

Unit Prevention Leader (UPL) Certification Training



Participant Guide

August 2022

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UNIT PREVENTION LEADER CERTIFICATION COURSE

AGENDA

Day One:		
Welcome / Introductions / Course Overview UPL Qualifications / Resources		
UPL Roles and Responsibilities		
Pre-Collection Tasks		
Smart Testing / Testing Codes		
Prohibited Substances and Special Tests		
Limited Use Policy		
Preparation to Conduct Drug Testing		
Drug Testing Program (DTP Lite)		
Collection: Check-In the Soldier		
Collection Procedure		
Check-Out Process		
Day Two:		
Post Collection- Quality Control		
Post Collection- Storage / Packaging /Shipment		
FTDTL Procedures / Testing / Discrepancies		
Post Collections Results and Records Management		
Practical Exercise		
Final Exams		
End of Course Survey		

Unit Prevention Leader Course Acronym List

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

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





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

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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)

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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

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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 AR 600-85
- · Participant Guide
- DoDI 1010.16





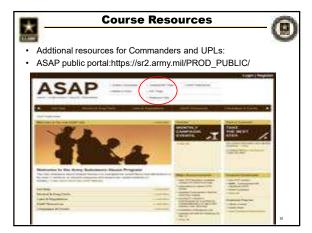


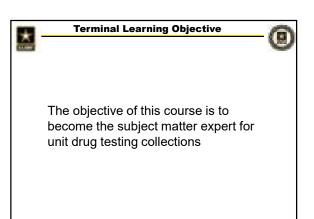


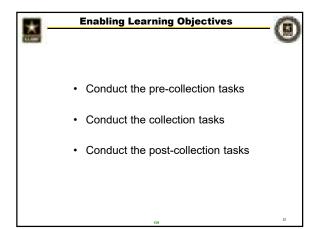
UPL Qualifications

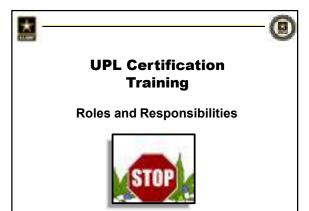


- · E5 or above
- Be designated on Unit Commander's appointment orders
- Successfully complete UPL Certification Training
- · Possess unimpeachable moral character
- Not currently enrolled in the Rehabilitation Program
- No investigations, no alcohol or drug-related incidents, and no SUDCC enrollment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











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

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Roles and Responsibilities



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 DoDI 1010.01 DoDI 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 Standing 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

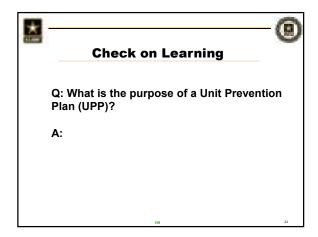
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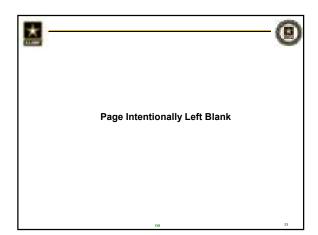


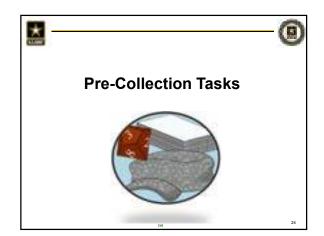
Lesson Summary



- Components of ASAP Program
- · Commanders Responsibilities
- UPL Duties
- · USAP SOP update is required









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

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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)



Smart Testing



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

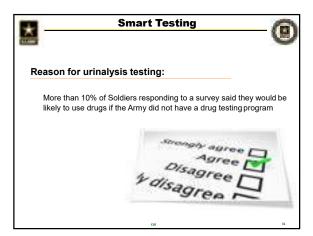


Smart Testing



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





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



Smart Testing Techniques



- · 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



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 ATest

 - Soldiers watch all of your actions as a UPLYou 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



Smart Testing Techniques cont.

- · All Soldiers selected must be tested
- · Don't stop testing because it is the end of the duty
- · 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



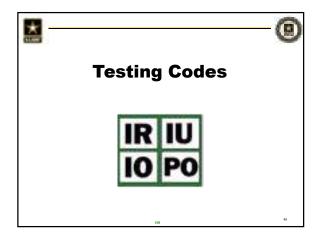
Smart Testing

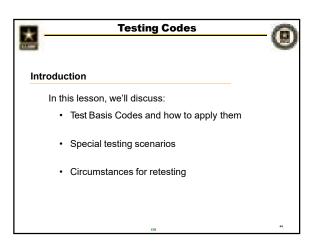


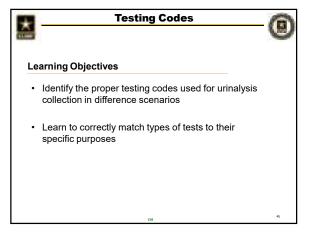
We just discussed the final set of Smart Testing techniques:

- · 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













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

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Testing Codes



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

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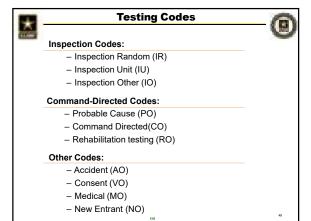
Testing Codes



Categories of Testing Codes

There are (3) different categories that make up the **ten** testing codes

- Inspection
- Command Directed
- Other







Inspection Codes

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

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Testing Codes



Inspection Codes

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"





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 Codes



Inspection Codes

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



Testing Codes



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

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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



Testing Codes



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



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Testing Codes



Command-Directed Codes

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







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

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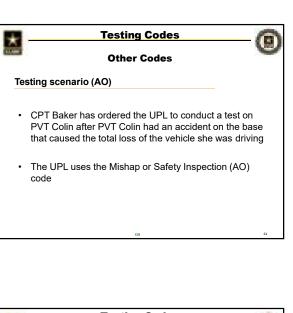
Testing Codes

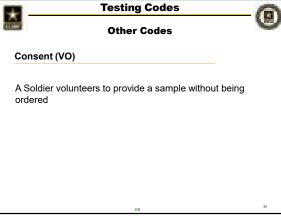


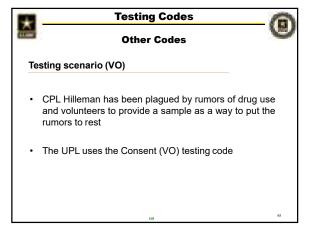
Other Codes

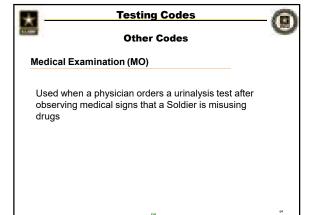
Mishap Or Safety Inspection (AO)

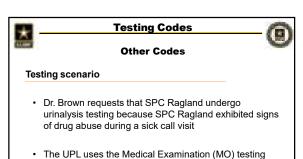
Testing after a Soldier is involved with an accident that destroys property or causes injuries to personnel



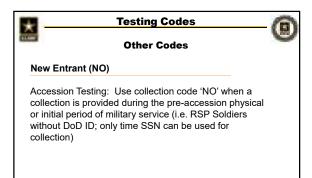








code





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:





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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 Divinorium, Jimson Weed, etc)
- Prescription or non-prescription drugs and medication that are used contrary to intended medical purpose or dosage
 Distance purpose and approach by US Food and Drug Administration
- 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 (eg. designer drugs)
- Illicit use of chemicals, propellants, or inhalants (huffing)

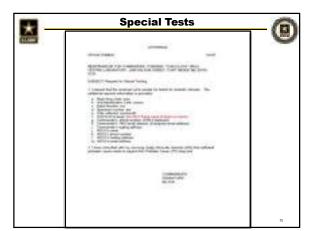


Special Tests



Steroid Testing

- Commander must complete a memorandum requesting that a specimen be tested for <u>steroids</u>
- 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 <u>specific drugs that are not</u> 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



Special Testing 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

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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

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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:

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Limited Use Policy





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



Limited Use Policy



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



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Limited Use Policy



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



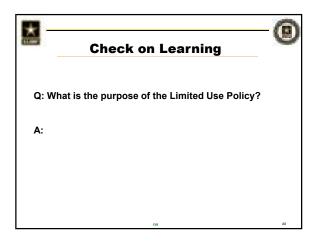
Limited Use Policy

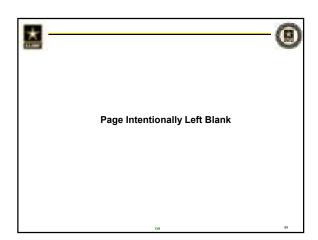


Separation Policy

- 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

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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

Preparation To Conduct Drug 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



Preparation To Conduct Drug Testing



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





Preparation To Conduct Drug Testing



Individual Roles and Responsibilities

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



Preparation To Conduct Drug Testing



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





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





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



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





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



Preparation To Conduct Drug Testing



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



Preparation To Conduct Drug Testing



How to perform a latrine inspection

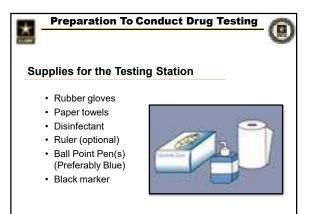
Select a latrine and post a sign on the door to indicate the latrine is closed to the public

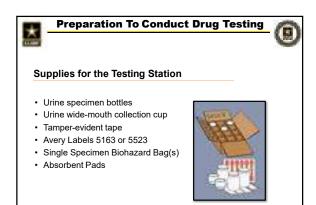


Remove cleaning supplies, check the area thoroughly – including the sink, floor, and around the toilet to ensure there are no potential adulterants













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

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Urinalysis Documents



DD Form 2624 Specimen Custody Document

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





Urinalysis Documents

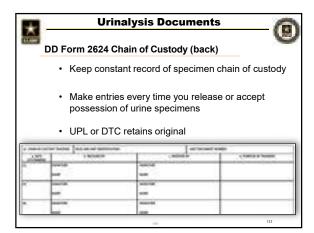


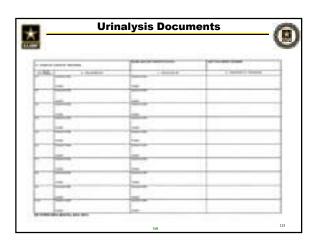
DD Form 2624 (front)

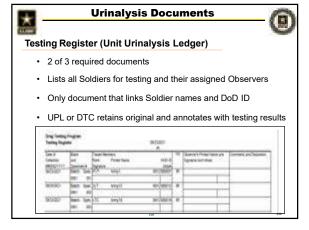
- The front lists DoD ID of Soldiers selected to test and information about the test
- UPL or DTC retains original

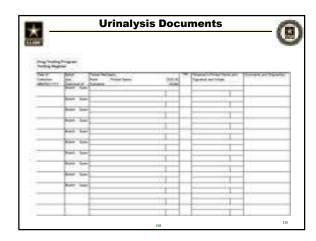


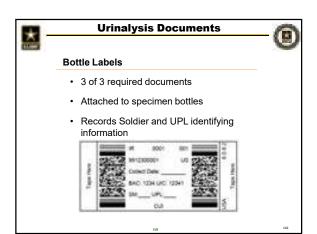
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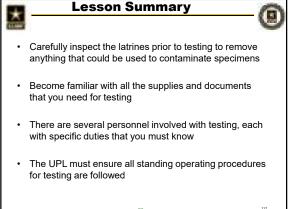




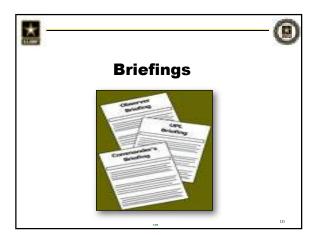


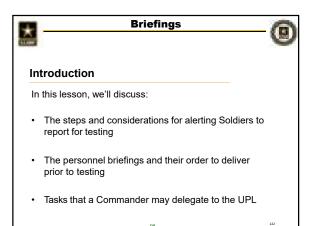


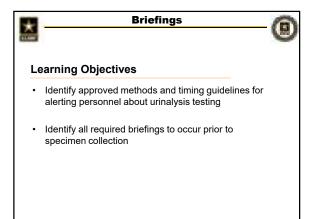
















Learning Objectives- cont.

- 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



Briefings



Required Urinalysis Briefings

- · Observer Briefing
- · Commander's Briefing
- UPL Unit Briefing



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Briefings



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



Briefings



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



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



Responsibilities of the Observers



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



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Responsibilities of the Observers



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





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

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Briefings



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



Briefings



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

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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

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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

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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



Lesson Summary- Briefings



- 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

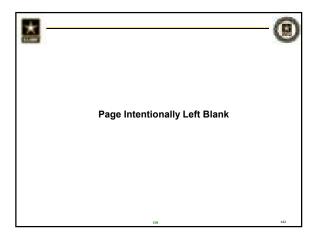


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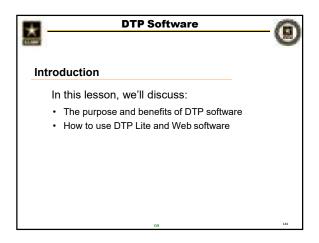


Q: What are the three required briefings that must occur prior to collection?

A:









DTP 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

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DTP Software



Overview of DTP Software

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



DTP Software



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



DTP Software



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.



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

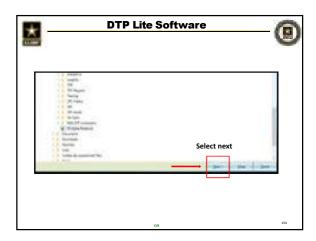


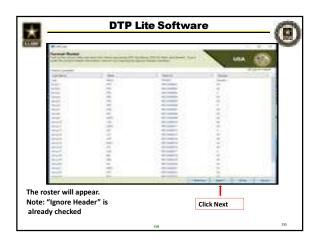


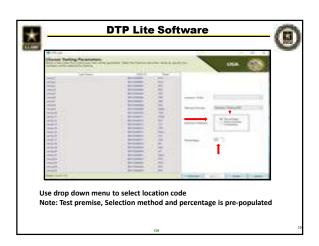


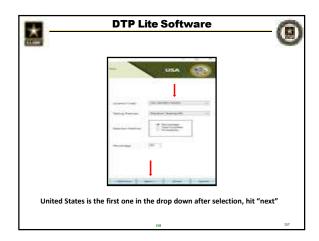


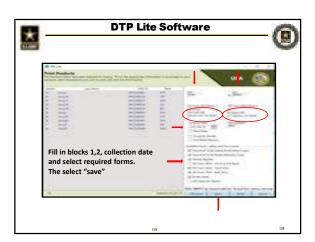


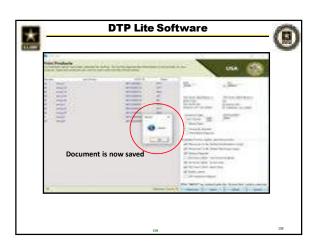




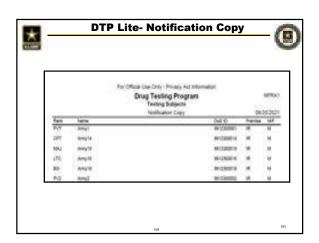


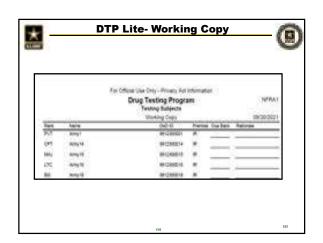


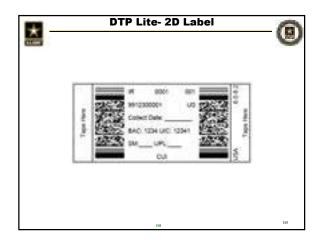


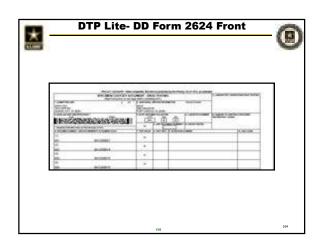


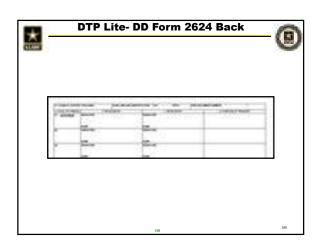


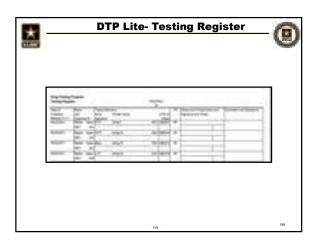


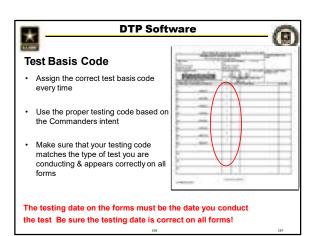










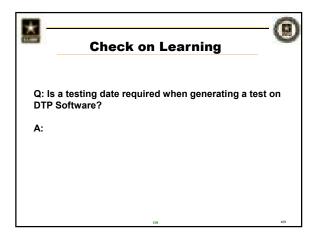


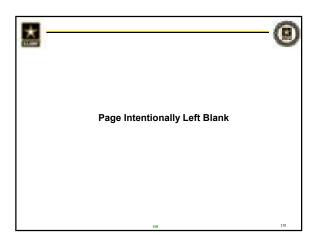


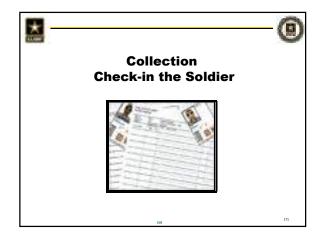
Lesson Summary- DTP Software



- 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











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

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Check-In the Soldier



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 proper note discrepancies
- Distinguish correct annotations from incorrect annotations



Check-In the Soldier



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

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Check-In the Soldier



- 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

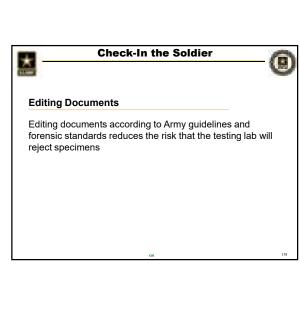


Check-In the Soldier



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







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

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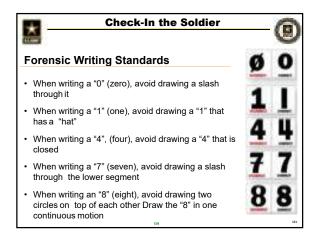


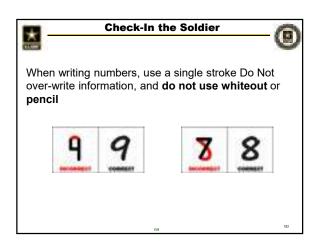
Check-In the Soldier

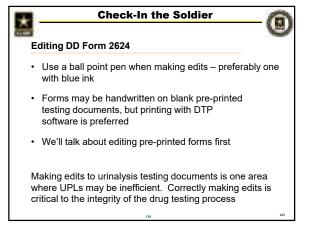


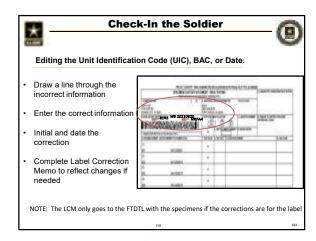
Writing numbers

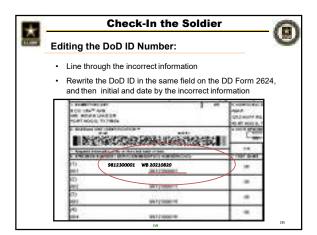
- The UPL must follow forensic standards when making handwritten edits to urinalysis testing forms
- Incorrect edits may render the test invalid during board proceedings or if challenged by SJA

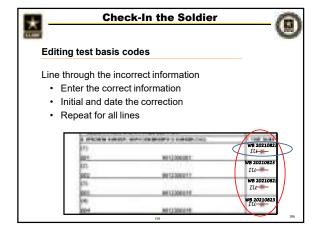


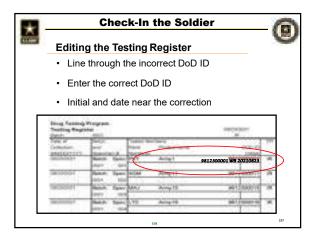


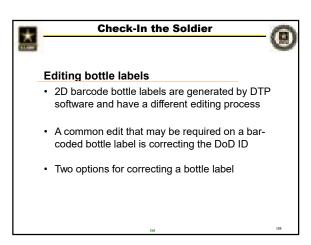


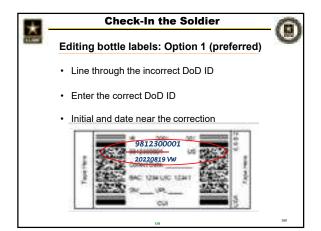


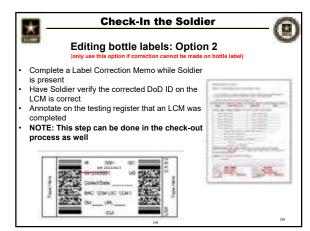
















Handwritten Forms

- 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



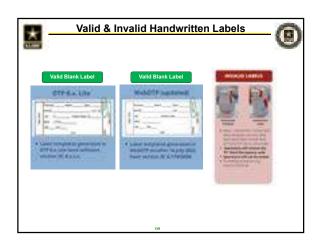
If a handwritten date is used, the ONLY authorized format is

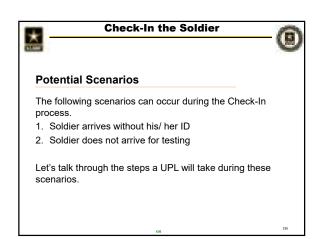
YYYYMMDD

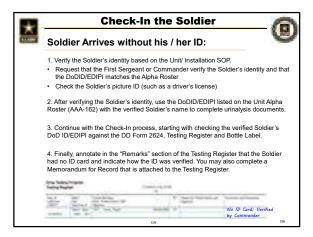
- Must be no more than nine months prior to the received date by the FTDTL
 If the date is more than nine
- months prior to the received date it will be considered invalid and the collection date will default to the date the FTDTL receives the
- specimen Incorrect written format of the date will results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

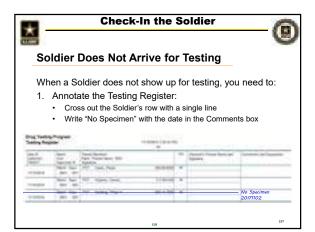
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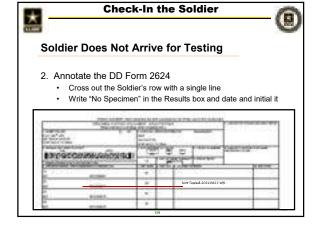


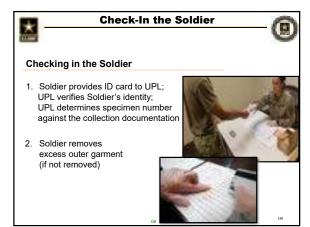














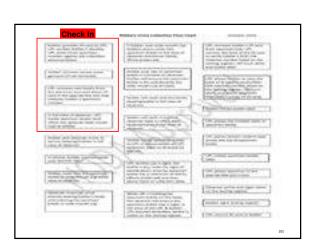


Checking in the Soldier cont.

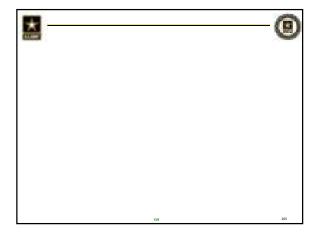
3. UPL removes new bottle from the specimen box and places ID card in the appropriate slot that matches Soldier's specimen number



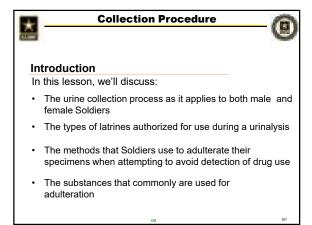
4. In full view of Observer, UPL hands the unlabeled specimen bottle (and offers the optional wide-mouth cup) to the Soldier, in full view of the observer



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Check on Learning	
Q: What is considered an invalid handwritten label?	
A:	-
A.	
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n	
Check on Learning	
Q: Why would separate sets of documents be helpful?	
A:	-











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

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Collection Procedure



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





Collection Procedure



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)



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7. The Soldier voids into the specimen bottle or wide-mouth cup in full view of the observer





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

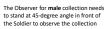


Collection Procedure



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







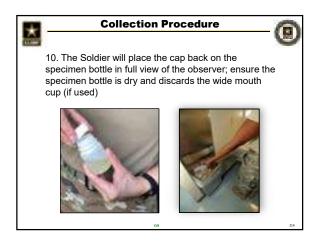


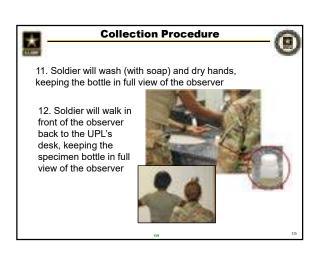
Collection Procedure

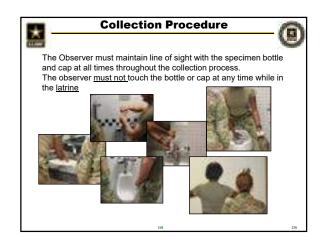


9. If the Soldier uses a wide-mouth cup, the Soldier pours the urine into the specimen bottle in full view of the observer (minimum 30mls, 45mls preferred) over the commode













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

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Collection Procedure



Types of Latrines

Commode:

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



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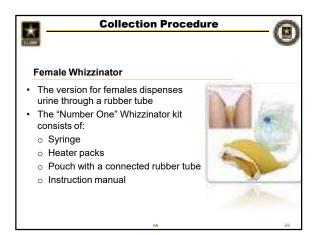
Collection Procedure

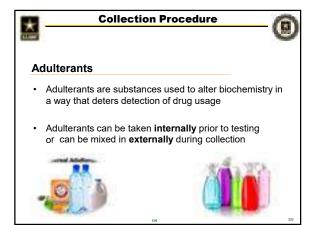


Adulteration

- 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**











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



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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

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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



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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



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Collection Procedure



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





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Collection Procedure



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

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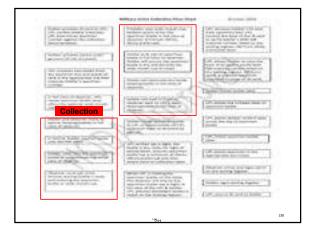
Observer must not allow any Soldier to provide a sample out of their direct view (behind a closed door) for any reason

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



cut





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









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



Check-Out Process



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



Check-Out Process



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





Check-Out Process



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

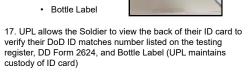
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mount. New	Edward Blick	anjana	Joe Enforcer Joe Enforcer	Z rd review of bottle complet





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



cut

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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.

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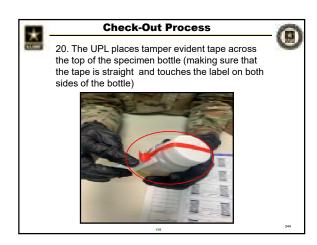
Check-Out Process

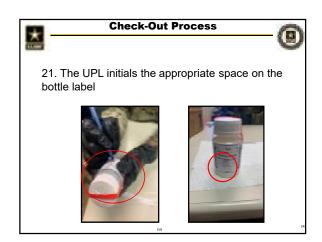


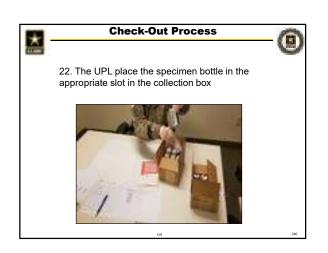
19. The UPL places the label on the specimen bottle



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- $23. \ \ \text{The UPL instructs the } \textbf{Observer} \ \ \text{to print name and signature on the Testing Register}$
- 24. The UPL instructs the Soldier to sign the Testing Register



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Check-Out Process



25. The UPL returns the ID Card to the Soldier



The Soldier can now return to duty



Check-Out Process



- 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







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



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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

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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



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Potential Scenarios

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

- •Reporting suspected adulteration
- •Insufficient volume
- •TET breakage



Check-Out Process



Reporting Adulteration: UPL Suspects

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

- 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
- The Commander verifies the evidence of possible adulteration and, if possible, consults the legal advisor (The Commander will not touch the specimen bottle)



Check-Out Process



Reporting Adulteration: UPL Suspects

- 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
- 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





Reporting Adulteration: Observer Suspects

If an **Observer** suspects a specimen has been adulterated, the following steps must occur in order:

- 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



Check-Out Process



Reporting Adulteration: Observer Suspects

- The Commander may then pursue testing the Soldier again this time, under Probable Cause – and order a different Observer to witness the collection
- 6. 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
- 7. The UPL annotates the circumstance for the second specimen on the Testing Register



Check-Out Process



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



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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:

- UPL instructs the Soldier to return to the latrine with the Observer and dump the specimen
- 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



Check-Out Process



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
- UPL uses the original DD Form 2624 entries when the Soldier provides and adequate sample



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Check-Out Process



To annotate documents for inadequate specimen volume:

Write in the Remarks section of the Testing Register: "1st attempt – short sample; 2nd attempt – sufficient volume"

Use original entries on the Testing Register and DD Form 2624 Do not make any additional annotations



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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 DP Form 2624 at the unit level.





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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

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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

Broken Sea



Specimen will no

Incorrect Method



Specimen may be teste



Specimen will be tested if LCM is complete

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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



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Lesson Summary- Check Out



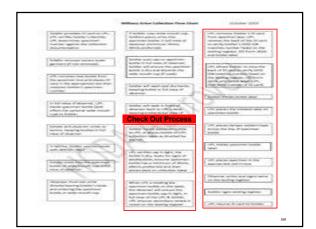
- Follow all the check-in steps in the correct order as defined in AR 600-85 for every Soldier
- Remember how to handle check-in for a Soldier who does not have a military CAC
- You should change your gloves every 2 hours during urinalysis collection
- Make sure that you apply the TET correctly and initial 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.

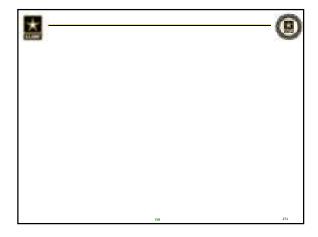




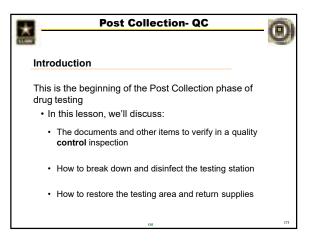
Check on Learning

Q: What does the Soldiers initial on the bottle label signify?

A:









Post Collection- QC



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

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Post Collection- QC



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

Version



Post Collection- QC

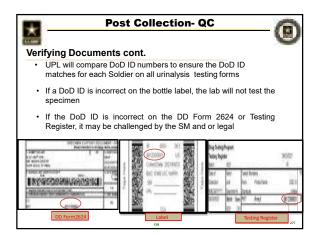


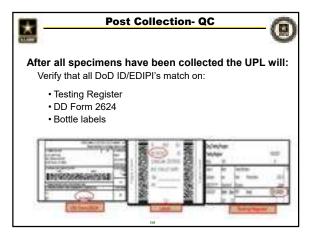
Verifying Documents

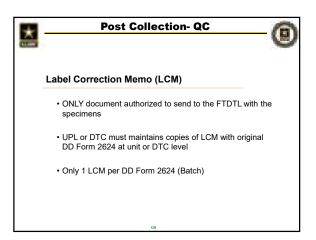
- Deployed UPLs, USAR, and direct-ship States for ARNG, are responsible for conducting a quality control inspection before shipping specimens for testing
- In garrison or centralized ship States for ARNG, you hand carry or mail specimens to the local ASAP office
- You may be required to assist in packing and shipping

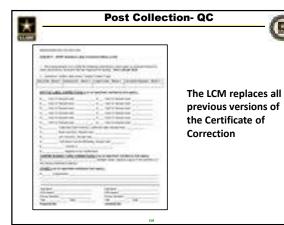
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Post Collection- QC



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)

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Post Collection- QC



Bottle labels must show the following information:

- Collection date, if handwritten must be in YYYYMMDD 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)

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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.



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

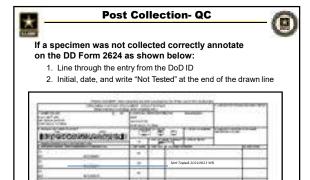
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Post Collection- QC



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





Post Collection- QC





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

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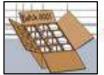
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Post Collection- QC



Specimen bottle placement in the collection box

- Ensure the bottles are places 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









Post Collection- QC



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



Post Collection



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

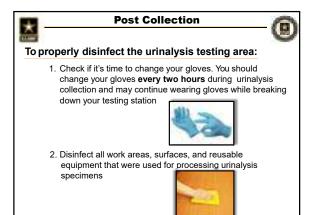


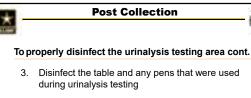
Post Collection



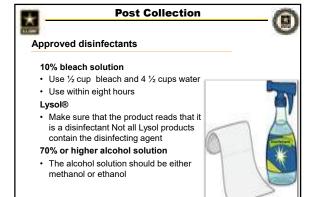
Remember to:

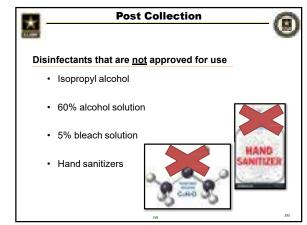
- · Return all supplies in accordance with the SOP
- Remove all signs
- · Remove all other materials
- · Remove the binder from the testing station
- Take the specimens and all testing paperwork with you when you leave





- Wipe each item clean with a paper towel after it is disinfected
- 5. Discard any used paper towels into the trash can







Post Collection



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

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Post Collection



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

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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

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Lesson Summary



- Make sure that you have checked that the tamperevident 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

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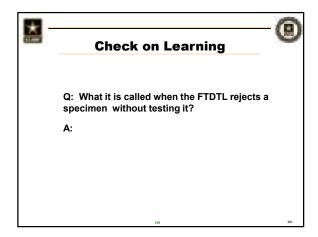
Lesson Summary

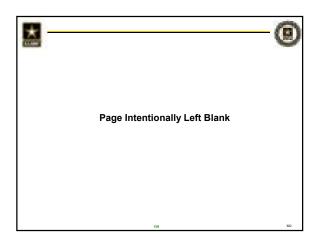


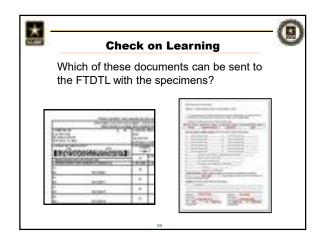
- Make sure that the chain of custody is complete and correct
- Make sure that every entry on the DD Form 2624 has an associated collected specimen in the collection box
- Be sure to disinfect the urinalysis testing table when you are finished and leave the testing area as you found it

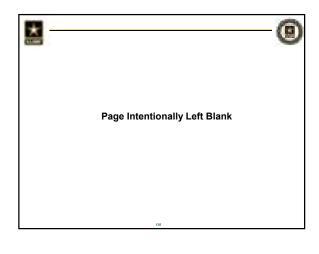
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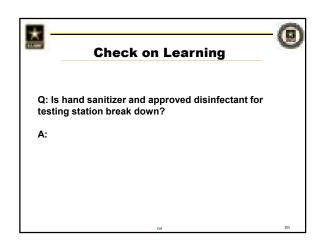
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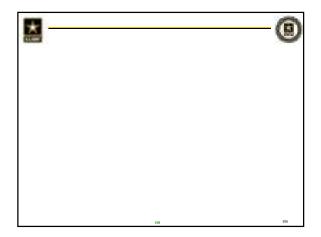




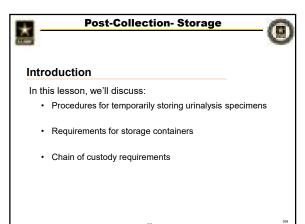


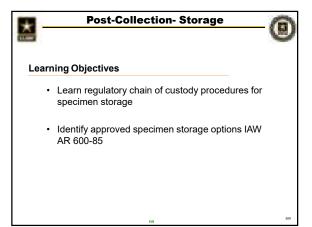














Post-Collection-Storage



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 FTDTL (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



Post-Collection-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



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Post-Collection-Storage



Approved Storage Containers- Filing Cabinet

- Must weigh at least 500 pounds or be attached to the facility with a chain or holts.
- 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





Post-Collection-Storage



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





Post-Collection-Storage



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)

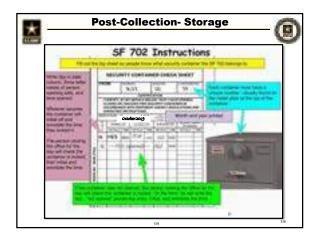


Post-Collection-Storage



SF-702 Security Container Check Sheet







Post-Collection-Storage



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

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Post-Collection- Chain of Custody

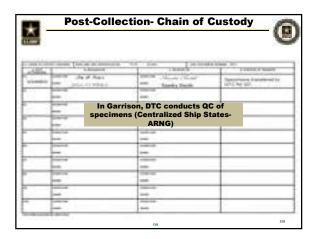


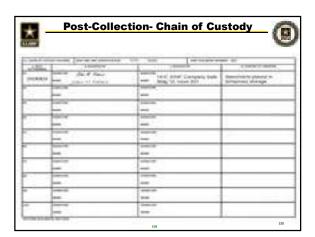
Documenting chain of custody

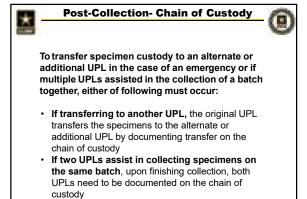
Ensure the BAC, UIC and Document Number fields on the back of DD Form 2624 are filled-in

- 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

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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)



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







Post-Collection- Packaging



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



Post-Collection- Packaging



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

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Post-Collection- Packaging



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

-

Post-Collection- Packaging



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)

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Post-Collection- Packaging



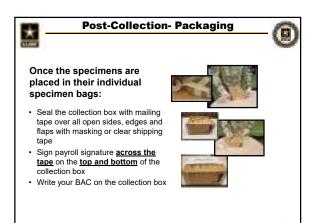
Packaging Materials

- Single specimen bags as secondary container and small absorbent pads (appx 100 ml)
- Large absorbent pads (300-500ml) to contain leakage from specimens in a specimen box during extraordinary situation when single specimen bads 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

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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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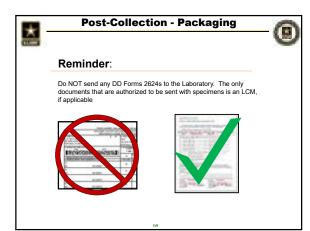
Post-Collection- Packaging



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

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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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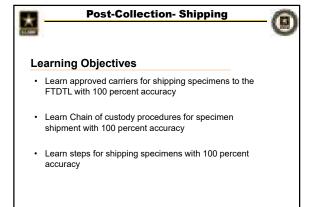
Videos



- <u>https://youtu.be/YHwnhr3PxjY</u> Navy Drug Screening Lab (Part 1)
- https://www.youtube.com/watch?v=gXVRTavSliY Navy Drug Screening Lab (Part 2)
- https://www.youtube.com/watch?v=EcJTac6Hxk8 Navy Drug Testing Lab
- https://youtu.be/h85s0rQj7fs Drug Testing Myths









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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Post-Collection-Shipping



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



Post-Collection-Shipping



Chain of Custody

Shipping after removing from storage

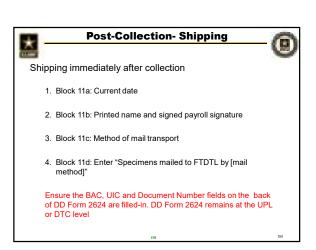
- 1. Block 11a: Current date
- 2. Block 11b: Printed name and signed payroll signature of UPL
- 3. Block 11c: Method of mail transport
- Block 11d: Enter "Specimens mailed to FTDTL by (mail method)

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

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Post-Collection-Shipping



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



Post-Collection-Shipping



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

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FTDTL Procedures / Testing / Discrepancies





FTDTL Procedures / Testing / Discrepancies



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



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FTDTL Procedures / Testing / Discrepancies



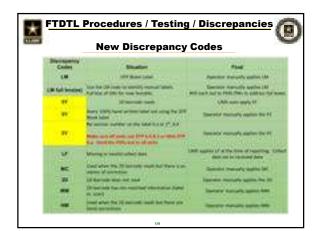
Laboratory Procedures: Fatal Discrepancies

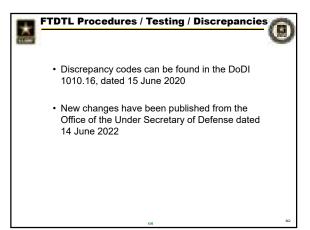
- Occur when a specimen does not meet processing guidelines in a way that would invalidate the test results, such as insufficient specimen amount
- The FTDTL destroys the specimen without testing it

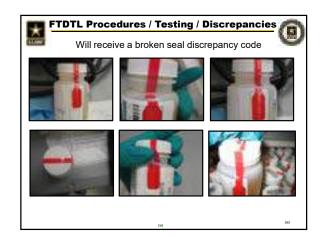
Laboratory Procedures: Non-Fatal Discrepancies

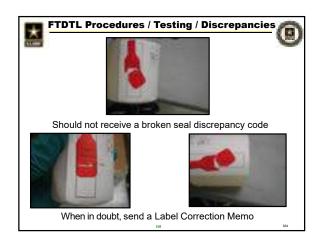
- Occur when a specimen does not meet processing guidelines in a way that would not invalidate the test results but should have been corrected by the UPL or DTC, such as invalid test basis codes
- The FTDTL tests specimens with non-fatal discrepancies

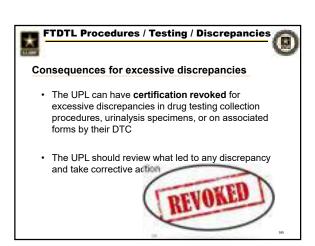
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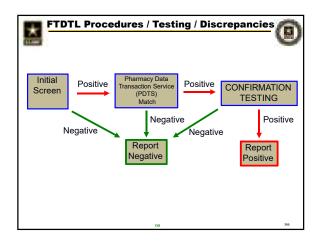














FTDTL Procedures / Testing / Discrepancies



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

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FTDTL Procedures / Testing / Discrepancies			
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Initial test analyte	Initial test cutoff	Confirmatory test analyte	Confirmatory test cutoff concentration
Marijuana metabolites (THCA)	50 ng/mL	THCA	15 ng/mL
Cocaine metabolite (Benzoylecgonine)	150 ng/mL	Benzoylecgonine	100 ng/mL
Codeine/Morphine	2,000 ng/mL	Codeine Morphine	2,000 ng/mL 2,000 ng/mL
Hydrocodone/Hydromorphone	300 ng/mL	Hydrocodone Hydromorphone	100 ng/mL 100 ng/mL
Oxycodone/Oxymorphone	100 ng/mL	Oxycodone Oxymorphone	100 ng/mL 100 ng/mL
6-Acetylmorphine	10 ng/mL	6-Acetylmorphine	10 ng/mL
Phencyclidine	25 ng/mL	Phencyclidine	25 ng/mL
Amphetamine/Methamphetamin	e 500 ng/mL	Amphetamine Methamphetamine	250 ng/mL 250 ng/mL
MDMA/MDA	500 ng/mL	MDMAMDA	250 ng/mL 250 ng/mL



FTDTL Procedures / Testing / Discrepancies



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





Post Collection- Results & Records



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

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Post Collection- Results & Records



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

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Post Collection- Results



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



Post Collection- Results

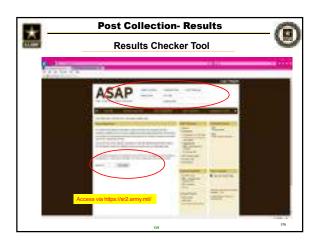


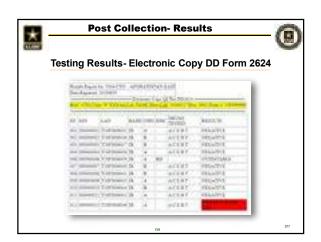
Results Checker Tool

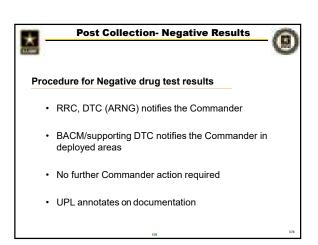
- Available on the ASAP Web site for only CENTCOM-deployed UPLs/CDRs only (using BACs that begin with a CT)
- Provides the following information:
 - Testing date
 - Any discrepancies
 - Number of specimens tested
 - Whether results are available

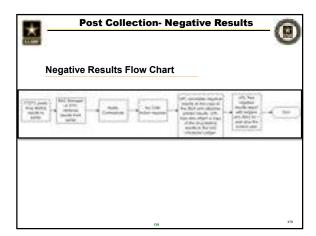


- Does NOT list positive/negative results on specimens
- Actual results only available on FTDTL portal Contact listed BAC Manager for actual result reports and details











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

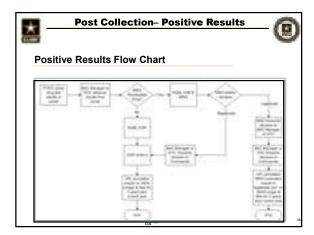


Post Collection- Positive Results



Commander actions for positive drug tests

- Consult SJA prior to initiating adverse actions against a Soldiers 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





Post Collection- MRO Reviews



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

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Post Collection- MRO Reviews



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

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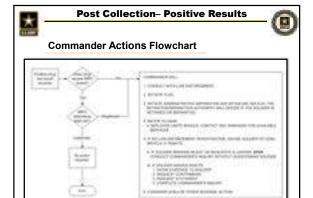
Post Collection- MRO: Non-Reviewable



Non-reviewable drugs

- THC
- Cocaine
- MDMA (Ecstasy)
- MDA
- Heroin
- PCP
- SYCAN (Spice)

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Post Collection- Records



Record Maintenance

- The Army's system for record maintenance is known as 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



- 600AActive Duty Personnel Alcohol and Drug abuse Testing Report Files - Positive Results
- PA: A0600-85DAPE
- · Destroy in CFA when 3 years old
- 600AActive Duty Personnel Alcohol and Drug abuse Testing-Report Files Negative Results

 600AActive Duty Personnel Month of the Control of th
- 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

 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



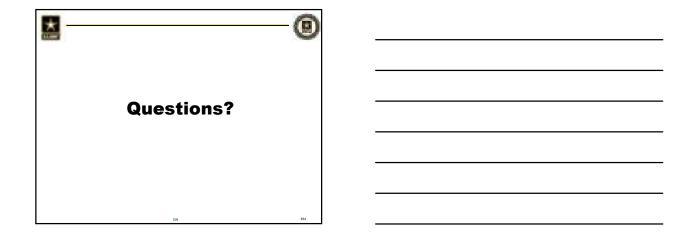
Post Collection - Records



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







OFFICE OF THE UNDER SECRETARY OF DEFENSE

4000 DEFENSE PENTAGON WASHINGTON, D.C. 20301-4000

June 14, 2022

MEMORANDUM FOR DIRECTOR, ARMY SUBSTANCE ABUSE PROGRAM
DIRECTOR, NAVY DRUG DEMAND REDUCTION PROGRAM
OFFICE
AIR FORCE FORENSIC DRUG PROGRAM MANAGER

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:
 - o LSD was first added to the routine drug testing panel in October 1987.
 - o 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.
 - o 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.

Drug	Tripler ¹	Meade ²	JAX ³	GL⁴	Lackland ⁵
Military Drug Test Rates (All Components)					
LSD / 2-oxo-3-hydroxy-LSD	5%	5%	8%	8%	5%
Source: U.S. Army Medical Information Technology Center			•		•
(USAMITC)					

¹ Aπny Drug Screening Laboratory, Tripler Army Medical Center, Honolulu, HI

Prepared by: CAPT Erin Wilfong, 571-236-1766

Office : ODDR

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

- 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%.

	EBF			
Approve:	100	Disapprove:	Other:	

Prepared by: CAPT Erin Wilfong, 571-236-1766

Office : ODDR



DEPARTMENT OF THE ARMY UNITED STATES ARMY NETWORK ENTERPRISE TECHNOLOGY COMMAND 2133 CUSHING STREET FORT HUACHUCA AZ 85613-7070

NETC-CSD

of July 2021

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:

- a. Department of Defense Instruction (DoDI) 8510.01, Risk Management Framework for DoD Information Technology, 12 March 2014.
- b. Defense Health Agency, Software Certification for Drug Testing Program (DTP) Lite version 6.x
- 2. Drug Teşting 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.
 - 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.

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CONTROLLED UNCLASSIFIED INFROMATION

CONTROLLED UNCLASSIFIED INFROMATION

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 DoDIN-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 DoDIN-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. BARRET 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

Observer's Briefing April 21, 2022

- 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. Artcle107: 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.

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 Prir	nted Name	UPL's Signature	Date

Controlled Unclassified Information (CUI)

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:

- You were listed on a random or unit sweep drug test and you were not available for testing
- 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 methamphetamines, 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.

Controlled Unclassified Information (CUI)

Controlled Unclassified Information (CUI)

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 OxyCotin 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.

Controlled Unclassified Information (CUI)

UPL's UNIT BRIEF Updated October 2018

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

BAC/IDN - Block 3	Branch/UIC - Block 3	Collect Date - Block 4	Document Number - Block 5

BOTTLE LABEL CORRECTIONS (List	t all specim	en number(s) that apply) <u>:</u>
# 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:
# DoD ID Should read:	#	DoD ID Should read:
#: Collection Date incorrect	t, collection o	date Should read
#: Base incorrect, Should re	ead	
#: UIC incorrect, Should re-	ad	
#: Test Basis Incorrect/Mis	sing, should	read
#: Volume is		.
#: Appears to be Adul	terated.	
TAMPER EVIDENT TAPE CORRECTION	ONS (List a	II specimen number(s) that apply) <u>:</u>
#	Multip	ole 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:Phone Number:		Print Name:Phone Number:
Title: Date:		Title: Date:
Prepared By		Validated By

CUI

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 redesignated 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.

Angel L. Acevedo, angel.l.acevedo.civ@mail.mil,

Deployed ASAP--CDRs, UPLs, BACMs: in-Theater BACM Contact List VolP 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,

Com. 210.295.6342, Cell 210.332.3311 Ms. Linda.s.donaldson4.civ@mail.mil

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

https://www.milsuite.mil/book/groups/ard-asap-deployed-upl-training https://www.milsuite.mil/book/docs/DOC-318326

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, bacm

Military Urine Collection Flow Chart

