may change based on trends within the military population
- Testing procedures comply with AR 600-85
- The Commanders brief is specifically made for IR or IO tests. If the test being given is under different testing codes, the Commander or his/her delegated briefer should adjust briefing to ensure Soldiers are made aware of testing code used

If a Soldier does not provide a urine sample, or if he/she submits a sample that is found to be adulterated, the Soldier may face disciplinary action under the following UCMJ articles:

- Article 92- Knowingly failing to obey a lawful general order of regulation by not maintaining direct line of sight of the urine into the bottle
- Article 107- Making a false official statement by signing the Testing Register acknowledging the urination process was directly observed and no tampering occurred
**Briefings**

**UPL Unit Brief**
- Outlines the procedures for the test
- Summarizes main responsibilities and tasks for Soldiers
- Usually takes place last in the briefing sequence
- Instructs Soldier to verify that DoD ID is accurate on urinalysis testing forms
- Provide a minimum of 30 milliliters of urine, however 45 millimeters is preferred.
- No valid excuse for not participating

**Soldier's Participation in Testing**

Some Soldiers may have concerns about participating
- NO valid excuse for not participating
- Remind Soldiers about possible UCMJ action
- Testing procedures do not violate the Soldiers 4th or 5th amendment rights

**Delegated Tasks**

Commanders can delegate any of the following tasks to the UPL:
- Selecting Observers
- Conducting the Commander Briefing
- Selecting Soldiers to be tested
- Selecting the holding area NCO/Officer
Lesson Summary - Briefings

- Notify selected Soldiers immediately before a test. They will have 2 hours but no more than 6 hours to report.

- There are three briefings that must occur prior to the start of testing: Observers, Commander, and UPL Unit Briefs.

- The Observers briefing explains the critical role for Observers in testing.

- The Commander briefing serves as a legal order for Soldiers to participate in the urinalysis test.

- The UPL Unit briefing explains the tasks that Soldiers must perform.

- During briefings, emphasize to Soldiers and Observers that tampering with samples has legal ramifications.

- There is no valid excuse for selected Soldiers to avoid providing a urine sample.

- The Commander may delegate several tasks to the UPL.

Check on Learning

Q: What are the three required briefings that must occur prior to collection?

A:
In this lesson, we’ll discuss:

- The purpose and benefits of DTP software
- How to use DTP Lite and Web software
Learning Objectives

- Learn process for using DTP Lite software to successfully down DTP Lite software, import rosters, and generate all required drug testing forms
- Accurately review all drug testing paperwork to ensure testing information is accurate and appropriate testing codes, Base Area Codes (BAC), and UICs are correct

Overview of DTP Software

- Two versions:
  - DTP Lite 6.0.8.2
  - DTP Web Version (FTDTL/WebDTP- for ARNG, only DTCs are authorized access)
- Preferred method over manual random selection

Purpose and Benefits

- Reduces errors
- Speeds processing time
- Speeds overall collection time
- Standardizes the selection process, which validates randomization
- Allows the UPL to generate a test selection when the Commander delegates the task
- DTP Software is only authorized on government computers
Base Area Code (BAC)

- The Base Area Code is a unique code for reporting results
- Your BAC is __________
- Contact BAC Manager to verify BAC, if deployed

Unit Identification Code (UIC) is a six character, alphanumeric that uniquely identifies each Active, Reserve and National Guard unit of the Armed Forces. Army UIC will start with a W-----

- Make sure that you have entered the correct code within the DTP software

There are seven basic steps for using DTP Lite:

1. Start the DTP Lite
2. Choose the roster file
3. Format the roster file
4. Choose testing parameters and date
5. Select members for testing (tests other than IR and IU)
6. Complete the Print Products screen
7. Preview and print documentation
Click on "C" drive

Click on user

Click on location of roster, then select roster
Select next

The roster will appear.
Note: "Ignore Header" is already checked

Click Next

Use drop down menu to select location code
Note: Test premise, Selection method and percentage is pre-populated
United States is the first one in the drop down after selection, hit "next"

Fill in blocks 1, 2, collection date and select required forms. The select "save"

Document is now saved
Now you can click on each document and print...
Test Basis Code

• Assign the correct test basis code every time.
• Use the proper testing code based on the Commanders intent.
• Make sure that your testing code matches the type of test you are conducting & appears correctly on all forms.

The testing date on the forms must be the date you conduct the test. Be sure the testing date is correct on all forms!

Lesson Summary- DTP Software

• DTP software is the preferred method for random selection.
• Ensure that you enter all information completely and correctly at each step.
• Printing separate sets of documents for males and females may help testing operations go more smoothly.
• It is recommended you print the front and back of DD Form 2624 on one sheet of paper.
• You must print all three of the required documents: DD Form 2624, Testing Register, and bottle labels.
Check on Learning

Q: Is a testing date required when generating a test on DTP Software?
A:

Collection
Check-in the Soldier

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Introduction
This is the start of the Collection phase of drug testing
In this lesson, we’ll discuss:
• Biosafety basics
• How to keep urinalysis documents organized
• Verifying testing codes and dates
• Editing documents
• Handwritten Label standards
• Potential scenarios
• The check-in process when a Soldier arrives for testing

Learning Objectives
• Understand the required check-in tasks
• Learn forensically correct written numbers for testing documents
• Learn how to accurately review testing documentation for accuracy and how to properly note discrepancies
• Distinguish correct annotations from incorrect annotations

Biosafety Basics
• Cover the testing table surface with absorbent sheets or paper towels before starting to test Soldiers
• Put on rubber gloves (and you should replace them every two hours or when needed)
• Observer needs to wear glove on one hand in use to conduct the second review of specimen
Biosafety Basics cont.

- Avoid touching face, ears, mouth or nose with hands or other objects when wearing gloves
- Avoid wearing rings other than a plain band
- Wash your hands after you remove your gloves
- Do not eat, drink, smoke, or apply cosmetics or contact lenses in the work area
- Store all food and drinks outside the restricted area

To begin the test for each Soldier, the UPL must perform all check-in steps precisely as defined in AR 600-85

- Skipping any steps or performing them in the wrong order can invalidate the test

Verifying Documents

- You will need to check, and occasionally edit, information on all urinalysis testing forms
- Organizing and checking your documents as you go, and editing them in accordance with forensic standards, will help you keep errors to a minimum
- You may create separate sets of documents for males and females
Editing Documents

Editing documents according to Army guidelines and forensic standards reduces the risk that the testing lab will reject specimens.

Guidelines for editing forms

- When editing pre-printed forms, draw a single line to cross out errors instead of drawing X's or scribbling.
- Enter the correct information beside the crossed-out error.
- Initial and date your corrections.
- Write numbers according to forensic standards.

Writing numbers

- The UPL must follow forensic standards when making handwritten edits to urinalysis testing forms.
- Incorrect edits may render the test invalid during board proceedings or if challenged by SJA.
Forensic Writing Standards

- When writing a "0" (zero), avoid drawing a slash through it.
- When writing a "1" (one), avoid drawing a "1" that has a "hat".
- When writing a "4" (four), avoid drawing a "4" that is closed.
- When writing a "7" (seven), avoid drawing a slash through the lower segment.
- When writing an "8" (eight), avoid drawing two circles on top of each other. Draw the "8" in one continuous motion.

When writing numbers, use a single stroke. Do not over-write information, and do not use whiteout or pencil.

Editing DD Form 2624

- Use a ballpoint pen when making edits—preferably one with blue ink.
- Forms may be handwritten on blank pre-printed testing documents, but printing with DTP software is preferred.
- We'll talk about editing pre-printed forms first.

Making edits to urinalysis testing documents is one area where UPLs may be inefficient. Correctly making edits is critical to the integrity of the drug testing process.
Check-In the Soldier

**Editing the Unit Identification Code (UIC), BAC, or Date:**

- Draw a line through the incorrect information
- Enter the correct information
- Initial and date the correction
- Complete Label Correction Memo to reflect changes if needed

*NOTE:* The LCM only goes to the FTDL with the specimens if the corrections are for the label.

Check-In the Soldier

**Editing the DoD ID Number:**

- Line through the incorrect information
- Rewrite the DoD ID in the same field on the DD Form 2624, and then initial and date by the incorrect information

Check-In the Soldier

**Editing test basis codes**

Line through the incorrect information
- Enter the correct information
- Initial and date the correction
- Repeat for all lines
Check-In the Soldier

Editing the Testing Register

- Line through the incorrect DoD ID
- Enter the correct DoD ID
- Initial and date near the correction

Check-In the Soldier

Editing bottle labels

- 2D barcode bottle labels are generated by DTP software and have a different editing process
- A common edit that may be required on a bar-coded bottle label is correcting the DoD ID
- Two options for correcting a bottle label

Check-In the Soldier

Editing bottle labels: Option 1 (preferred)

- Line through the incorrect DoD ID
- Enter the correct DoD ID
- Initial and date near the correction
Check-In the Soldier

Editing bottle labels: Option 2
(only use this option if correction cannot be made on bottle label)

- Complete a Label Correction Memo while Soldier is present
- Have Soldier verify the corrected DoD ID on the LCM is correct
- Annotate on the testing register that an LCM was completed
- NOTE: This step can be done in the check-out process as well

Check-In the Soldier

Handwritten Forms

- Only as a last minute option (not preferred)
- The handwritten DD Form 2624 is never submitted to the FTDTL with the specimens
- Make sure the information is correct on the DD Form 2624, Testing Register and bottle label

On the next few slides we will discuss handwritten dates, valid / invalid bottle label standards, and handwritten documents

Handwritten Label Date Format

If a handwritten date is used, the ONLY authorized format is

YYYYMMDD

- Must be no more than nine months prior to the received date by the FTDTL
- If the date is more than nine months prior to the received date it will be considered invalid and the collection date will default to the date the FTDTL receives the specimen
- Incorrect written format of the date will result in the collection date to default to the date the FTDTL receives the specimen
- See policy for further details
**Check-In the Soldier**

**Potential Scenarios**

The following scenarios can occur during the Check-In process.

1. Soldier arrives without his/her ID
2. Soldier does not arrive for testing

Let’s talk through the steps a UPL will take during these scenarios.
**Check-In the Soldier**

**Soldier Arrives without his / her ID:**

1. Verify the Soldier’s identity based on the Unit/Installation SOP:
   - Request that the First Sergeant or Commander verify the Soldier’s identity and that the DoDID/EDIPI matches the Alpha Roster
   - Check the Soldier’s picture ID (such as a driver’s license)

2. After verifying the Soldier’s identity, use the DoDID/EDIPI listed on the Unit Alpha Roster (AAA-162) with the verified Soldier’s name to complete urinalysis documents.

3. Continue with the Check-In process, starting with checking the verified Soldier’s DoD ID/EDIPI against the DD Form 2624, Testing Register and Bottle Label.

4. Finally, annotate in the “Remarks” section of the Testing Register that the Soldier had no ID card and indicate how the ID was verified. You may also complete a Memorandum for Record that is attached to the Testing Register.

**Check-In the Soldier**

**Soldier Does Not Arrive for Testing**

When a Soldier does not show up for testing, you need to:

1. Annotate the Testing Register:
   - Cross out the Soldier’s row with a single line
   - Write “No Specimen” with the date in the Comments box

2. Annotate the DD Form 2624
   - Cross out the Soldier’s row with a single line
   - Write “No Specimen” in the Results box and date and initial it
Check-In the Soldier

Checking in the Soldier

1. Soldier provides ID card to UPL; UPL verifies Soldier's identity; UPL determines specimen number against the collection documentation

2. Soldier removes excess outer garment (if not removed)

Check-In the Soldier cont.

3. UPL removes new bottle from the specimen box and places ID card in the appropriate slot that matches Soldier's specimen number

4. In full view of Observer, UPL hands the unlabeled specimen bottle (and offers the optional wide-mouth cup) to the Soldier, in full view of the observer
Q: What is considered an invalid handwritten label?
A:

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Q: Why would separate sets of documents be helpful?
A:
Introduction
In this lesson, we’ll discuss:
• The urine collection process as it applies to both male and female Soldiers
• The types of latrines authorized for use during a urinalysis
• The methods that Soldiers use to adulterate their specimens when attempting to avoid detection of drug use
• The substances that commonly are used for adulteration
Collection Procedure

Learning Objectives

• Identify the procedures for obtaining a sample by correctly selecting factors regarding order of steps
• Identify appropriate latrines to utilize during the collection process
• Identify adulteration methods that affect male and female collection

5. The UPL instructs the Soldier and Observer to move to the latrine, keeping the bottles in full view of the Observer.

6. Upon entering the latrine, the Observer always instructs the Soldier to wash hands with water only (The Soldier must not use soap to wash hands prior to collection).
7. The Soldier stands at a urinal or commode, uncaps the specimen bottle or wide-mouth cup and places the cap face up on a clean surface or holds the cap in hand without touching the inner surface of the cap.

Note: The Soldier stands at a urinal or commode, uncaps the specimen bottle or wide-mouth cup and places the cap face up on a clean surface or holds the cap in hand without touching the inner surface of the cap.

8. The observer must see the urine directly leaving the Soldier’s body and entering the specimen bottle or wide-mouth collection cup.

The Observer for male collection needs to stand at 45-degree angle in front of the Soldier to observe the collection.

The Observer for female collection may need to bend down in front of the Soldier to observe the collection.

9. If the Soldier uses a wide-mouth cup, the Soldier pours the urine into the specimen bottle in full view of the observer (minimum 30mils, 45mils preferred) over the commode.
10. The Soldier will place the cap back on the specimen bottle in full view of the observer; ensure the specimen bottle is dry and discards the wide mouth cup (if used)

11. Soldier will wash (with soap) and dry hands, keeping the bottle in full view of the observer

12. Soldier will walk in front of the observer back to the UPL's desk, keeping the specimen bottle in full view of the observer

The Observer must maintain line of sight with the specimen bottle and cap at all times throughout the collection process. The observer must not touch the bottle or cap at any time while in the latrine.
Collection Procedure

Types of Latrines

Port-a-Potty (portable toilet):

- Typically found in an outpost environment
- Door should remain open to observe collection
- The Port-a-Potty should be facing away from populated areas, if possible

Commode:

- Typically found at an installation
- Stall door should remain open to properly observe during collection

Adulteration

- Observers play a critical role in ensuring the integrity of every urine sample
- Some Soldiers attempt to defeat drug tests by using a device that is intended to fool the Observer
- Some images in this section are explicit
**Male Whizzinator**

- Male Soldiers wear a prosthetic penis attached to a reservoir, and appear to provide a "clean" urine sample
- The male Whizzinator kit consists of:
  - Syringe
  - Heater packs
  - Prosthetic penis
  - Instruction manual

**Female Whizzinator**

- The version for females dispenses urine through a rubber tube
- The "Number One" Whizzinator kit consists of:
  - Syringe
  - Heater packs
  - Pouch with a connected rubber tube
  - Instruction manual

**Adulterants**

- Adulterants are substances used to alter biochemistry in a way that deters detection of drug usage
- Adulterants can be taken *internally* prior to testing or *externally* during collection
Collection Procedure

Internal Adulterants

• Soldiers may try to flush their system ahead of a test – referred to as “adulteration by dilution”
• Other common internal adulterants include:
  – Golden Seal
  – Urine Aid
  – Vinegar
  – Detoxify Brand Products

Collection Procedure

Ways to minimize opportunities for internal adulteration

• Implement random testing and good Smart Testing techniques to minimize impacts to testing from adulteration
• Giving Soldiers little advance notice of a test reduces the chance of successful internal adulteration

Collection Procedure

External Adulterants

• External adulterants are added to or substituted for a Soldier’s urine
• Examples include:
  – Water
  – Baking soda
  – Soap
  – Perfume
  – Cleaning solvents
  – Synthetic Urine
Collection Procedure

Ways to minimize opportunities for external adulteration

• Properly-performed direct observation during collection helps reduce attempts to use external adulterants
• Observers need to maintain direct line of sight with the specimen at all times so that they can detect if a Soldier attempts to add an external adulterant

Observers must notify the UPL immediately upon returning to the testing station of any suspected adulteration

Unusual Circumstances

• Shy bladder, mental block or stalling
• Insufficient specimen
• Unusual urine color or foreign objects in sample
• Attempted tampering or bribery
• Menstruation, pregnancy, undergarments, or piercings
• Bowel movement
Collection Procedure

Observer must not allow any Soldier to provide a sample out of their direct view (behind a closed door) for any reason.

Observer may allow the Soldier to have privacy:

- Only after the Soldier has provided a sample, and
- Only if both the Observer and Soldier can maintain line of sight with the filled specimen bottle at all times.

Lesson Summary

- Urine collections can occur in several types of latrines.
- Specimens can be contaminated by using internal and/or external adulterants.
- Make sure the donors wash their hands with only water prior to providing a specimen and soap and water after providing the specimen.
Lesson Summary

• The Observer should never touch the specimen bottle or its cap while in the latrine.

• Observers must maintain line of sight with the specimen bottle at all times and must see urine physically leaving the body and entering the specimen bottle.

• All Soldiers have the option of using a wide mouth collection cup in addition to the required specimen bottle. Specific procedures must be followed if using the optional wide mouth cup.

Check on Learning

Q: What challenges might Observers face while observing a collection using these different types of latrines?

A:
Check-out Process

Introduction
In this lesson, we’ll discuss:
• Check-out procedures following urine collection
• How to report suspected adulteration
• The required minimum specimen amount
• How to annotate testing forms

Learning Objectives
• Learn to identify the steps necessary to checkout Soldiers from the urinalysis by correctly distinguishing a proper checkout sequence
• Learn to identify the appropriate amount of sample required for urinalysis testing
• Learn to identify the appropriate strategy for dealing with adulterated samples utilizing appropriate action from a list of possible alternatives
• Learn to identify the correct method of applying Tamper Evident Tape (TET) to specimen bottles
The following steps must occur in the correct order when a Soldier returns from the latrine after providing a sample:

13. The Soldier hands the specimen to the UPL or places the bottle on the UPL collection table, as directed by the UPL.

Chain of Custody begins when the UPL receives the specimen from the Soldier.

14. UPL verifies:
   • The cap is tight
   • The bottle is dry
   • Looks for signs of adulteration
   • Ensures specimen bottle has a minimum of 30mls (45mls preferred)

Then places the back on the collection table.

Secondary review

15. While UPL is holding the specimen bottle on the table, the observer will ensure the specimen bottle cap is tight, in full view of the UPL & Soldier.

UPL ensures secondary review is noted on the testing register.
Check-Out Process

16. UPL removes Soldier’s ID card from specimen box; UPL reviews the back of the ID card to verify the Soldier’s the DoD ID Number the number listed on the:

- DD Form 2624
- Testing Register
- Bottle Label

17. UPL allows the Soldier to view the back of their ID card to verify their DoD ID matches number listed on the testing register, DD Form 2624, and Bottle Label (UPL maintains custody of ID card)

Check-Out Process

18. Soldier initials the bottle label (This indicates that they verified all information is correct)

**NOTE:** Must be the way the Soldier would initial a legal document. Do not make the Donor write initials in sharp block letters, unless that is the way they would normally write their initials. If the initials spell a name or word. For example, if the Soldier’s name is Carl Allen Taggard then and he using his middle name when initialing documents, his initials are “CAT.” Since “CAT” is a word, complete a Label Correction Memo to explain that these are initials and not a name.

Check-Out Process

19. The UPL places the label on the specimen bottle
20. The UPL places tamper evident tape across the top of the specimen bottle (making sure the tape is straight and touches the label on both sides of the bottle)

21. The UPL initials the appropriate space on the bottle label

22. The UPL places the specimen bottle in the appropriate slot in the collection box
23. The UPL instructs the Observer to print name and signature on the Testing Register

24. The UPL instructs the Soldier to sign the Testing Register

25. The UPL returns the ID Card to the Soldier

The Soldier can now return to duty

• Initials and signatures are very important and must be complete

• The Donors initials on the bottle label verify that their information is correct on the:
  • DD Form 2624
  • Testing Register
  • Bottle label
Check-Out Process

The UPL’s initials on the bottle label verify that the UPL:

- Received specimen directly from Soldier who produced it
- Checked the specimen for adulteration and sufficient volume
- Verified the cap is secure
- Applied TET

Check-Out Process

The Observer’s signature on the Testing Register verifies that the Observer:

- Followed the correct collection procedure by directly observing the Soldier produce the sample
- Maintained line of sight with the specimen bottle throughout the entire process

Check-Out Process

The Soldier’s signature on the Testing Register verifies that the Soldier:

- Provided the urine in the specimen bottle
- Observed the UPL apply TET and place the bottle in the collection box
Potential Scenarios

In this lesson, we will discuss how to address the following potential scenarios:

- Reporting suspected adulteration
- Insufficient volume
- TET breakage

Reporting Adulteration: UPL Suspects

If the UPL suspects a specimen is adulterated, he/she must take steps in the following order:

1. Finish processing the specimen through the signature portion of the collection process
2. Instruct the Soldier and Observer to stand fast
3. Send someone to notify the Commander
4. The Commander verifies the evidence of possible adulteration and, if possible, consults the legal advisor (The Commander will not touch the specimen bottle)

5. The Commander appoints a new Observer, and may pursue retesting the Soldier based on recommendations from SJA
6. The Soldier must provide a valid specimen if ordered; however, the second specimen obtained should be under Probable Cause (PO) test basis
7. The UPL processes the second specimen. UPL sends both samples to the FTDTL. Second specimen can be written in on same paperwork if space is available
8. The UPL annotates the Testing Register with the circumstances and resolution
If an Observer suspects a specimen has been adulterated, the following steps must occur in order:

1. The Observer alerts the UPL upon returning to the UPL testing station
2. The UPL finishes processing the specimen, then advises the Soldier and Observer to stand fast
3. The UPL sends someone to notify the Commander
4. The Commander verifies the evidence of possible adulteration and if possible, consults with the legal advisor

Soldiers who adulterate their specimen or who assist any Soldier in doing so are subject to the full range of statutory and regulatory sanctions, both criminal (UCMJ) and administrative.
Insufficient Specimen Volume

In order to comply with AR 600-85, specimen bottles must contain at least 30ml of urine to be valid, but no more than 75ml.

Please note: Volume for steroid testing is at least 60 ml.

When a UPL receives a specimen that is short of 30ml:

1. UPL instructs the Soldier to return to the latrine with the Observer and dump the specimen.
2. Observer ensures that the Soldier rinses the specimen bottle with tap water and ensures the Soldier crushes the bottle and returns the bottle to the UPL.

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Insufficient Specimen Volume cont.

3. UPL sends the Soldier back to the holding area with instructions to drink 8 ounces of water every half hour, not to exceed 40 ounces in 3 hours.

4. UPL annotates the testing register that the first attempt was short.

5. UPL starts the collection process from the beginning with a new specimen bottle.

6. UPL uses the original DD Form 2624 entries when the Soldier provides an adequate sample.

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To annotate documents for inadequate specimen volume:

1. Write in the Remarks section of the testing register: “1st attempt – short sample; 2nd attempt – sufficient volume.”

2. Use original entries on the testing register and DD Form 2624. Do not make any additional annotations.
Check-Out Process

Correction of Broken TET

If the break occurs at the Military Collection site:

- UPL annotates information on the Unit Ledger
- UPL applies a 2nd piece of TET with the Soldier and/or Observer witnessing the process
- UPL completes a Label Correction Memo (LCM)
- Observer or 2nd UPL validates the correction by signing the LCM (donor will not sign the LCM) and UPL will maintain a copy of the LCM with original DD Form 2624 at the unit level.

Check-Out Process

Correction of Broken TET

If the break occurs during the Turn-in Procedures

- DTC applies a 2nd piece of TET
- DTC generates a LCM and the UPL signs as the witness, if available.
- DTC sends the original LCM with the specimens to the FTDTL
- DTC maintains a copy of the LCM with the original DD Form 2624

Check-Out Process

Correction of Broken TET Standards

- Place the second piece of TET slightly offset from the original TET across the bottle cap; the tape will be one continuous piece that touches the label on both ends without obscuring any information, running across the top of the bottle.

<table>
<thead>
<tr>
<th>Broken Seal</th>
<th>Incorrect Method</th>
<th>Correct Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specimen will not be tested</td>
<td>Specimen may be tested if LCM is complete</td>
<td>Specimen will be tested if LCM is complete</td>
</tr>
</tbody>
</table>
Check-Out Process

Broken TET

Should not receive a broken seal discrepancy code

WHEN IN DOUBT: Complete a LCM and apply a second piece of TET

Check-Out Process

Letter of the Law

• According to AR 600-85, Commanders must retest Soldiers if the Forensic Toxicology Drug Testing Laboratory (FTDTL) declares a fatal discrepancy
• The testing lab may declare a fatal discrepancy is corrections are not forensically corrected, suspected adulteration, or other reasons outlines in the DoDI 1010.16

Lesson Summary- Check Out

• Follow all the check-in steps in the correct order as defined in AR 600-85 for every Soldier
• Remember how to handle check-in for a Soldier who does not have a military CAC
• You should change your gloves every 2 hours during urinalysis collection
• Make sure that you apply the TET correctly and initial the bottle label during check-out
• Be sure that both the Soldier and the Observer sign the Testing Register and that you initial the bottle label at check-out
Lesson Summary- Check Out

- Carefully check each specimen bottle containing urine that you receive from a Soldier to determine whether the bottle contains the minimum amount of urine and whether there is any evidence of adulteration
- Make sure that you correctly annotate on the Testing Register when the Soldier hands you an insufficient specimen
- Follow the proper procedures if you or the Observer suspect that a sample is adulterated
- Follow proper procedure for correcting collection documents

Check on Learning

Q: What does the Soldiers initial on the bottle label signify?
A:
Introduction
This is the beginning of the Post Collection phase of drug testing
• In this lesson, we’ll discuss:
  • The documents and other items to verify in a quality control inspection
  • How to break down and disinfect the testing station
  • How to restore the testing area and return supplies
Learning Objectives

• Learn to correctly identify critical sections to review with 100 percent accuracy on the drug testing paperwork and specimens
• Learn to correctly order the chain of custody required to maintain integrity of the specimen bottles and documentation with 100 percent accuracy
• Learn to correctly identify the ramifications of incorrectly examining specimen bottles, associated documentation, and identifying a possible outcome

Learning Objectives cont.

• Identify the sequence of steps and documentation during the post collection process
• Identify the appropriate agents for disinfection by selecting at least three correct agents from the display group of agents

Verifying Documents

• Deployed UPLs, USAR, and direct-ship States for ARNG, are responsible for conducting a quality control inspection before shipping specimens for testing
• In garrison or centralized ship States for ARNG, you hand carry or mail specimens to the local ASAP office
• You may be required to assist in packing and shipping
Verifying Documents cont.
• UPL will compare DoD ID numbers to ensure the DoD ID matches for each Soldier on all urinalysis testing forms
• If a DoD ID is incorrect on the bottle label, the lab will not test the specimen
• If the DoD ID is incorrect on the DD Form 2624 or Testing Register, it may be challenged by the SM and or legal

After all specimens have been collected the UPL will:
Verify that all DoD ID/EDIPI’s match on:
• Testing Register
• DD Form 2624
• Bottle labels

Label Correction Memo (LCM)
• ONLY document authorized to send to the FTDTL with the specimens
• UPL or DTC must maintains copies of LCM with original DD Form 2624 at unit or DTC level
• Only 1 LCM per DD Form 2624 (Batch)
The memorandum titled, “Label Correction Memo” (LCM) will explain:

– The discrepancy
– The circumstances
– The corrective action
– Must be signed by the UPL, Observer, DTC, or other personnel who can validate the correction (should be E5 and above who meets criteria to participate in the collection process)

Bottle labels must show the following information:

• Collection date, if handwritten must be in YYYMMDD format
• Base Area Code (BAC)
• UPL’s initial
• Soldier’s initial (should not spell a full name or word)
• Soldier’s DoD ID
• Unit Identification Code (UIC)
**Post Collection - QC**

**Bottle Labels – Testing Ramifications**
- Bottle should only have one label
- Bottle labels must reflect edits you made on other urinalysis testing forms
- The testing lab rejects specimens without testing if the bottle label has an uncorrected discrepancy not accompanied by an LCM
- Complete a Label Correction Memo if the bottle label contains a correction or a second piece of tamper tape is added

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**Post Collection - QC**

**Testing Register**
- Make sure that you document all unusual circumstances with an annotation, such as when a Soldier is not tested
- Make sure the Testing Register reflects all edits on the DD Form 2624 and bottle label
- **DO NOT** send Testing Register or DD Form 2624 to FTDTL with the specimens
- The FTDTL rejects all specimens without testing them if the Testing Register and/or DD Form 2624 is included

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**Post Collection - QC**

**DD Form 2624**
- Review edits for accuracy
- Complete the front and chain of custody completely
- Do not send to the laboratory
- The UPL or DTC maintains original DD Form 2624
If a specimen was not collected correctly annotate on the DD Form 2624 as shown below:
1. Line through the entry from the DoD ID
2. Initial, date, and write “Not Tested” at the end of the drawn line

Verify bottle tape
- It is imperative that each specimen bottle has the tamper-evident tape applied correctly
- If the tape is missing or compromised in any fashion, the FTDTL will reject the specimen without testing it
- If the tape is broken or not touching the bottle label on both sides, apply a second piece of tape slightly offset from the first and complete a LCM

Specimen bottle placement in the collection box
- Ensure the bottles are placed in individual specimen bags
- Check that the bottles are placed in the collection box in the same order that they appear on the DD Form 2624
- All slots should have a bottle or tissue paper filler to avoid shifting in shipment
Specimen bottle chain of custody

- Chain of custody begins when the UPL accepts a specimen bottle from a Soldier
- Remember the 2624 needs to be completed entirely; the DD Form 2624 does not get sent to the FTDTL
- It is the responsibility of the UPL to ensure that the specimen bottles are not compromised in any fashion while in their control
- Maintain batch integrity in the specimen boxes if there is an LCM associated with the specimens in the batch and place original LCM in an unsealed white envelope taped to the specimen box
- Maintain originals of DD Forms 2624 and copies of LCM(s), as applicable for your files

Testing Station Breakdown and Disinfection

- Like the holding area and latrine, the urinalysis testing station is a public space
- When testing is completed, return the space to the same state it was in prior to testing
- Discard any used items, such as paper towels and gloves. Use a trash bag from the holding area if one is not available in the UPL testing station
- Remember that you must maintain a direct line of sight with the collection box at all times

Remember to:

- Return all supplies in accordance with the SOP
- Remove all signs
- Remove all other materials
- Remove the binder from the testing station
- Take the specimens and all testing paperwork with you when you leave
To properly disinfect the urinalysis testing area:

1. Check if it's time to change your gloves. You should change your gloves **every two hours** during urinalysis collection and may continue wearing gloves while breaking down your testing station.

2. Disinfect all work areas, surfaces, and reusable equipment that were used for processing urinalysis specimens.

To properly disinfect the urinalysis testing area cont.

3. Disinfect the table and any pens that were used during urinalysis testing.

4. Wipe each item clean with a paper towel after it is disinfected.

5. Discard any used paper towels into the trash can.

**Approved disinfectants**

10% bleach solution
- Use ½ cup bleach and 4 ½ cups water
- Use within eight hours

**Lysol®**
- Make sure that the product reads that it is a disinfectant. Not all Lysol products contain the disinfecting agent.

70% or higher alcohol solution
- The alcohol solution should be either methanol or ethanol.
Disinfectants that are not approved for use

- Isopropyl alcohol
- 60% alcohol solution
- 5% bleach solution
- Hand sanitizers

Restoring the Area and Returning Supplies

The UPL must follow these steps to re-open the latrine to the public after urinalysis testing:

- Return any cleaning products to the latrine that were removed at the inspection
- Wipe the sink area with paper towels
- Remove the Latrine “Off Limits” sign from the latrine door

The holding area

- Discard all used cups and trash
- Return beverages and unused cups in accordance with the SOP
- Remove the “Holding Area” sign, so that the area can be re-opened for general use
Post Collection

Returning testing supplies

• Return supplies to the secure storage area

• Make a note of any items that may need to be reordered or picked up at the ASAP office

• Replenish your supplies to maintain at least enough to conduct a 100 percent Unit inspection

Lesson Summary

• Make sure that you have checked that the tamper-evident tape is applied correctly

• Perform a quality control review of all documents and specimens

• Make sure that the DoD ID for each Soldier match on all documents

• Ensure that all edits to the DD Form 2624 and bottle labels are forensically correct

Lesson Summary

• Make sure that the chain of custody is complete and correct

• Make sure that every entry on the DD Form 2624 has an associated collected specimen in the collection box

• Be sure to disinfect the urinalysis testing table when you are finished and leave the testing area as you found it
Check on Learning

Q: What is called when the FTDTL rejects a specimen without testing it?

A: CUI

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Check on Learning

Which of these documents can be sent to the FTDTL with the specimens?
Check on Learning

Q: Is hand sanitizer and approved disinfectant for testing station break down?
A:
Introduction
In this lesson, we'll discuss:
• Procedures for temporarily storing urinalysis specimens
• Requirements for storage containers
• Chain of custody requirements

Learning Objectives
• Learn regulatory chain of custody procedures for specimen storage
• Identify approved specimen storage options IAW AR 600-85
Specimen Storage

- Typically, temporary storage for urinalysis specimens is only necessary if you cannot turn them in to the DTC on the same day as collection or ship specimens immediately to the FTOTL (Direct Ship States) or DTC
- The UPL is responsible for maintaining chain of custody
- You must keep specimens in your possession and in line of sight at all times unless they are in temporary storage
- You must accurately document chain of custody on the back of the DD Form 2624 when placing specimens into storage or removing them from storage

Approved Storage Containers- Safe

- Must weigh at least 500 pounds or be attached to the facility with a chain or bolts
- Secure hasp with a 200 series padlock (with only two keys – no combination lock)
- Must be in an office or other room that can be locked

Approved Storage Containers- Filing Cabinet

- Must weigh at least 500 pounds or be attached to the facility with a chain or bolts
- Secure the hasp with a 200 series padlock (only two keys and no combination lock)
- Metal bar hasp must run the entire height of the cabinet
- The hasp may be welded to the top drawer in place of the metal bar, but then only the top drawer can be used for storage
- Must be in a room with a door that can be locked
Approved Storage Containers - Metal Wall Locker

- This container must weigh at least 500 pounds, or be attached to the facility with a chain or bolts
- Hasp secured with a 200 series padlock (only two keys and no combination lock)
- Must be in a room with a door that can be locked

Temporary storage mandatory requirements

- One key is issued to the primary UPL. The other key is secured in a sealed envelope (signed by the UPL across the seal) and issued to the Commander’s safe
- Key control procedures are defined in AR 600-85 and key control SOPs
- SF-702 must document all opening/closing of the storage container. The UPL maintains the SF-702 for three years
- Each event involving temporary storage of specimens must be documented on the chain of custody form (back of DD Form 2624)
Specimen storage in deployed areas

- Commanders in deployed areas should make every attempt to ensure specimens requiring storage are properly secured if facilities are not available that fully comply with the storage guidelines.
- In deployed areas only, alternate storage may include a foot locker or similar container if it meets these conditions:
  - A padlock to which the primary UPL has the only key.
  - Location in the Unit's tactical operations center or other area under constant surveillance.

Documenting chain of custody

Ensure the BAC, UIC and Document Number fields on the back of DD Form 2624 are filled in:

- Enter the date the specimens were collected in block 11a.
- UPL will print his/her name and sign his/her payroll signature in block 11b.
- Have DTC (or personnel who is receiving specimens) print his/her name and sign his/her payroll signature in block 11b. "If placing in Safe Storage or shipping, UPL will complete as appropriate for who is receiving the specimens.
- Enter "Specimens released by UPL to DTC" in block 11d or "placed in safe storage" or "shipped via USPS/FedEx/UPS" etc.
In Garrison, DTC conducts QC of specimens (Centralized Ship States-ARNG)

To transfer specimen custody to an alternate or additional UPL in the case of an emergency or if multiple UPLs assisted in the collection of a batch together, either of following must occur:

- **If transferring to another UPL**, the original UPL transfers the specimens to the alternate or additional UPL by documenting transfer on the chain of custody.
- **If two UPLs assist in collecting specimens on the same batch**, upon finishing collection, both UPLs need to be documented on the chain of custody.
**Post-Collection- Chain of Custody**

**Removing Specimens From Storage**

To complete chain of custody documentation when removing specimens from temporary storage, the UPL makes these entries on the back of the DD Form 2624:

1. Block 11a: The current date
2. Block 11b: Location of the storage container, to include the building and room number if applicable
3. Block 11c: Printed name and signed payroll signature
4. Block 11d: Purpose for transfer In this case, “Removed from temporary storage”
5. Ensure the BAC, UIC and Document Number fields on the back of DD Form 2624 are filled-in

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**Post-Collection- Chain of Custody**

In Garrison, DTC conducts QC of specimens (Centralized Ship States- ARNG)

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**Post-Collection- Chain of Custody**

**Important points about chain of custody documentation**

- Do not pre-date or post-date chain of custody events
- You must document chain of custody when removing specimens from storage
- Chain of custody must remain continuously and forensically intact until the specimens are received by the courier/shipping agency, and subsequently the drug testing laboratory
- The UPL who collects specimens should be the one who turns the samples to the DTC, unless specimens are signed over by the UPL to another individual who is delivering to DTC
- Document change of custody if another UPL is turning in
Lesson Summary

- If there is enough time to ship the specimens the same day as testing or to turn them in, you do not have to place them in storage. However, you must maintain line of sight with the specimens the entire time they are in your possession.
- Make sure that you properly annotate on the DD Form 2624 to document chain of custody when you transfer specimens into or out of temporary storage.
- Learn and follow the mandatory storage requirements.
- Be sure to complete the SF-702 every time you open or close a storage container.

Check on Learning

Q: What is the proper way to transfer specimens from one UPL to another UPL?

A:
Introduction
In this lesson, we’ll discuss:
• The UPL role in packing specimens when in garrison and deployed
  • Packaging materials
  • How to pack specimens for shipment to the testing lab

Learning Objectives
• Learn to properly identify the documents included with the specimens when they are shipped to the drug testing laboratory
• Learn to properly identify the steps in the packaging sequence
**Garrison Comparison**

- In garrison, the DTC performs a quality control inspection of each collection box, and then packs and ships specimens to the Forensic Toxicology Drug Testing Laboratory (ARNG Centralized Ship).
- UPLs may be required to assist DTC with packing.

**Deployed/Reserve/National Guard (ARNG Direct Ship)**

- UPLs who are deployed or not located at an installation package the specimens.
- All must follow packing and chain of custody procedures.

**Label Correction Memo**

- If a correction was identified ensure you complete a Label Correction Memo for broken TET.
- The original Label Correction Memo must be sent with the specimens.
- Copies of the DD Form 2624 and any Label Correction Memo's must be filed IAW 25-400-2 (ARIMS).

**Packaging Materials**

- Single specimen bags as secondary container and small absorbent pads (approx 100 ml).
- Large absorbent pads (300-500ml) to contain leakage from specimens in a specimen box during extraordinary situation when single specimen bags are not available.
- Mailing tape to seal over all open sides, edges and flaps on the collection box.
- White letter-size business envelope to hold the LCM.
- Black marker, blue ball point ink pen (preferred) or black ball point ink pen to sign your payroll signature across the top and bottom collection box.
Packaging each Specimen in a Secondary Container:

The use of absorbent pads and single specimens bags:

- If due to extraordinary circumstance and single specimen secondary bags are not available, place a large (300-500 ml) absorbent pad in the collection box on top of the specimen bottles.

Absorbent pad not required if bottles are in individual specimen bags.

- Seal the collection box with mailing tape over all open sides, edges and flaps with masking or clear shipping tape.

- Sign payroll signature across the tape on the top and bottom of the collection box.

- Write your BAC on the collection box.
Post-Collection- Packaging

If the specimens in the box contain corrections made on an LCM(s):

- Place original copies of the LCM(s) associated with the specimens in the box in a white business envelope to the outside of the collection box
- The envelope must remain unsealed
- Write your BAC in large letters on the outside of the envelope

*There is no longer a requirement to annotate ‘2D’ on the outside of the box*

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Post-Collection- Packaging

- Deployed UPLs may need to allow an official postal clerk to perform a visual inspection before packing and shipment
- Do not allow the postal clerk to touch the collection box or specimen bottles

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Post-Collection- Packaging

Quality Control, Storage, and Packing Review

- Verify entries on all documentation after testing is complete and before packing
- Turn specimens in immediately after collection if possible
- Complete all chain of custody entries correctly, whether turning in specimens immediately, placing in temporary storage, or removing from temporary storage
- Properly complete all steps to pack specimens
**Post-Collection - Packaging**

**Reminder:**
Do NOT send any DD Forms 2624s to the Laboratory. The only documents that are authorized to be sent with specimens is an LCM, if applicable.

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**Lesson Summary**

- Fill out the DD Form 2624 completely and correctly if you remove specimens from temporary storage
- Ensure that you include all LCM's associated with specimens collected, if needed
- Do not use Scotch tape or duct tape when sealing the collection box
- Consult the UPL training book and AR 600-85 if you don’t remember all of the packing steps

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**Videos**

- [https://www.youtube.com/watch?v=qXVRTavSiIY](https://www.youtube.com/watch?v=qXVRTavSiIY) - Navy Drug Screening Lab (Part 2)
- [https://www.youtube.com/watch?v=EcJTac6Hok8](https://www.youtube.com/watch?v=EcJTac6Hok8) - Navy Drug Testing Lab
- [https://youtu.be/h85e0rQJf7s](https://youtu.be/h85e0rQJf7s) - Drug Testing Myths
Introduction
In this lesson, we'll discuss:
• Testing laboratory locations to ship urinalysis specimens
• Approved shipping carriers
• How to complete chain of custody before shipping
• Final procedures for shipping specimens

Learning Objectives
• Learn approved carriers for shipping specimens to the FTDTL with 100 percent accuracy
• Learn Chain of custody procedures for specimen shipment with 100 percent accuracy
• Learn steps for shipping specimens with 100 percent accuracy
**Post-Collection– Shipping**

**Forensic Toxicology Drug Testing Laboratory (FTDTL) Locations**

- Tripler, HI Forensic Toxicology Drug Testing Laboratory
- Fort Meade, MD Forensic Toxicology Drug Testing Laboratory
- Jacksonville Navy Drug Screening Laboratory (NDSL)
- Great Lakes Navy Drug Screening Laboratory (NDSL)
- Airforce Drug Testing Laboratory (AFDTL), Joint Base San Antonio, Lackland

All routine specimens are sent to one of the above locations assigned to your BAC

**Steroid tests and special tests – all Units**

- Fort Meade, MD for steroid tests
- Armed Forces Medical Examiner System for special tests

Consult with your ASAP representative before collecting and submitting specimens for steroid and special tests

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**Approved Carriers**

- Registered mail
- US Postal Service by First Class Mail
- Hand-carried by surface transportation
- Military aircraft transportation system
- US flag commercial air freight air express and air freight provider (FEDEX, UPS, DHL)
- Foreign flag carrier only, if none of the above is available

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**Chain of Custody**

Shipping after removing from storage

1. Block 11a: Current date
2. Block 11b: Printed name and signed payroll signature of UPL
3. Block 11c: Method of mail transport
4. Block 11d: Enter “Specimens mailed to FTDTL by (mail method)"

Ensure the BAC, UIC and Document Number fields on the back. DD Form 2624 remains at the UPL or DTC level
Post-Collection- Shipping

In Garrison, (ARNG Centralized Ship) DTC conducts QC of specimens

Shipping immediately after collection

1. Block 11a: Current date
2. Block 11b: Printed name and signed payroll signature
3. Block 11c: Method of mail transport
4. Block 11d: Enter “Specimens mailed to FTDTL by [mail method]”

Ensure the BAC, UIC and Document Number fields on the back of DD Form 2624 are filled-in. DD Form 2624 remains at the UPL or DTC level

Reserve, National Guard (Direct Ship) and Deployed UPLs ship specimens directly to FTDTL
Shipping Procedures

1. Annotate on the DD Form 2624 that the specimens are being shipped and file IAW ARIMS

2. If a LCM was used, place the original LCM in the white business envelope and attach to the outside of the collection box

3. Place each collection box inside a leak proof bag

Shipping Procedures cont.

4. Place collection boxes inside the outermost shipping container and package according to the carrier's requirements and local policy

5. Handwrite or affix a label that says "Exempt Human Specimen" next to the mailing address (not on the address label) according to local policy

6. Hand the shipping box directly to a staff member of the carrier at the point of shipment

Lesson Summary

- Complete chain of custody entry for shipment only when you are actually shipping the specimens
- Don't pre-date or post-date
- You must make the final chain of custody entry even if the specimens were not in temporary storage
- Chain of custody must remain continuously and forensically intact.
- If the final chain of custody annotation for shipment is not complete, it could invalidate any positives
- DO NOT send the DD Form 2624 to the FTDTL
Lesson Summary

• Ship specimens only to the specifically assigned FTDTL for your BAC
• Be sure to place all of the slotted collection boxes into leak-proof bags prior to shipment
• It is imperative that you adhere to the chain of custody procedures when packaging and shipping

Check on Learning

Q: What is the only document allowed to be shipped to the FTDTL with the specimens?

A:
Laboratory testing procedure

• Quality control check, initial screening, then may perform verification and confirmation tests

• First test to determine presence of any drugs or drug metabolites

• Testing ends here for specimens with a negative result

Laboratory Procedures: Fatal Discrepancies

• Occur when a specimen does not meet processing guidelines in a way that would invalidate the test results, such as insufficient specimen amount

• The FTDTL destroys the specimen without testing it

Laboratory Procedures: Non-Fatal Discrepancies

• Occur when a specimen does not meet processing guidelines in a way that would not invalidate the test results but should have been corrected by the UPL or DTC, such as invalid test basis codes

• The FTDTL tests specimens with non-fatal discrepancies
New Discrepancy Codes

- Discrepancy codes can be found in the DoDI 1010.16, dated 15 June 2020
- New changes have been published from the Office of the Under Secretary of Defense dated 14 June 2022

Will receive a broken seal discrepancy code
FTDTL Procedures / Testing / Discrepancies

Should not receive a broken seal discrepancy code

When in doubt, send a Label Correction Memo

FTDTL Procedures / Testing / Discrepancies

Consequences for excessive discrepancies

- The UPL can have certification revoked for excessive discrepancies in drug testing collection procedures, urinalysis specimens, or on associated forms by their DTC

- The UPL should review what led to any discrepancy and take corrective action

FTDTL Procedures / Testing / Discrepancies

<table>
<thead>
<tr>
<th>Initial Screen</th>
<th>Positive</th>
<th>Pharmacy Data Transaction Service (PDTS) Match</th>
<th>Positive</th>
<th>CONFIRMATION TESTING</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Positive</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Negative</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Negative</td>
<td>Report</td>
<td>Negative</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Negative</td>
<td>Positive</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Initial Screening
- The purpose of the initial screening test is to eliminate negative specimens and to focus efforts and resources on those specimens that are “presumptively positive”

Confirmation test
- Second test to confirm the presence and concentration of specific drugs
- If the amount of a drug or drug metabolite meets or exceeds the indicated level the lab enters a positive drug test result
- Nanogram Levels reflect the concentration of a drug or drug metabolite in a Soldier’s urine

<table>
<thead>
<tr>
<th>Initial test analyte</th>
<th>Initial test cutoff</th>
<th>Confirmatory test analyte</th>
<th>Confirmatory test cutoff concentration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marijuana metabolites (THCA)</td>
<td>50 ng/mL</td>
<td>THCA</td>
<td>15 ng/mL</td>
</tr>
<tr>
<td>Cocaine metabolite (Benzoylecgonine)</td>
<td>150 ng/mL</td>
<td>Benzoylcegonine</td>
<td>100 ng/mL</td>
</tr>
<tr>
<td>Codeine/Morphine</td>
<td>2,000 ng/mL</td>
<td>Codeine/Morphine</td>
<td>2,000 ng/mL</td>
</tr>
<tr>
<td>Hydrocodone/Hydromorphone</td>
<td>300 ng/mL</td>
<td>Hydrocodone</td>
<td>100 ng/mL</td>
</tr>
<tr>
<td>Oxycodone/Dihydromorphone</td>
<td>100 ng/mL</td>
<td>Oxycodone</td>
<td>100 ng/mL</td>
</tr>
<tr>
<td>6-Acetylmorphine</td>
<td>10 ng/mL</td>
<td>6-Acetylmorphine</td>
<td>10 ng/mL</td>
</tr>
<tr>
<td>Phencyclidone</td>
<td>25 ng/mL</td>
<td>Phencyclidone</td>
<td>25 ng/mL</td>
</tr>
<tr>
<td>Amphetamine/Methamphetamine 500 ng/mL</td>
<td></td>
<td>Amphetamine</td>
<td>250 ng/mL</td>
</tr>
<tr>
<td>MDMA/MDA</td>
<td>500 ng/mL</td>
<td>MDMA/MDA</td>
<td>250 ng/mL</td>
</tr>
</tbody>
</table>

Nanogram Levels and Commander Actions
- Nanogram levels vary depending on several factors, and are not a direct indicator of how much a Soldier misused
- Commanders should not use nanogram levels in determining their response to a positive test result
- An Expert Witness from the Forensic Toxicology Drug Testing Laboratory can be requested for board proceedings to provide specimen testimony
Introduction
In this lesson, we'll discuss:

• The procedures for reporting, receiving, and acting upon urinalysis test results
• Specific substances that are prohibited and would trigger a positive drug test result
• Procedures for maintaining drug test records after receiving results
• How to annotate documents with drug test results

Learning Objectives

• Learn to correctly identify and implement procedures for receiving, reporting, and recording results
• Learn to identify and implement governing requirements for filing and storing report documentation
• Learn method to retrieve / check results while deployed
Post Collection - Results

Receiving Results

- The FTDTL posts urinalysis testing results online for authorized personnel to access
- BAC Managers or supporting DTCs retrieve results for deployed Units
- DTCs retrieve results for Units in garrison
- For non-deployed National Guard Units, the Point of Contact is the State DTC
- For non-deployed Reserve, the Point of Contact is the Command RRC

Receiving Results cont.

- Results for deployed Units are usually available 30-45 days (long mail time) after the specimens are shipped to the FTDTL
- Results for Units in garrison are usually available one week after testing and receipt by the FTDTL

Results Checker Tool

- Available on the ASAP Web site for only CENTCOM-deployed UPLs/CDRs only (using BACs that begin with a CT)
- Provides the following information:
  - Testing date
  - Any discrepancies
  - Number of specimens tested
  - Whether results are available
- Does NOT list positive/negative results on specimens
- Actual results only available on FTDTL portal Contact listed BAC Manager for actual result reports and details
Procedure for Negative drug test results

- RRC, DTC (ARNG) notifies the Commander
- BACM/supporting DTC notifies the Commander in deployed areas
- No further Commander action required
- UPL annotates on documentation
Post Collection - Negative Results

Negative Results Flow Chart

Post Collection - Positive Results

Procedure for Positive drug testing results

- DTC notifies the Commander
- BACM/supporting DTC notifies the Commander in deployed areas
- Attach a copy of the drug testing results to the Testing Register and/or DD Form 2624
- File positive drug testing results for three years plus current year
- Also retain policy and SOP covering the period of the positive result for three years
- Keep the Testing Register and DD Form 2624 in a secure location at the Unit
- Drug Testing Results are Privacy Act Protected

Commander actions for positive drug tests

- Consult SJA prior to initiating adverse actions against a Soldier after receiving a positive drug test result
- Counsel Soldier on drug positive
- If a Soldier is positive for a possible prescription medication, first request the Soldier medical evidence before initiating any administrative actions
- Initiate administrative separation for illicit positive
- Initiate Flag – U for drug and V for alcohol
- Inform Security Manager of illicit drug positive
Medical Review Officer (MRO) reviews

- MRO review may be required on positive drug test results to determine whether the drug is from legitimate use
- DTC or BAC Manager notifies the Commander and MRO, ensures the MRO review takes place, and then notifies the Commander of the MRO final determination
- Commanders have required actions for positive results
- UPL receives results if the test is positive, but only the Medical Review Officer can determine legitimate or illegitimate use

MRO reviewable drugs

- All opiates:
  - Oxycodone/Oxymorphone
  - Fentanyl/Norfentanyl
  - Hydrocodone/Hydromorphone
  - Morphine
  - Codeine
- Amphetamines and methamphetamines
- Prescription medications such as Valium, Zanex, steroids, and other drugs
**Post Collection- MRO: Non-Reviewable**

Non-reviewable drugs:
- THC
- Cocaine
- MDMA (Ecstasy)
- MDA
- Heroin
- PCP
- SYCAN (Spice)

**Post Collection- Positive Results**

Commander Actions Flowchart

**Post Collection- Records**

Record Maintenance:
- The Army’s system for record maintenance is known as the Army Records Information Management System (ARIMS).
- The Army Regulation which governs ARIMS is AR 25-400-2.
- AR 25-400-2 requires noting this information on file guides:
  - Creation
  - Disposition
  - Maintenance
  - Use
Post Collection- Records

Record Labels

• File number
• File title
• Year of accumulation
• Privacy Act system notice number (if applicable)
• Disposition instructions (based on ACRS retention periods)

Post Collection- Records

• 600A Active Duty Personnel - Alcohol and Drug abuse Testing Report Files – Positive Results
  • PA:A0600-85DAPE
  • Destroy in CFA when 3 years old

• 600A Active Duty Personnel – Alcohol and Drug abuse Testing Report Files – Negative Results
  • PA:A0600-85DAPE
  • Destroy in CFA when 1 years old

• 600A - Active Duty Personnel - Alcohol and Drug abuse Management Files - Other Offices and TOE Units
  • (No PA status but PII protection is required: Unit SOPs, copies of inspection reports, Appointment orders, UPL CTP training event and certification records)
  • Destroy in CFA when 5 years old

Post Collection - Records

Annotating for negative drug testing results

• Annotate the Testing Register and/or DD Form 2624
  OR Attach a copy of the drug testing results to the Testing Register and/or DD Form 2624

• File negative drug testing results for one year plus current year

• Keep the Testing Register and DD Form 2624 in a secure file at the Unit

• Drug Testing Results are Privacy Act protected
Lesson Summary

• The process for reporting drug testing results may include an MRO review if the test is a presumptive positive
• Commanders have a specific set of required actions to take in response to positive drug test results
• AR 600-85 and the UCMJ define prohibited substances
• The UPL must strive to avoid discrepancies in testing procedures and documentation
• The UPL is responsible for keeping accurate records of all drug testing results in a file cabinet

Check on Learning

Q: What must Drug Testing results must be filed in accordance with?
A:
Questions?
MEMORANDUM FOR DIRECTOR, ARMY SUBSTANCE ABUSE PROGRAM
DIRECTOR, NAVY DRUG DEMAND REDUCTION PROGRAM
OFFICE
AIR FORCE FORENSIC DRUG PROGRAM MANAGER
COAST GUARD DRUG TESTING PROGRAM COORDINATOR

SUBJECT: Department of Defense Drug Testing Program Blank and Invalid Collection Dates

Effective June 5, 2022, specimens submitted to a Forensic Toxicology Drug Testing Laboratory (FTDTL) with a missing or invalid collection date will receive the ‘LF – Label collection date discrepant’ discrepancy code and the date the specimen was received at the FTDTL will be the collection date reported in the FTDTL Information Management System (FTDTL-IMS).

Missing collection dates are submitted specimens with no printed or handwritten collection date on the label and no collect date specified in accompanying memorandum. For a collection date to be valid, it must be eight numeric digits in the YYYYMMDD format and the date must be no more than nine months prior to the received date. The collect date will be replaced with the received date if it is missing digits, nonnumeric, incorrectly formatted, or precedes the received date by more than nine months.

Since fiscal year drug testing data are indexed by collection date, these changes improve data capture for assessing the abuse of illicit and prescription drugs and ensuring the Services meet annual drug testing requirements as mandated by Department of Defense Instruction (DoDI) 1010.01, *Military Personnel Drug Abuse Testing Program (MPDATP)*.

The ‘LF’ discrepancy code and received date will automatically be applied by FTDTL-IMS after all testing is completed, and labs may assign additional discrepancy codes as necessary. Prior to June 5, 2022, specimens with blank or invalid collection dates were assigned a default collection date of 19700101.
For additional information or questions, contact CAPT Erin Wilfong at (571) 236-1766 or erin.r.wilfong.mil@mail.mil.

Erin R. Wilfong, CAPT, USN
Director
Office Drug Demand Reduction

cc:
Army Forensic Drug Program Manager
Navy Forensic Drug Program Manager
Marine Corps Drug Demand Reduction Program Manager
ACTION MEMO

FOR: EXECUTIVE DIRECTOR, FORCE RESILIENCY

FROM: Erin R. Wilfong, CAPT, USN, Director, Office of Drug Demand Reduction

SUBJECT: Testing Rate Adjustment for Lysergic Acid Diethylamide (LSD)

- **Purpose.** Seek concurrence from EDFR to increase the testing rate for LSD. While all specimens are to be tested for the complete panel of drugs, EDFR has authority to determine lower testing rates, per DoDI 1010.16.
  - Reference: (a) Under Secretary of Defense Memorandum, “Update to the Department of Defense Drug Testing Panel: Lysergic Acid Diethylamide (LSD),” August 6, 2020

- **Background.** LSD was added back to the DoD drug testing panel following a recent resurgence in use:
  - LSD was first added to the routine drug testing panel in October 1987.
  - In October 1999, the primary metabolite (2-oxo-3-hydroxy-LSD) was added to the testing paradigm to increase detection.
  - LSD was removed in December 2006 following decreased prevalence.
  - In response to the proliferation of LSD, the Department added LSD and its primary metabolite, (2-oxo-3-hydroxy-LSD) back to the routine testing panel in December 2020 under limited circumstances.

  - Testing is currently limited to collections with underlying suspicion of LSD use, such as probable cause, consent, and command directed, and the laboratories augment LSD testing with randomly selected specimens collected under random/inspection premises.

  - The FY 2021 total combined DoD testing rate for LSD was 6.4%. A breakdown of LSD testing by laboratory follows.

<table>
<thead>
<tr>
<th>Drug</th>
<th>Tripler¹</th>
<th>Meade²</th>
<th>JAX³</th>
<th>GL⁴</th>
<th>Lackland⁵</th>
</tr>
</thead>
<tbody>
<tr>
<td>Military Drug Test Rates (All Components)</td>
<td>5%</td>
<td>5%</td>
<td>8%</td>
<td>8%</td>
<td>5%</td>
</tr>
</tbody>
</table>

**Source:** U.S. Army Medical Information Technology Center (USAMITC)

¹ Army Drug Screening Laboratory, Tripler Army Medical Center, Honolulu, HI
² Army Drug Screening Laboratory, Fort Meade, MD
³ Navy Drug Screening Laboratory, Jacksonville, FL
⁴ Navy Drug Screening Laboratory, Great Lakes, IL
⁵ Air Force Drug Screening Laboratory, Lackland AFB, San Antonio, TX

Prepared by: CAPT Erin Wilfong, 571-236-1766
Office: ODDR
Although LSD was only tested at 6.4% in FY 2021, it was the fourth most prevalent drug within the entire DoD (adjusted for 6.4% testing rate) with 98% of the positives coming from Army, Navy, and USMC active duty Service members.

Based upon this high prevalence rate, the DoD’s Biochemical Testing Advisory Board, a technical and policy advisory body with representatives from the Military Services, concluded the testing rate for LSD and its metabolite should be increased to a minimum of 10%.

The guidance in reference (a) remains in effect, which requires special testing requests coordinated through Service Drug Demand Reduction Offices and gives first priority to specimens collected under the auspices of probable cause, consent, or command directed, in accordance with Department of Defense Instruction 1010.01, Military Personnel Drug Abuse Testing Program (MPDATP). Second priority will be given to specimens collected under random/inspection premises and laboratories will also continue to randomly select specimens for LSD testing.

RECOMMENDATION: Increase the LSD testing rate for the next year (October 2022 – October 2023) to a minimum of 10%.

Approved: [Signature]
Disapproved: 
Other: 

Prepared by: CAPT Erin Wilfong, 571-236-1766
Office: ODDR
MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: NETCOM Authorizing Official (AO) Authority to Connect (ATC) under Reciprocity for Defense Health Agency Drug Testing Program – (DTP)Lite v6.x

1. References:


   b. Defense Health Agency, Software Certification for Drug Testing Program (DTP) Lite version 6.x

2. Drug Testing Program – (DTP)Lite version 6.x is a Government developed automated, standardized application used to randomly select personnel from unit provided personnel roster for participation in a forensic drug test. DTP Lite v6.x identifies personnel to be tested, tracks the testing, provides unit statistics, generates barcoded documentation, and labels for sample submission to Forensic Drug Testing Laboratories.

3. Defense Health Agency has assessed and approved the use of Drug Testing Program - DTPLite v6.x on standard desktop systems and placed on the DHA Evaluated/Approved Products List (DHA EAPl).

4. As the NETCOM Authorizing Official (AO), I assume the operational risk and approve the use of DTPLite v6.x with a LOW residual risk level. This approval will not exceed the Authorization Termination Date (ATD) of 6 June 2024.

5. My approval is contingent on the following caveats:

   a. Installations are responsible for understanding and adhering to the terms of the End User License Agreement.

   b. DTPLite v6.x remains at an acceptable level of risk. DoDIN-A service provider will conduct routine vulnerability scans IAW DoD regulations using approved wired and wireless scanning tools and patch vulnerabilities identified in accordance with local policy.
NETC-CSD

SUBJECT: NETCOM Authorizing Official (AO) Authority to Connect (ATC) under Reciprocity for Defense Health Agency Drug Testing Program – (DTP)Lite v6.x

c. DTPLite v6.x is revalidated if major changes or upgrades are applied to the baseline configuration, architecture, or upon implementation, modification, or expiration of the DTPLite authorization.

d. DTPLite v6.x is installed on current Windows Army Gold Master (AGM) build workstations.

e. If the DoD IN-A service provider must provision above baseline services to support the system, these services must be documented in a service agreement that is initiated and signed prior to connection of the system to the DoD IN-A.

f. Local ISSM and/or users will ensure DTPLite v6.x controlled unclassified information is protected IAW CJCSI 65.10.01.

6. Point of contact is the NETCOM Program ISSM, Ms. Angela Miles, 520-454-7257, angela.m.miles.civ@mail.mil.

MARIA B. BARRETT
Major General, USA
Commanding

DISTRIBUTION:
Commander, 7th SC(T), 311th SC(T), 335th SC(T)
NETCOM Europe
1st Signal Brigade
2nd Signal Brigade
160th Signal Brigade
Director, NETCOM CSD
SPECIAL DISTRIBUTION:
US Army Forces Command

CONTROLLED UNCLASSIFIED INFORMATION
1. Observers are a critical link in the process of collecting urine specimens to be tested for substance abuse. Instances have occurred in the past where observers did not follow proper collection procedures and positive drug tests were not usable in legal and/or administrative actions. In order to prevent similar occurrences in the future, the observer will read and sign the Memorandum for Observer(s).

   a. You must follow these specific procedures – without exception – when observing the urine sample collection from male Soldiers:

      • Stand next to the Soldier at the urinal or toilet at a 45° angle (urinal is preferred).
      • Ensure you can see the end of the donor’s penis (if the Soldier is not circumcised, ensure the donor pulls their foreskin back to allow direct view). If the Soldier is transgender, follow female collection procedure.

   b. You must follow these specific procedures – without exception – when observing the urine sample collection from female Soldiers:

      • Do not allow the Soldier to sit on the toilet seat (unless transgender Soldier opted out of surgery, then follow male collection procedure) – she must squat over the toilet.
      • Ensure the Soldier keeps her upper body straight – she cannot bend over to block view with body, hair, or clothing.
      • Ensure the Soldier holds the collection cup/ specimen bottle in front of her body and above the toilet rim.
      • Position yourself as necessary in front of Soldier to maintain direct view of urine leaving the Soldier’s body and entering the collection cup/specimen bottle.
      • If the Soldier is using the collection cup, directly observe the Soldier pouring urine from the cup into the specimen bottle, capping the bottle tightly, and wiping it dry.

2. The testing procedures do not violate a Soldier’s Fourth or Fifth Amendment rights, nor does the observation procedure violate the right to privacy. A refusal to produce a specimen is a violation of a direct order and may result in the Soldier being process for separation.

3. The results of tests may be used in legal proceedings and consequently the urine sample maybe considered as evidence. A valid chain of custody is mandatory for a successful prosecution. As an observer, you may be asked to provide testimony at legal or administrative proceedings. You may be subject to UCMJ or administrative action of it is discovered that the specimen was altered in any way while it was under your control.

   a. Article 92: Knowingly failing to obey a lawful general order or regulation by not maintaining direct line of sight of the urine into the bottle.

   b. Article 107: Making a false official statement in signing the UPL’s urinalysis Testing Register acknowledging the urination process was directly observed and no tampering occurred.

   c. Article 134: False swearing by authenticating that no substitution or tampering of the urine sample occurred.
Observer’s Memorandum  
April 21, 2022

1. Be an officer or NCO in the rank of E-5 or above. (GS-5 or above can be used as a last resort).
2. Be of the same gender as the Soldier being tested.
3. Possess sufficient maturity and integrity to preserve the dignity of the Soldier being observed.
4. Not be currently enrolled within the ASAP Rehabilitation Program or currently be under investigation for any substance abuse related offenses.
5. The observer(s) control the urine collection process once the Soldier leaves the UPL’s desk and during the collection of the specimen in the latrine.
6. Maintain visual contact with the bottle at all times.
7. Ensure the Soldier washes his/her hands with WATER ONLY before the collection begins.
8. Ensure the specimen provided is not contaminated or altered.
9. Directly observes the Soldier (one Soldier at a time per observer) voiding urine into the collection cup/specimen bottle, from the Soldier's body.
10. Ensure the Soldier provides at a minimum of 30 mls of urine: however, 45 mls is preferred.
11. Ensure the Soldier tightens the specimen bottle cap and the bottle is dried.
12. Ensure the bottle is not reopened after the cap is tightened.
13. Ensure the Soldier washes and dries hands (Soldier can use soap).
14. Escort the Soldier back to the UPL station/table with the bottle in full view.
15. In full view of the Soldier and the UPL, ensures the specimen bottle cap is tight prior to the UPL placing tamper evident tape over the top of the bottle. The specimen bottle will remain on the table while the UPL is holding the specimen bottle.
16. Observe the UPL placing tamper evident tape over the top of the bottle, and across the label, UPL initial the label, and place the specimen in the collection box.
17. The observer will print and sign their name on the Testing Register, in front of the UPL and the Soldier, verifying the collection process and direct observation was conducted.
18. Your signature on the Testing Register, verifies you have completed steps 1-17.

OBSERVER’S AFFIDAVIT: I have and understand this document. I will comply with the responsibilities as stated above and will report anything out of the ordinary immediately to the UPL or Commander.

___________________________   ___________________________ __________
UPL’s Printed Name  UPL’s Signature Date

Rank       Observer’s Printed Name       Observer’s Signature       Date

Rank       Observer’s Printed Name       Observer’s Signature       Date

Rank       Observer’s Printed Name       Observer’s Signature       Date

Rank       Observer’s Printed Name       Observer’s Signature       Date

UPL’s Printed Name       UPL’s Signature       Date
Commander’s Briefing
Inspection Other (IO) Test Basis
21 July 2021

Today selected personnel will be drug tested for illegal substance use. The primary purpose of this test is to ensure our unit’s military fitness and that we are maintaining proper standards of readiness.

Individuals in this unit have been selected for drug testing using the inspection other test basis for one of the following reasons:
1. You were listed on a random or unit sweep drug test and you were not available for testing.
2. Soldiers will be tested IAW guidelines listed in unit SOP.
3. You were not drug tested during the first 3 quarters of this fiscal year.

There is no probable cause or reasonable suspicion that anyone in the unit is using or abusing drugs or a controlled substance. This is in compliance AR 600-85. Soldiers not selected for random UA during the first three quarters of each fiscal year will be selected for testing during the fourth quarter using the inspection other test basis code.

Every specimen collected will be tested for Marijuana Delta-9 (THC), Delta-8 (THC), Cocaine; Amphetamines (which include methamphetamine, MDMA (ecstasy), and MDA), heroin, opiates (which include, morphine and codeine), synthetic opioids (Oxycodone/oxymorphone) known commonly as OxyCotin and Hydrocodone/hydromorphone) and Fentanyl, selected benzodiazepines and synthetic cannabinoids, known commonly as Spice. Lysergic Acid Diethylamide (LSD) has been added to the panel on a rotational basis.

Collection procedures follow current policy.

All Soldiers must be aware that all verbal orders connected with the testing are lawful and are to be followed as such.

A refusal to comply with orders relating to this test subjects the Soldier to punitive or administrative actions under AR 600-85, AR 135-178, AR 635-200 and AR 600-8-24.

DOES ANYONE HAVE ANY QUESTIONS?
The UPL will now provide you with details about the drug testing procedures that will be used today.
Commander’s Briefing
UPDATED: 21 July 2021

Today our Unit will be drug tested for illegal substance use. The primary purpose of this test is to ensure our unit’s military fitness and that we are maintaining proper standards of readiness.

Individuals in this unit have been selected on a random basis for drug testing. There is no probable cause or reasonable suspicion that anyone in the unit is using or abusing drugs or a controlled substance.

Everyone selected will be tested. Anyone not present will be rescheduled for testing at a later date.

Every specimen collected will be tested for Marijuana Delta-9 (THC), Delta-8 (THC), Cocaine; Amphetamines (which include methamphetamines, MDMA (ecstasy), and MDA), heroin, opiates (which include, morphine and codeine), synthetic opioids (Oxycodone/ oxymorphone) known commonly as OxyCod and Hydrocodone/ hydromorphone) and Fentanyl, selected benzodiazepines and synthetic cannabinoids, known commonly as Spice. Lysergic Acid Diethylamide (LSD) has been added on a rotational basis.

Testing procedures outlined in AR 600-85 will be followed.

All Soldiers must be aware that all verbal orders connected with the testing are lawful and are to be followed as such.

A refusal to comply with orders relating to this test subjects the Soldier to punitive or administrative actions under AR 600-85, AR 135-178, AR 635-200 and AR 600-8-24.

DOES ANYONE HAVE ANY QUESTIONS?

The UPL will now provide you with details about the drug testing procedures that will be used today.
You have five major responsibilities during the collection procedure:

1. Confirm identification with ID card
2. Provide more than 30ml of specimen. (45ml is preferred)
3. Initial the specimen bottle label verifying your personal data is correct
4. Keep specimen bottle in full sight until sealed with tamper evident tape.
5. Sign your payroll signature on the testing register to verify that the specimen was yours and you watch your specimen bottle label being placed on the bottle and sealed by the UPL with tamper evident tape.

Your urine specimen will be provided in a plastic bottle (a wide mouth collection cup is available for males and females).

Each bottle will have a label affixed to it with today’s date that identifies you by your DoD ID# after you return from the latrine.

Collection of the specimen will be conducted using direct observation in full view of an observer. Do not go to the UPL station until you feel you are ready to provide at least 30ml or more (approximately ½ bottle) of urine. If you are unable to provide a specimen or an adequate quantity of urine, you will be held in the holding area until you are able to provide a specimen. You will be provided an adequate amount of liquid to help facilitate the collection process. You will not be released from duty today until you have provided a proper specimen.

Your tasks include:

You will provide your military ID card. If you do not have your military ID card or other photo identification, the commander will be called to verify your identification.

Remove excess outer garments such as OCP jackets and coats or IPFU tops.

Provide a urine specimen under direct observation.

You will initial the bottle label upon returning from the latrine after you have verified your DoD ID#, full name, and date on the Testing Register; verify DoD ID# on DD Form 2624; and verify the date and your DoD ID# on the bottle label.

Sign your payroll signature on the testing register verifying that the urine specimen provided was yours, the bottle label was placed on the bottle and initialed by the UPL, specimen was sealed with tamper evident tape, and then placed into the collection box.

**Note:** I do not need to know if you are taking or have taken prescription medications. If your specimen result comes back from the laboratory as positive for a drug that could have been a result of prescription medication, a medical doctor will review the result before any other actions are taken. The doctor will review your medical record, any prescriptions from outside providers, and possibly interview you, prior to making a medical determination of valid prescription use or illegal use. If the doctor determines the drug positive was a result of valid prescription medication, then no actions will be taken against you.

Are there any questions? Any questions about the collection procedure will be directed towards your observer or myself.
MEMORANDUM FOR RECORD

SUBJECT: DDRP Standard Label Correction Memo (LCM)

1. This memorandum is to certify the following correction(s) were made as indicated below for urine specimen(s) enclosed with this shipment for testing. One LCM per 2624.

2. Reference: Bottle Label and/or Tamper Evident Tape

<table>
<thead>
<tr>
<th>BAC/IDN - Block 3</th>
<th>Branch/UIC - Block 3</th>
<th>Collect Date - Block 4</th>
<th>Document Number - Block 5</th>
</tr>
</thead>
</table>

BOTTLE LABEL CORRECTIONS (List all specimen number(s) that apply):

# ___ DoD ID Should read: ___________ # ___ DoD ID Should read: ___________.

# ___ DoD ID Should read: ___________ # ___ DoD ID Should read: ___________.

# ___ DoD ID Should read: ___________ # ___ DoD ID Should read: ___________.

# ___ DoD ID Should read: ___________ # ___ DoD ID Should read: ___________.

# ___ DoD ID Should read: ___________ # ___ DoD ID Should read: ___________.

# ______ : Collection Date incorrect, collection date Should read ________.

# ______ : Base incorrect, Should read ___________________________.

# ______ : UIC incorrect, Should read ______________________________.

# ______ : Test Basis Incorrect/Missing, should read ________.

# __________ : Volume is ______________________.

# __________ : Appears to be Adulterated.

TAMPER EVIDENT TAPE CORRECTIONS (List all specimen number(s) that apply):

# __________________ Multiple Seals: Applied seal(s) in the presence of the Service Member/Collector.

OTHER (List all specimen number(s) that apply):

#:______ Explanation:________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

_________________________________________  __________________________________
Signature: _______________  Signature: _______________

_________________________________________
Print Name: ____________________________  Print Name: ____________________________

_________________________________________
Phone Number: ___________________________  Phone Number: ___________________________

_________________________________________
Title: ___________  Date: ____________  Title: ___________  Date: ____________

Prepared By  Validated By
Deployed ASAP--CDRs, UPLs, BACMs: in-Theater BACM Contact List

Posted by Dang Tran Oct 26, 2016

Note: During COVID19 Emergency, e-mail would be the most effective way to contact BACM

---AFGHANISTAN--------
USFOR-A BACs: CLOSED.
Any residual testing activity -- Contact BACM in Kuwait (CT03)

---KUWAIT & SINAI-------
BAC CT03: ARCENT-KUWAIT,
MailBox usarmy.pentagon.hqda-dcs-g-1.mbx.ard-bacm-ct03@mail.mil.
DSN 318.480.2642/ SVOIP: 308-430-6807
Mr. leon.d.walker.ctr@mail.mil.

---IRAQ -------
BAC CT15: CJFLCC-OIR,
Contact ARCENT-KU BACM: usarmy.pentagon.hqda-dcs-g-1.mbx.ard-bacm-ct03@mail.mil
DSN 318.480.2642/ SVOIP: 308-430-6807

---QATAR-------
ASG-QATAR BAC: CLOSED
Any residual testing activity -- Contact BACM in Kuwait (CT03)

---USARAF/AFRICOM--------
BAC AF01: SETAF-AF & CJTF-HOA,
In November 2020, U.S. Army Africa consolidated with U.S. Army Europe and Africa and was re-designated U.S. Army Southern European Task Force, Africa (SETAF-AF).
Contact US Army Europe-Africa (USAREUR-AF) HQ ASAP for specific guidance.
Ángel L. Acevedo, angel.l.acevedo.civ@mail.mil,
VoIP 314-537-1205, Comm 011-49-0611-143-537-1205.

---KOSOVO-------
BAC E902
Contact US Army Europe-Africa (USAREUR-AF) for guidance.
Ángel L. Acevedo, angel.l.acevedo.civ@mail.mil,
Deployed ASAP—CDRs, UPLs, BACMs: in-Theater BACM Contact List
VoIP 314-537-1205, Comm. 011-49-0611-143-537-1205.
(Alternate: Perry, Joyce M, joyce.m.perry8.civ@mail.mil)

Operation Atlantic Resolve
Contact ASAP at home installation and/or US Army Europe-Africa (USAREUR-AF) for guidance on BAC/BACM
USAREUR-AF HQ ASAP:
Ángel L. Acevedo, angel.l.acevedo.civ@mail.mil,
VoIP 314-537-1205, Comm. 011-49-0611-143-537-1205

---ALL OTHER DEPLOYED AREAS--------
Deployed areas without assigned BAC will use BAC of Home Station or Mob Station
Contact ASAP at Home Installation, Mob Station, Component Command (IMCOM, USAR, ARNG) for BAC INFORMATION and SUPPORT
Alternate Contact: Leave a message for ARD Team with your Name, UIC, and Home Installation/Mob Station for HQDA ARD MailBox usarmy.knox.hqda-dcs-g-1.list.acsap-drug-testing-branch@mail.mil.

---USARSOUTH/SOUTHCOM--------
FOR BAC INFORMATION AND SUPPORT CONTACT:
DSN 312.421.6342,
Ms. Linda.s.donaldson4.civ@mail.mil

MANDATORY DEPLOYED UPL TRAINING on QC/PACK/SHIP SPECIMENS:

ONLINE UPL CERTIFICATION TRAINING FOR DEPLOYED AREAS:
https://sr2.army.mil/
Email: usarmy.knox.hqda-dcs-g-1.mbx.acsap-upl@mail.mil.

164 Views  Tags: bac, bac manager, bacr
Military Urine Collection Flow Chart

- Soldier provides ID card to the UPL; UPL verifies Soldier’s identity; UPL determines specimen number against collection documentation
- Soldier removes excess outer garment (if not removed)
- UPL removes new bottle from the specimen box and places ID card in the appropriate slot that matches the Soldier’s specimen number
- In full view of observer, UPL hands specimen bottle (and offers wide-mouth cup) to Soldier
- Soldier and observer move to the latrine, keeping bottle in full view of
- In latrine, Soldier washes hands with WATER ONLY
- Soldier voids into the specimen bottle or wide-mouth cup in full view of observer
- Observer must see urine directly leaving Soldier’s body and entering specimen bottle or wide-mouth cup
- If Soldier uses wide-mouth cup, Soldier pours urine into specimen bottle in full view of observer (minimum 30mls, 45mls preferred)
- Soldier puts cap on specimen bottle in full view of observer; Soldier will ensure the specimen bottle is dry and discards the wide-mouth cup (if used)
- Soldier will wash and dry hands, keeping bottle in full view of observer
- Soldier will walk in front of the observer back to the UPL’s desk, keeping bottle in full view of observer
- Soldier hands specimen bottle to the UPL or places bottle on UPL collection table as directed by UPL
- UPL verifies cap is tight, the bottle is dry, looks for signs of adulteration, ensures specimen bottle has a minimum of 30mls (45mls preferred) and then places back on collection table
- While UPL is holding the specimen bottle on the table, the observer will ensure the specimen bottle cap is tight, in full view of the UPL & Soldier. UPL ensures the secondary review is noted on the testing register
- UPL removes Soldier’s ID card from specimen box; UPL reviews the back of the ID card to verify Soldiers DoD ID matches number listed on the testing register, DD Form 2624, and bottle label preferred
- UPL allows Soldier to view the back of the ID card to verify DoD ID matches number listed on testing register, DD Form 2624, and bottle label (UPL maintains custody of ID card)
- Soldier initials the bottle label
- UPL places initialed label on specimen bottle
- UPL places tamper evident tape across the top of the specimen bottle
- UPL initials the specimen bottle
- UPL places specimen in the appropriate slot in the box
- Observer prints and signs name on the testing register
- Soldier signs testing register
- UPL returns ID card to Soldier