

**INSTALLATION STANDING OPERATING PROCEDURES (SOP)
FOR
THE MILITARY URINALYSIS DRUG TESTING PROGRAM**

IMME-HRS

3 March 2014

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INSTALLATION STANDING OPERATING PROCEDURES (SOP)
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- I. **PURPOSE:** This SOP provides the protocol and responsibilities for the collection, secure handling, and shipping of urine specimens which will be tested to determine the presence of illegal substance abuse. This SOP is a guide to assist the Battalion Prevention Leaders (BPL) and Unit Prevention Leaders (UPL) in carrying out the Commander's urinalysis testing program for their unit. These procedures are to be used in conjunction with the references listed in paragraph 6 of this SOP.

- II. **APPLICABILITY:** This SOP applies to all military personnel assigned to Fort Meade or tenant units who utilize the Army Substance Abuse Program (ASAP). Deviation from or modification of the procedures set forth in this SOP is not authorized without the approval of the Garrison Alcohol and Drug Control Officer (ADCO) and the Office of the Staff Judge Advocate (OSJA). Requests for authority to deviate from, supplement, or modify any procedures set forth in the SOP may be submitted for consideration to the ADCO.

- III. **GENERAL POLICY:** The ASAP provides for both Alcohol and Drug abusers in the same counseling program. The facility at which these services are provided will be known as the ASAP within the Directorate of Human Resources (DHR). Commanders and supervisors must confront suspected alcohol or other drug-abusing individuals under their supervision with the specifics of their behavior, inadequate performance, or unacceptable conduct. Knowledgeable commanders and supervisors provide the necessary tools for motivating personnel to recognize the advantages of obtaining assistance. All levels of the chain of command must take aggressive action in identifying personnel, regardless of rank or grade if alcohol or other drug abuse is suspected.

IV. OVERVIEW: Detectable drug usage within the Army has been dramatically reduced over the years as a result of leadership, education, and aggressive urinalysis testing. Urinalysis testing is an important tool available to the commander to assist him or her in preventing drug abuse within their command. How urinalysis testing is implemented and managed within a command is crucial to the success of the program. The BPL and UPL are the key advisors to the commander concerning drug and alcohol abuse and play an important role in establishing and maintaining a credible urinalysis program for the command.

V. OBJECTIVES: The objectives of the ASAP are as follows:

- (1) Prevent alcohol and other drug abuse.
- (2) Identify alcohol and other drug abusers as early as possible.
- (3) Restore Soldiers to duty as early as possible.
- (4) Achieve maximum productivity; reduce absenteeism and attrition among Soldiers by preventing and controlling abuse of alcohol and other drugs.
- (5) Ensure that effective alcohol and drug abuse prevention and education is provided at all levels. This education must be included in all rehabilitation as a part of the ASAP.
- (6) Provide evaluation and research.

VI. REFERENCES:

- (1) DOD Directive 1010.1, "Military Personnel Drug Abuse Testing Program," 13 Sep 2012.
- (2) DOD Instruction 1010.16, "Technical Procedures for the Military Personnel Drug Abuse Testing Program," 10 Oct 2012.
- (3) AR 600-85, Army Substance Abuse Program, 28 Dec 2012.
- (4) Army Center for Substance Abuse Programs (ACSAP) Unit Prevention Leader (UPL) Handbook, version 3.

VII. RESPONSIBILITIES:

(1) Garrison Alcohol and Drug Control Officer (ADCO)

- i. Manage and monitor the drug and alcohol testing program. Responsible for the prevention, training, identification, referral, treatment and biochemical testing components of the program.
- ii. Coordinates drug testing requirements for the installation.
- iii. Ensures that a Soldier's DAMIS record is reviewed after receiving an illicit positive result and that the Soldier's company commander, as well as the first GO in the chain of command, is notified of all positive results in the Soldier's record.

NOTE: AR 600-85 makes reference to BPLs and UPLs. For the purposes of the SOP where applicable a standard of UPL will be utilized except where a BPL is the only person who may complete a task.

(2) Drug Testing Coordinator (DTC)

- i. Coordinates, administers, and monitors all aspects of the drug testing program for the installation.
- ii. Coordinates with UPLs and arranges for the collection of specimens.
- iii. Serves as subject matter expert on urinalysis collection and testing.
- iv. In conjunction with Office of the Staff Judge Advocate (OSJA), interprets DOD, Department of the Army (DA) and Major Army Command (MACOM) program guidance, regulations, and technical bulletins and develops local policies and procedures for implementation by unit commanders and the ADCO.
- v. Reviews all documentation and chain of custody documents associated with the collection procedure before the transport/shipment of specimens to the Forensic Toxicology Drug Testing Laboratory (FTDTL).

- vi. Prepares and transport specimens to the servicing FTDTL by hand carrying.
- vii. Serves as an instructor in presenting the drug testing procedures during the UPL certification course.
- viii. Reports all verified positive urinalysis results to include history of past results from the Drug and Alcohol Management Information System (DAMIS) to the appropriate authority (See APPENDIX K).
- ix. Collects, maintains, and reports statistical data on the drug testing program.
- x. Manage drug testing supplies and expenditures.
- xi. Coordinates and conducts annual inspections of each battalion-level unit to ensure regulations, policies, and standard operating procedures are adhered to during collection (see APPENDIX J).
- xii. Maintains drug testing records IAW AR 25-400-2.

(3) Battalion Commander

- i. Has overall responsibility for the drug and alcohol testing program including the selection and training of personnel.
- ii. Appoint an officer or NCO (E-5(P) or higher) on orders as the primary and alternate BPL. Ensure the individual meets AR 600-85 criteria outlined in paragraph 9-6.
- iii. Determines what code type of urinalysis testing will be conducted.
- iv. Assist the BPL in the development of a battalion substance abuse program SOP, review and sign it annually.
- v. Ensures notification roster is used to verify that each Soldier identified for testing provides a specimen.
- vi. Commanders will ensure their BPLs track Soldiers unavailable for testing due to leave, TDY etc. and develop procedures for testing

the Soldiers upon their return to duty. Urinalysis collection of new Soldiers assigned to the unit will be done within the first 30 days assigned to the unit.

- vii. Ensures testing facilities are available to include an appropriate number of latrines, a work area for the UPL and a holding area for Soldiers until the collection process is complete.
- viii. Ensures an Officer/NCO (E-5 or higher) is present in the holding area to supervise any Soldier(s) unable to complete the testing process.
- ix. Orders unit to take test at unit briefing (See APPENDIX Y).
- x. Uses the Army Drug Testing Program (DTP) to randomly select personnel, (mandatory method of selection) or to test Units. (See APPENDIX M). Commanders retain the right to conduct additional testing for command directed, reasonable suspicion, and mandatory requirements. Prior to command directed testing based upon reasonable suspicion, commanders must contact the Staff Judge Advocate and create a Memorandum for Record (MFR) to ensure that there is sufficient evidence to warrant the sample collection.
- xi. Conducts urinalysis testing IAW AR 600-85.
- xii. Ensure **random** selection and urinalysis testing is conducted at a rate of 4 - 5% of the battalion strength weekly, detailing different companies to conduct the collection each week. Unit sweeps (IU) testing will not exceed 75% of the inspection random (IR) specimens submitted for testing annually. (For example: if there are 600 Soldiers in a Battalion the Commander may only conduct a unit sweep on 450 of them). When the IU code is utilized the test must be on a clearly defined subunit (i.e., company, platoon, or section).

NOTE: For companies that are not assigned or attached to a battalion, the company commander will performed the duties of the battalion commander.

- xiii. Ensure Soldiers identified in AR 600-85, chapter 4, paragraph 4-8 submit to a urinalysis specimen once in each fiscal year. If the individual(s) has not been ***randomly*** selected by the 10th month of the fiscal year, the UPL will select them by using the inspection other (IO) testing premise.

- xiv. Selects observer(s) using the following criteria:
 - 1. Must be E-5 or above.
 - 2. Must be the same sex as personnel being observed.
 - 3. Must select no more than three observers per UPL.
 - 4. Not currently enrolled within ASAP rehabilitation program or currently under investigation for any substance abuse related offense.

- xv. Implements prevention and education initiatives IAW AR 600-85. All Soldiers will receive a minimum of four hours of alcohol and other drug awareness training per year, all training must be documented and sign-in rosters utilized. A copy of the sign-in roster along with the cover sheet will be provided to the ASAP staff within 5 working days. Commander or UPL will provide at least one hour of alcohol or drug training per quarter for all Soldiers assigned.

- xvi. Ensures all newly assigned Soldiers are briefed on drug and alcohol policies and services within 30 days of arrival to the unit, all briefings must be documented with a sign-in roster.

- xvii. Ensure company commanders refer any Soldier to the ASAP within 5 duty days of notification of a positive urinalysis for illicit drug use or alcohol-related misconduct by completing DA Form 8003 (Army Substance Abuse Program (ASAP) Enrollment).

- xviii. Immediately report all offenses involving illegal possession, sale, or trafficking in drugs or drug paraphernalia to the CID. Battalion commanders will ensure the BPL maintains a copy of all completed DA Form 8003s for every alcohol and drug incident.

- xix. Ensure separation initiation and final disposition for all Soldiers with an illicit positive drug test and Soldiers involved in 2 serious incidents of alcohol-related misconduct within 12 months is reported to the ADCO. Complete and submit DA Form 4833 IAW AR 190-45.
- xx. Ensure BPLs inspect company level UPLs at least once a year.

(4) Company Commander

- i. The company commander will develop a completely random drug testing program with guidance from and approval by the battalion-level commander.
- ii. Assign an officer/NCO (E-5 or higher) on orders as primary and alternate UPLs. Ensure the individual meets AR 600-85 criteria that is outlined in paragraph 9-6.
- iii. Determines what code type of urinalysis testing will be conducted.
- iv. Assist the UPL in the development of a unit substance abuse program SOP and sign it annually.
- v. **Units that are not structured as a battalion and are a sole company with unit strength of 50 or less may randomly select and collect a minimum of 8 - 10% twice per month.**
- vi. Commanders will ensure their UPLs track Soldiers unavailable for testing due to leave, TDY, etc. and develop procedures for testing the Soldiers upon their return to duty. Urinalysis collection of new Soldiers assigned to the unit will be done within the first 30 days of arrival.
- vii. Ensures testing facilities are available to include an appropriate number of latrines, a work area for the UPL and a holding area for Soldiers until the collection process is complete.
- viii. Ensures an officer/ NCO (E-5 or higher) is present in the holding area to supervise any Soldier(s) unable to complete the testing process.
- ix. Orders unit to take test at unit briefing (See APPENDIX Y).

- x. Uses the Army Drug Testing Program (DTP) to randomly select personnel, (mandatory method of selection) or to test Units. (See APPENDIX M). Commanders retain the right to conduct additional testing for command directed, reasonable suspicion, and mandatory requirements. Prior to command directed testing based upon reasonable suspicion, commanders must contact the Staff Judge Advocate and draft an MFR to ensure that there is sufficient evidence to warrant the sample collection.
- xi. Conducts urinalysis testing IAW AR 600-85.
- xii. Assists the Battalion commander in conducting urinalysis at a rate of 4 - 5% of the battalion strength per week.
- xiii. Selects observer(s) using the following criteria:
 - 1. Must be E-5 or above.
 - 2. Must be the same sex as personnel being observed.
 - 3. Must select no more than three observers per UPL.
 - 4. Not currently enrolled within ASAP rehabilitation program or currently under investigation for any substance abuse related offense.
- xiv. Implements prevention and education initiatives IAW AR 600-85. All Soldiers will receive a minimum of four hours of alcohol and other drug awareness training per year, all training must be documented and sign-in rosters utilized. A copy of the sign-in roster along with the cover sheet will be provided to the ASAP staff within 5 working days. Commander or UPL will provide at least one hour of alcohol or drug training per quarter for all Soldiers assigned.
- xv. Ensures all newly assigned Soldiers are briefed on drug and alcohol policies and services within 30 days of arrival to the unit, all briefings must be documented with a sign-in roster.
- xvi. Refers any Soldiers to the ASAP for evaluation within 5 duty days of notification that the Soldier received a positive urinalysis for illicit drug use or was involved in alcohol-related misconduct. If Soldiers are enrolled in the ASAP program, Commander will conduct rehabilitation testing at least once per month or as the rehabilitation team prescribes.

- xvii. Ensures Battalion Commander receives a copy of all completed DA Form 8003s.
- xviii. Immediately report all offenses involving illegal possession, sale, or trafficking in drugs or drug paraphernalia to the CID.
- xix. Commander will report to ADCO the initiation of separation and final disposition for all Soldiers with an illicit positive drug test and Soldiers involved in 2 serious incidents of alcohol-related misconduct within 12 months. In addition commanders must complete and submit DA Form 4833 IAW AR 190-45.
- xx. Ensure UPL is inspected at least once a year by one of the BPLs.
- xxi. Consult with the servicing legal office for all drug and alcohol related offenses.

(5) Battalion Prevention Leader (BPL)

- i. Serves as the battalion commander's primary advisor and point of contact for all ASAP matters, to include the drug testing program.
- ii. Utilizes the DOD Army Drug Testing Program (DTP) software (mandatory method of selection) for all drug-testing selections and ensures that the commander approves all lists of randomly selected Soldiers before notifying them to report for testing.
- iii. Supervise and provide technical guidance to UPLs.
- iv. Inspect and document inspections of company-level programs annually with coordination with the supporting installation DTC.
- v. Follow and adhere to the pre-collection, collection, and post-collection procedures outlined in AR 600-85, Appendix E.

NOTE: Once Soldiers have been selected for testing they will be placed in a controlled holding area with a non-testing officer/NCO (E-5 or above) as overseer. Soldiers should not be released from this holding area for any reason until after they have provided an adequate specimen.

- vi. Collection area should be quiet and away from the mainstream activities of the unit.
- vii. Ensures materials are received from the Drug Testing Collection Point (DTCP), are on hand, and organized at the collection test site.

- viii. Prepares materials in advance and ensures all aspects of the urine collection process is in accordance with this SOP.
- ix. Ensures all forms are complete, correct, and that all specimens are secured and stored properly until submitted to the DTCP as soon as possible (normally the same duty day).
- x. Advises the commander of any Soldier refusing to provide a specimen, attempting to contaminate the specimen, or any other irregularities or discrepancies (See APPENDIX K).
- xi. Ensures all observers (3 per UPL) follow guidance in AR 600-85.
- xii. Briefs unit personnel prior to conducting drug testing (See APPENDIX Z).

NOTE: UPL may, if necessity dictates, be both the observer and UPL.

- xiii. In coordination with the battalion commander, design and implement the battalion Substance Abuse Program SOP and unit prevention plan. Provide a copy, signed by the battalion commander to the local ASAP.
- xiv. Submit unit ASAP training records and sign-in roster to the ASAP staff within 5 working days.
- xv. Maintains DA Form 8003s on all drug and alcohol offenders within the Battalion.

(6) Unit Prevention Leader (UPL)

- i. Serves as the company commander's primary advisor and point of contact for all ASAP matters to include the drug testing program.
- ii. Assist the BPL with administering the battalion drug and alcohol testing program IAW AR 600-85.
- iii. Utilizes the DOD Army Drug Testing Program (DTP) software (mandatory method of selection) for all drug-testing selections and ensures that the commander approves all lists of randomly selected Soldiers before notifying them to report for testing.
- iv. Briefs observers (See APPENDIX X) to include a demonstration.

- v. Establishes specimen collection point and holding area for personnel to be tested.
- vi. UPL must designate a collection and holding area that can be controlled at all times.

NOTE: Once Soldiers have been selected for testing they will be placed in a controlled holding area with a non-testing officer/NCO (E-5 or above) as overseer. Soldiers should not be released from this holding area for any reason until after they have provided an adequate specimen.

- vii. Collection area should be quiet and away from the mainstream activities of the unit.
- viii. Ensures adequate number of tables and chairs are available for the collection team.
- ix. Ensures materials are received from DTCP, are on hand, and organized at the collection test site.
- x. Prepares materials in advance and ensures all aspects of the urine collection process is in accordance with this SOP.
- xi. Ensures all forms are complete, correct, and that all specimens are secured and stored properly until submitted to the DTCP as soon as possible (normally the same duty day).
- xii. Advises the commander of any Soldier refusing to provide a specimen, attempting to contaminate the specimen, or any other irregularities or discrepancies (See APPENDIX K).
- xiii. Ensures all observers (3 per UPL) follow guidance in AR 600-85.
- xiv. Briefs unit personnel prior to conducting drug testing (See APPENDIX Z).

NOTE: UPL may, if necessity dictates, be both the observer and UPL.

- xv. In coordination with the company commander, design and implement the company Substance Abuse Program SOP and prevention plan.
- xvi. Submit unit ASAP training records and sign-in roster to the ASAP staff within 5 working days.

(7) Observer.

- i. Each observer will receive a briefing and demonstration from the UPL and sign the Observer Memorandum prior to conducting a drug urinalysis test (See APPENDIX X).
- ii. Observer must see urine leaving the body and entering the bottle.
- iii. Ensures the chain of custody is not broken. (The observer will never take custody of a specimen to include the specimen bottle cap).
- iv. Observer will sign the unit ledger in front of the UPL verifying the collection process and direct observation.
- v. Advises the UPL of any Soldier attempting to contaminate a specimen or otherwise trying to avoid proper procedures.
- vi. Observers will be an officer/NCO (E-5 or higher). Commanders should use senior NCOs or officers in the chain of command as observers whenever possible to reinforce command support for the program.
- vii. Observers will only observe Soldiers of the same gender.
- viii. There will be no more than three observers per UPL.
- ix. Observers will only observe one Soldier at a time.
- x. Observer maintains visual contact with the bottle at all times. At no time will the observer have or take possession of the empty bottle or urine specimen.

(8) REQUIREMENTS.

- i. An active and aggressive urinalysis program serves as a valuable tool and an effective deterrent against drug abuse. Installation, community, and activity commanders will ensure that a drug-testing program is maintained IAW DOD Directive 1010.1, AR 600-85, and this SOP.
- ii. Battalions will randomly (IR) test 4 - 5% of their battalion strength per week, detailing different companies to conduct the collection each week.

- iii. **Units that are not structured as a battalion and are a sole company with unit strength of 50 or less may randomly select and collect a minimum of 8 - 10% twice per month.**
- iv. Each unit is required to have a detailed Unit ASAP SOP signed by the current Commander and ensure that it is reviewed by their legal advisor.
- v. This SOP, the unit ASAP SOP, ACSAP Unit Prevention Leader (UPL) Handbook, AR 600-85 and local installation regulations must be at the collection site each time a urinalysis is conducted.

(9) BATTALION / UNIT PREVENTION LEADER CERTIFICATION/RECERTIFICATION.

- i. The commander must complete the memorandum for the UPL selection. The background check, appointment orders and the UPL certification checklist (see APPENDIX O) must be submitted to the ASAP no later than two weeks prior to class date to obtain a seat reservation. The UPL must present his commander's current ASAP SOP for review during the course.
- ii. UPL training at Fort Meade will be conducted as determined by the ASAP staff. The class will accommodate only the individuals that had previously reserved seating.
- iii. UPLs must recertify every 18 months by successfully completing the UPL CTP exam. The ASAP and unit commander will initiate a new local and DAMIS background check to ensure that the UPL is still qualified IAW AR 600-85, chapter 9, paragraph 9-6.

(10) PROCEDURES.

- i. **SUPPLIES.** Each unit will have enough supplies on hand to conduct 100% testing. Re-supply will be done when a unit turns in samples to the DTCP, unless otherwise indicated by source.
- ii. **PRE-COLLECTION PROCEDURES:**
 - 1. The battalion commander directs a urine test and identifies test subjects: individual Soldiers; percentage of the unit; or 100% of the unit. The commander also directs the time and location of the test.
 - a. The Drug Testing Program is a commander's program, which means that the commander may

determine when, where, and how much testing he/she does, as long as the minimum testing rates (4 – 5% per week) and other higher command policies are followed. The commander should be aware of smart testing procedures and be alert to possible pattern testing. The commander needs to vary the day each week of the month that he/she performs testing.

- b. The commander will only notify the BPLs involved and the battalion command sergeant major (CSM). If testing is directed at the company level the battalion commander may notify the company commander in advance.
2. On Fort Meade, the primary means of selecting Soldiers for testing is the Army Drug Testing Program (DTP).
3. Notification of personnel. Soldiers have within two hours to report. Verbal notification is preferred and should be the primary method of notification. **DO NOT DISCLOSE THE PURPOSE.**
4. Commander selects observers, E5 or above, of the same sex as Soldier being tested, and a holding area officer/NCO, E5 or above, to maintain control of personnel waiting to be tested. Observers may not have been involved in an alcohol or drug related incident nor can they be enrolled in a rehabilitation program.

NOTE: Observers and holding area NCO may be selected prior to the test date, but will not be notified of this duty until the selected Soldiers are notified.

5. UPL will brief observers, to include a demonstration, on their duties and responsibilities; observers will sign briefing statements after being briefed by the UPL.
 6. A holding area for Soldiers waiting to provide a urine specimen is designated, an officer/NCO, E5 or above, is appointed to maintain control of personnel waiting to be tested.
 - a. Water should be provided in the holding area for Soldiers providing a specimen.
 - b. Donors should drink one 8 ounces glass of water every half hour, not to exceed 40 ounces in 3 hours.

- c. Other sources of fluid are acceptable, (i.e., coffee, juice, soda, etc).
 - d. In exceptional cases, an individual with the permission of the commander may leave for a brief period of time with an officer/NCO escort.
 - e. Personnel in the holding area should not be allowed to lounge and/or sleep. If you keep them busy, then they will provide a specimen sooner. Try:
 - i. Providing alcohol and drug training by the Alternate UPL.
 - ii. Cleaning weapons or masks.
 - iii. Indoor PT
7. Set up UPL station - UPL retrieves collection supplies from secure holding area (preferably the temporary storage container). There should be enough supplies for the number of specimens to be collected plus 10%.
 8. Set up the table in a non-carpeted area with back to a wall.
 9. The UPL station should be quiet and away from the mainstream activities of the unit but close as possible to the latrine(s) that will be used for the collection.
 10. The UPL station may be the same area as the holding area, although having separate areas is preferred. The UPL should try to setup his/her table away from the holding area; this reduces distractions by personnel waiting.
 11. The desk will be of non-absorbent material or covered with a waterproof backed absorbent covering.
 12. The testing area should be a controlled area, only testing personnel, command personnel, and donors should be in the area (see APPENDIX W for signs).
 13. In addition to supplies, the following should be available at the UPL station:
 - a. AR 600-85

- b. This SOP
- c. Unit SOP
- d. All higher element policy letters and SOPs
- e. UPL appointment orders, certificates, and UPL certification card
- f. Alpha roster or AAA 162
- g. Disinfectant and material for a possible spill

14. UPL inspects the latrine(s):

- a. UPL checks the latrine(s) before the collection starts.
- b. Ensure all cleaning agents (cleansing powder, bleach, etc) are removed from the area.
- c. Ensure paper towels and hand soap is available at the wash basin to wash after their collection is completed.
- d. Place "OFF LIMITS" sign on latrine for non-testing personnel (Appendix W).

15. The Commander will brief the personnel to be tested (may be delegated but should be stated in the unit SOP) (See APPENDIX Y).

16. The UPL briefs the personnel to be tested (may be conducted by an alternate UPL) (See APPENDIX Z).

iii. **COLLECTION PROCEDURES:** The following steps are the standardized and regulatory procedures for the collection, handling, and submission of urine specimens. These procedures have been designed to ensure legal defensibility in a court of law and **MUST** be followed exactly as written. Do not take short cuts to speed up the process, you may invalidate the test.

- 1. UPL puts on the disposable rubber gloves.
- 2. Soldier approaches the UPL station with military identification card when prepared to give a urine specimen. An alternate reliable method for verifying the SSN of the

Soldier is required if the Soldier does not have a DoD issued ID card in his/her possession. A current alpha roster must be available for use to verify a Soldier if he/she does not have an ID card. The commander or 1SG may verify the Soldier using this alternate method of ID.

3. Due to the SSN reduction act Soldiers may present ID cards without SSNs on them. The UPL will request the AAA 162 (Unit Personnel Accountability Report) from the BN S-1 and utilize it to verify the Soldier's information.
4. Soldier will remove excess outer garments such as ACU jacket, coat; or sweat top.
5. UPL initiates all required paperwork. Since pre-prepared forms and labels are used, the UPL will verify all information with the military ID Card. If a clerical mistake is made while filling out entries on the DD Form 2624, the bottle label, or the unit ledger prior to the discrepancy inspection required by the DTC, the mistake may be corrected by its maker by lining through (single line) the mistake, initialing and dating the correct entry. No other method of correction is authorized except by memorandum, titled "Certificate of Correction," (See APPENDIX S).
 - a. Writing on the collection paperwork:
 - i. Avoid slashing zeros (0); use 0
 - ii. Avoid European sevens (7); use 7
 - iii. Avoid European ones (1); use I
 - iv. Avoid "double circle" eights (8); use 8
 - v. Avoid closed fours (4); use **4**
 - vi. Use: 0,1,2,3, **4**,5,6,7,8,9

NOTE: BLUE ballpoint pens should be used in filling out the collection paperwork; **roller ball, felt tip pens, and pencils will not be used.**

6. UPL directs the Soldier to verify the information on the bottle label, unit ledger, and DD Form 2624. The Soldier will then initial the bottle label. His/her initials are verification that all data is correct.

7. UPL will remove a new collection bottle from the box in front of the Soldier and replace it with the Soldier's military ID Card. The UPL will then affix the label to the bottle, in full view of both the Soldier and the observer then it is handed to the Soldier.

NOTE: Do not allow the Soldier to blow air into the empty bottle.

8. Soldier will ensure that the observer has full view of the bottle at all times until the UPL takes custody of the specimen. At no time will the observer take custody of the urine specimen.
9. If the Soldier is female, the optional wide mouth collection cup will be issued to the Soldier at this time.
10. Soldier and observer will move to a secure latrine, the bottle will be held by the Soldier above his/her shoulder as to keep it in full view of the observer. The observer will keep the collection bottle in sight at all times.
11. Once in the latrine, the observer will direct the Soldier to wash his/her hands without the use of soap. The Soldier will then move to the appropriate location to collect the specimen.
12. Soldier will remove the cap of the bottle in full view of the observer, and will hold it or place it face up on a clean surface. The bottle and cap must be in full view of the observer.
13. Soldier will then fill the bottle with at least 30 mL of urine (approximately half the specimen bottle). The observer must see urine leaving the body and entering the bottle. The Soldier will recap the bottle in full view of the observer.
14. The following procedure applies to female Soldiers who utilize the wide mouth collection cup.
 - a. Soldier will remove the cap from the collection cup, and provide the specimen. The observer will keep the collection cup and the bottle in full view and directly observe urine leaving the body and entering the cup.
 - b. Soldier will then open the specimen bottle, and pour the urine from the cup into the bottle. The Soldier will

recap the bottle in full view of the observer. The observer will watch this entire procedure. The bottle must contain at least 30 mL of urine.

NOTE: If less than 30 mL of urine is collected, the donor (accompanied by the observer) will dump the entire specimen, and the donor will bring the bottle back to the UPL. The UPL will remove and destroy the bottle label. At no time will the observer touch the bottle. The Soldier will be sent back to the holding area until he/she can provide a full specimen. Original entries on the DD Form 2624 and unit ledger may be utilized for the second specimen collected. A new hand written label must be completed.

15. The Soldier should wash his/her hands with soap after recapping the specimen as described above, but the Soldier and observer must keep the specimen in full view.
16. The observer and the Soldier will return to the UPL's station. The Soldier will walk in front with the bottle held above his/her shoulder. The observer will keep the bottle in sight at all times.
17. The Soldier will hand the bottle containing his/her specimen to the UPL; both the Soldier and observer will continue to keep the bottle in sight at all times until the UPL places the specimen in the collection box.
18. The UPL will take the bottle, verify that the cap is secure, and inspect the specimen for possible adulteration. If adulteration is suspected, the UPL will secure the specimen, order the Soldier to stand fast, and notify the commander.
19. If the UPL has reason to suspect that the specimen was adulterated, the UPL will complete an MFR describing the facts and circumstances that caused a suspicion that the specimen was adulterated. The UPL will give this MFR to the unit commander. Commander will contact his local SJA/Trial Counsel and the ADCO for further guidance, and request for a second urinalysis sample.
20. The UPL will then place tamper evident tape running across the top of the bottle cap and down the sides of the bottle sticking the evident tape in the (tape here) space provided on both sides of the bottle. The tape will be one continuous piece that touches the label on both ends.
21. The UPL will then initial the bottle label. The UPL's initials signify that he/she has received the specimen from the

Soldier, checked the specimen for adulteration, ensured the cap was secure, and placed tamper evident tape across the cap.

22. The UPL will place the specimen in the collection box, removing the Soldier's ID card.
23. The observer will then sign the unit ledger in front of the UPL and Soldier to verify he/she complied with the collection process and directly observed the Soldier provide the sample and he/she must maintained eye contact with the specimen until it was placed in the collection box.
24. The Soldier will then sign the unit ledger in front of both the observer and UPL verifying that he/she provided the urine in the specimen bottle and that he/she observed the specimen being sealed with tamper evident tape and being placed into the collection box.
25. The ID card will be returned to the Soldier at this time, and he/she is released from testing.

iv. **POST-COLLECTION PROCEDURES:** After all specimens have been collected the UPL will:

1. Verify that all SSNs on the unit ledger, DD Form 2624, and bottle labels match.
2. Ensure that all required information, signatures, and initials are on the bottle label, unit ledgers, and DD Form 2624.
3. Place each DD Form 2624 into the corresponding specimen container.

NOTE: While cleaning up the work area the UPL must maintain eye contact with all specimens.

NOTE: UPL will never handle his or her own specimen. If at all possible another UPL will conduct the test. If all alternate means of testing have been exhausted the UPL will leave his or her sample empty until turn in to the DTCP. Once the test is complete the UPL will have one of their observers accompany them to the DTCP. The DTC will inspect and sign for the batch and then the DTC becomes the UPL for that final sample.

4. UPL will transport all specimens to the DTCP as soon as possible (normally the same duty day). If not the same day

then the next business day. A MFR signed by the commander is required for specimens held past 72 hours.

5. If unable to transport to the DTCP immediately, the specimens, DD Forms 2624, and unit ledgers will be placed into temporary storage, as described in APPENDIX E. Because of the increased testing rate, units must have the capability to store all collected samples until the DTC can accept them.
6. Temporary storage of urine specimens at the unit level (by the UPL).
 - a. A safe, secure file cabinet or solid metal wall locker will be used to store specimens. This container must be in a lockable room or office.
 - b. The safe or filing cabinet must weigh at least 500 pounds or be attached to the structure of the building with a chain or heavy duty bolts.
 - c. If a filing cabinet is used, then a metal bar hasp will be attached to run the entire height of the cabinet.

NOTE: a hasp may be welded to the top drawer, but then only the top drawer may be utilized for temporary storage.

- d. The safe or filing cabinet will have a 200 series padlock (with only 2 keys, **NO** combination lock), which is used to secure the hasp.
- e. One key will be issued to the primary UPL; the other key will be secured in a sealed envelope (signed by the UPL across the seal) and issued to the commander's safe. Both keys will be issued IAW key control SOPs.
- f. All opening/closing of the safe/cabinet will be annotated on a SF 702.
- g. Under certain circumstances an alternate UPL may remove specimens from the temporary storage container if the primary UPL went on emergency leave, was hospitalized etc. If that happens the alternate UPL must complete an MFR signed by the

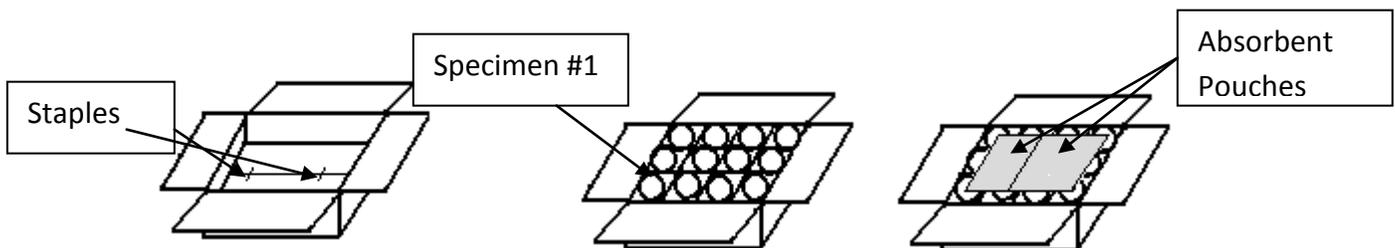
commander and kept with the test until the destroy date.

v. Receipt of specimens at the DTCP.

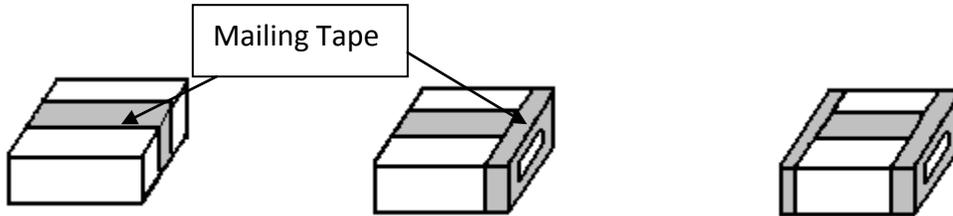
1. At the DTCP, a DTC will ask the UPL to show proof of certification to ensure they are still current. If the UPL certification is expired the test is invalid and all samples will be destroyed. The unsealed specimen boxes will be opened by the DTC or alternate DTC. The alternate DTC may perform the actions of the DTC outlined below. If there is no DTC, the actions will be performed by the person designated by the ADCO or MACOM ADCO. The DTC will:
 - a. Review DD Forms 2624, unit ledger and bottle labels for completeness. He/she will ensure that the information contained on the front side of the DD Form 2624 is correct and corresponds with the information on the bottle label:
 - i. Complete address of submitting unit
 - ii. Base area code
 - iii. SSN
 - iv. Test basis (correct code for the type of urinalysis i.e. Command Directed (CO), Inspection Other (IO), Rehabilitation Test (RO), Unit Sweep (IU), Inspection Random (IR), Probable Cause (PO), Consent (VO), Mishap Investigation (AO), Medical (MO).
 - v. Test information (rank of Soldier either A or B)
 - vi. Initials of UPL and Soldier
 - vii. Date specimens collected
2. Ensure that, at a minimum, 30 mL of urine is contained in each bottle and that an unbroken piece of tamper evident tape is correctly placed on each bottle.

3. Ensure the chain of custody portion of the DD Form 2624 is complete and accurate. Specific issues the DTC should address are:
 - a. Signatures accounting for any change of custody are properly annotated.
 - b. Correct dates
 - c. The "Purpose of Change/Remarks" column clearly explains each change of custody.
4. If a discrepancy is found during the check, the DTC shall initiate appropriate action to correct the discrepancy/error, if possible. All discrepancies that can be corrected must be explained in a memorandum titled, "Certificate of Correction," which explains:
 - a. The discrepancy
 - b. The circumstances
 - c. The corrective action taken
 - d. All personnel involved including the person(s) who made the error
 - e. DTC must sign this certificate
5. If the error is a missed entry or an incorrect entry either on the bottle label or on the DD Form 2624, corrections will not be made on the label or on the form. The evidence that a correction was made will be the memorandum titled, "Certificate of Correction."
6. The memorandum titled "Certificate of Correction," will be appended to the original and all copies of the DD Form 2624. The memorandum titled "Certificate of Correction," will be attached to the DTCs DD Form 2624 until destruction date.
7. If no discrepancies are noted, or all discrepancies have been corrected with a memorandum titled "Certificate of Correction," the UPL will enter:
 - a. The date the specimens were delivered in block 12a.

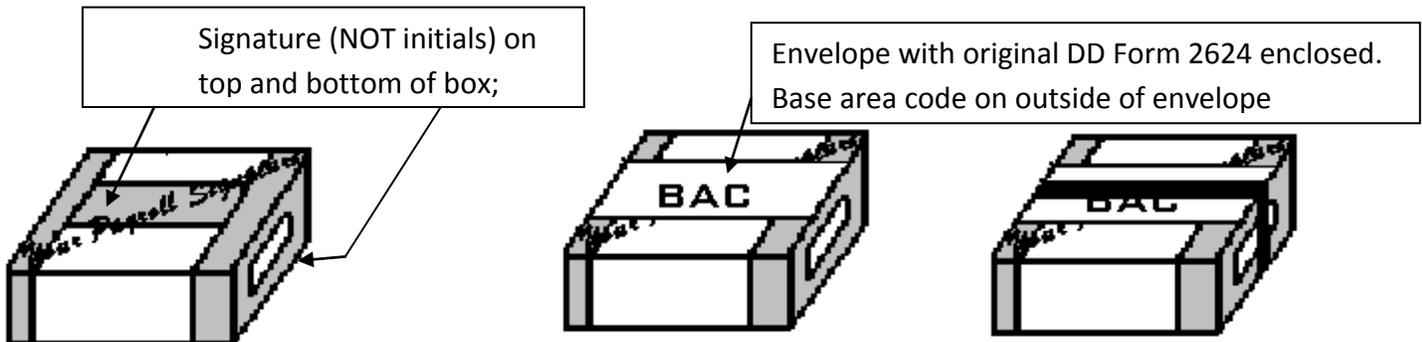
- b. Print his/her name and sign their payroll signature in block 12b.
 - c. Print, "Specimens released by UPL to DTC" in block 12d.
 - d. Ensure that the DTC prints and signs their payroll signature in block 12c to document receipt of the specimens.
- vi. **Disposition of Unit Ledgers/DD 2624.** The UPL will maintain a copy of DD Form 2624 and the unit ledger at the unit in a locked cabinet. He/she will annotate on the ledger the testing results when received from the Commander. All negative and positive results will be posted to the Unit Ledgers. The file will be maintained IAW AR 25-400-2 (ARIMS). Negative results will be retained for one year plus the current year, and positive results will be maintained for three years plus the current year.
- vii. **Packaging the Specimens.** Only DTCs will transport specimens to the FTDTL, however every UPL must be familiar with the packaging requirements. When a UPL deploys they will be required to pack and ship their samples. Some installations require UPLs to package their own samples even in garrison.
1. Sign each DD Form 2624 releasing it to one of the authorized modes of transportation, i.e., "Released to USPS." (USPS is the United States Postal Service).
 2. Liquid absorbent pads will be placed in each specimen box (containing up to 12 specimens) to absorb any leakage that may occur.



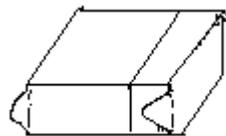
- The specimen box will be sealed with adhesive tape (use a mailing type tape, not scotch tape, nor 100 mile per hour tape) over all open sides, edges, and flaps.



- The UPL or DTC signs his/her payroll signature across the tape on the TOP AND BOTTOM of each container.



- The UPL or the DTC secures a plain white business envelope with tape, with the **original** DD Form 2624 enclosed, UNSEALED, to the outside of the specimen container. Your base area code (BAC) will be written in large letters on the outside of the envelope.
- Place specimen box inside a leak proof bag and seal (white or grey plastic leak proof bag, NSN 6530-01-304-9762).



- Wrap the container IAW your carrier's requirements. Some mail services require that the box be wrapped in brown paper before shipment.
- Multiple specimen boxes may be combined into larger boxes for shipment, but each specimen box must be

wrapped as stated above to include a leak proof bag. There are no specific taping instructions for the larger box. Do not combine more than 10 collection boxes into a larger box.

9. Ship containers to the FTDTL by transportation priority one. One of the following transportation modes will be used:
 - a. US Postal Service
 - b. Hand carried by surface transportation
 - c. Military aircraft transportation system
 - d. US flag commercial airfreight, air express, and airfreight forwarder.
 - e. FEDEX or UPS
 - f. When none of the above satisfies the movement required, by foreign flag air carrier.

10. Mail to the servicing FTDTL.

viii. **Unusual Circumstances.** Unusual circumstances are anything out of the normal procedures and include: Soldier with no ID card, short specimen to include no specimen, possible adulteration, broken tamper evident tape.

1. Any unusual circumstances should be annotated on the unit ledger and/or on a Memorandum for Record.
2. **No ID card.** If a Soldier approaches the UPL desk without an ID card an alternate method of identification will be used such as:
 - a. Identity verified by commander or 1SG from unit alpha roster.
 - b. Identity verified by another picture ID (such as a valid state driver's license) and then SSN taken from alpha roster.
 - c. The use of ID tags is not considered a valid ID of a Soldier and will not be used.

- d. Due to the SSN reduction act Soldiers may present ID cards without SSNs on them. The UPL will request the AAA 162 (Unit Personnel Accountability Report) from the BN S-1 and utilize it to verify the Soldier's information.
 - e. Whichever method the unit uses it must be stated in the SOP.
3. **Short or No Specimen.** If a donor goes to the latrine to provide a specimen and produces less than 30 ml or is unable to provide any specimen at all then:
- a. The label will be removed from the bottle or at a minimum the SSN will be obliterated.
 - b. Any urine in the specimen bottle will be dumped in the commode or urinal by the Soldier in view of the observer.
 - c. The specimen bottle will be rinsed with tap water and then crushed.
 - d. The UPL will annotate on the Unit Ledger that the specimen was short on the first attempt.
 - e. The Soldier will return to the holding area and be instructed to drink water.
 - f. The original entries on the unit ledger and DD Form 2624 are still good and will be utilized when a good specimen is provided.

NOTE: If a Soldier does not provide a specimen within 3 hours of reporting to the urinalysis collection site, the commander may refer the Soldier for medical evaluation. The Soldier will be escorted to the MTF by a more senior Soldier. If the Soldier is determined to *not* have a medical condition precluding him/her from providing a specimen, the commander should consult with the servicing judge advocate for further guidance.

4. **Possible Adulteration.** When the observer suspects that the Soldier tampered with his/her specimen, then the observer will notify the UPL after the Soldier hands the specimen to the UPL.
- a. The UPL will finish processing the specimen and then have the Soldier stand fast and ensure that the commander is notified.

- b. The commander in consultation with OSJA, CID, and the ADCO will determine any additional testing.
- c. If you, the UPL, believe that a specimen appears to be adulterated in your initial inspection of the specimen then you will:
- d. Finish processing the specimen and then have the Soldier and observer stand fast and ensure that the commander is notified.
- e. The commander in consultation with OSJA/CID will determine any additional testing etc.
- f. The observer should be immediately relieved.

NOTE: In both cases the specimen will be saved; it is evidence that the Soldier attempted to adulterate his/her specimen. It will be shipped to the FTDTL for testing.

- 5. **Refusal to provide a specimen.** If a Soldier refuses to provide a specimen, the appropriate command authority will be notified. The Soldier's chain of command should give the Soldier a direct order to provide a specimen. If the Soldier then refuses, it will be a violation of a direct order. Violation of a lawful order is subject to disciplinary action under UCMJ. Possible actions include courts-martial proceedings and processing for separation.

NOTE: Menstruation, pregnancy, or taking medication for a urinary tract infection does not excuse a Soldier from providing a specimen.

- 6. **Broken Tamper Evident Tape.** Occasionally when applying the tamper evident tape, the tape breaks in such a fashion that it does not touch both sides of the bottle label. If this happens then:
 - a. Apply a second piece of tape just offset from the first piece. The second piece must touch paper label on both sides of the bottle. (For further guidance on this see a DTC).
 - b. Annotate on Unit Ledger that you applied the second piece of tape and Soldier observed this process; draft an MFR or Certificate of Correction after the collection and attach to the original DD Form 2624.



7. Any other unusual circumstances call the DTC at 301-677-7982 or 7983.

GLOSSARY

ABMD	Alcohol Breath Measuring Device
ACSAP	Army Center for Substance Abuse Programs
ASAP	Army Substance Abuse Program
AFIP	Armed Forces Institute of Pathology
AR 600-85	Army Substance Abuse Program
ASACS	Adolescent Substance Abuse Counseling Service
BAC	Base Area Code
BPL	Battalion Prevention Leader
CCC	Community Counseling Center
CD	Clinical Director
CID	Criminal Investigation Division
CIP	Command Inspection Program
COB	Close of Business
CoC	Chain of Custody
CPC	Civilian Program Coordinator
CPAC	Civilian Personnel Advisory Center
CSP	Collection Site Person
DA	Department of Army
DAMIS	Drug and Alcohol Management Information System
DCSPER	Deputy Chief of Staff for Personnel
DOD	Department of Defense
DOIM	Directorate of Information Management
DRM	Directorate of Resource Management
DTC	Drug Test Coordinator
DTCP	Drug Test Collection Point
EDCO	Education Coordinator
FTDTL	Forensic Toxicology Drug Testing Laboratory
IAW	In Accordance With
ISSO	Information Systems Security Office
JAG	Judge Advocate General

MACOM	Major Army Command
MEDDAC	Medical Department Activity
MFR	Memorandum for Record
MP	Military Police
MRO	Medical Review Officer
MTF	Medical Treatment Facility
NCO	Non Commissioned Officer
OSJA	Office of the Staff Judge Advocate
PMO	Provost Marshal Office
PRP	Personnel Reliability Program
QA	Quality Assurance
QC	Quality Control
SOP	Standing Operating Procedure
SSN	Social Security Number
TDP	Testing Designated Positions
TDY	Temporary Duty
UCMJ	Uniform Code of Military Justice
UIC	Unit Identification Code
UPL	Unit Prevention Leader
USADAOA	United States Army Drug and Alcohol Operations Agency

APPENDIX INDEX

- A. Quality Control Checklist
- B. Numbering Method for Boxes
- C. Urinalysis collection, Packaging, and Shipping Supplies
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- G. Proper Cleaning and Disinfecting
- H. Disposal of Biochemical Waste
- I. Unit Inspections
- J. Inspection Program
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- N. Smart Testing
- O. UPL Certification Checklist
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- V. Special Test Request Memorandum

W. Testing Area Signs

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Y. Commanders Brief

Z. UPL Brief

Appendix A Quality Control Checklist

DD Form 2624

1. Are all blocks filled out correctly and completely to include Test Basis (Block 9) and Test Information (Block 10)?
2. Are there any errors or over writes?
4. Does the SSN in Block 8, DD Form 2624 match the ones on the Unit Urinalysis Ledger and the bottle label?
5. Do the dates on the DD Form 2624, the Unit Urinalysis Ledger, and the bottle label match?
6. Does the document/batch and specimen number. On the DD Form 2624 match the document/batch and specimen number on the Unit Urinalysis Ledger?
7. Are the UIC and BAC correct on the form?
8. Did you ensure that the form was filled out with blue non-smear ink? (NO FELT PENS AND NO PENCILS).
9. Did you properly complete the chain of custody indicating all changes in custody (Block 12, DD Form 2624, and backside)?

UNIT URINALYSIS LEDGER

1. Does the Unit Urinalysis Ledger reflect the Soldier's signature, printed name, rank, SSN, and remarks (if applicable)?
2. Is the Test Basis indicated on the Unit Urinalysis Ledger?
3. Do the SSN on the Unit Urinalysis Ledger, DD Form 2624, and bottle label match?
4. Do the dates on the Unit Urinalysis Ledger, DD Form 2624, and bottle label match?
5. Does ledger show printed name and signature of each observer?
6. Is the UPL's name and unit telephone number noted on the Unit Urinalysis Ledger?

7. Does the Document/Batch and Specimen Number on the Unit Urinalysis Ledger match the Document/Batch and Specimen Number on the DD Form 2624?
8. Is the Unit Urinalysis Ledger maintained in a secure area at the unit?
9. Are errors made on the Unit Urinalysis Ledger corrected in the same manner as the DD Form 2624?
10. Has the UPL ensured that the appropriate DD Form 2624 matches the specimens collected?
11. Has the UPL ensured that no copies of the Unit Urinalysis Ledger were sent to the Toxicology Laboratory?

Specimen Label and Bottle

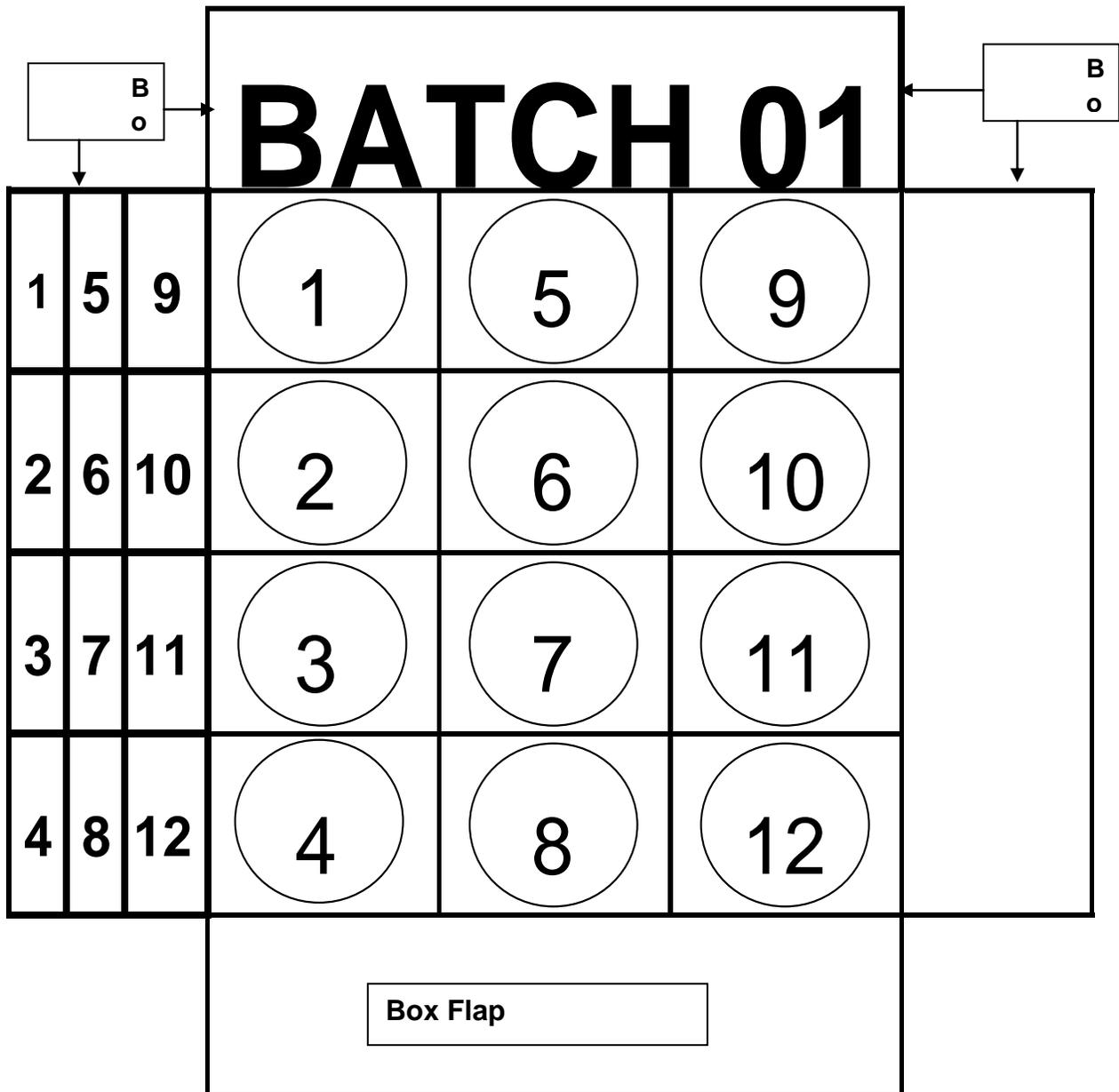
1. Is the amount of urine adequate for testing (more than 30 MI or filled over half full)?
2. Are all entries on the label in the proper location?
3. Did the UPL ensure that the cap was securely tightened and that the bottle did not leak?
4. Was tamper evident tape placed over the cap of the bottle?
5. Was the tamper evident tape placed over the label so that all information on the label was readable?
6. Is blue, non-smear ink used on the forms and bottle label (NO FELT PENS)?
7. Did the UPL ensure that only authorized urine specimen bottles were used for collection?
8. Did the UPL ensure that the date on the bottle label, DD Form 2624, and Unit Urinalysis Ledger match?
9. Did the UPL ensure that the Base Area Code was on the label?
10. Did the UPL ensure that the Soldier's and UPL's initials were on the bottle label?
11. Did the UPL ensure that the Soldier's name did not appear on the bottle label?

12. Are all errors properly corrected, initialed, and dated?

Appendix B

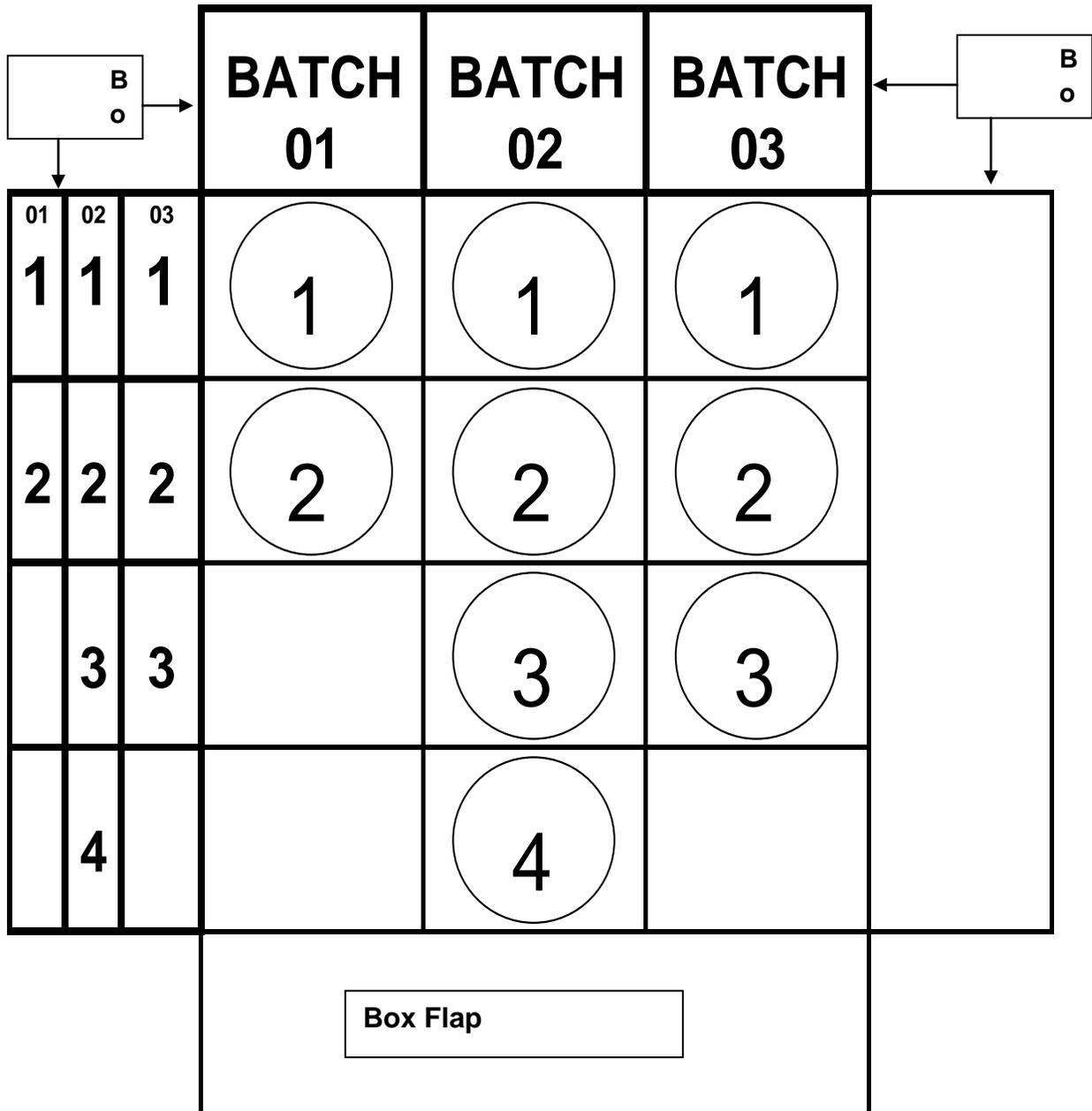
NUMBERING METHOD FOR URINE BOXES

Box lid must be marked to reflect the bottles in the box using the specimen number (lowest to highest). Box will not be sealed until final inspection by UPL (with signature) DD Form 2624 (completed and verified) will be folded and placed in envelope and secured to the outside of the box. Each box will contain samples as numbered one To twelve. Subsequent boxes will be labeled as batch number 02, 03, etc.



NUMBERING METHOD FOR URINE BOXES FILLED WITH MULTIPLE BATCHES

Box lid must be marked to reflect the bottles in the box using the specimen number (lowest to highest). Box will not be sealed until final inspection by UPL (with signature). DD Forms 2624 (completed and verified) will be folded and placed in sealed envelope And secured to the outside of the box. Each box will contain samples as designated by Batch and Specimen number.



Appendix C

Urinalysis Collection, Packaging, and Shipping Supplies

UPL and Commander's Briefings
Ball Point Pens -BLUE
AAA 162 Rosters
Paper Towels - In case of a spill or wet bottle
Disinfectant - In case of a spill and to disinfect when finished testing
Ruler - to line out an entire entry on the DD Form 2624, if necessary
Trashcan with trash bags
Table and chair (your work station)
Copy of AR 600-85
Copy of installation and unit SOPs
Copy of MACOM and/or installation policy letters
UPL appointment orders
HOLDING AREA SUPPLIES
Styrofoam drinking cups
Table - For drinking supplies
Chairs
Garbage can(s) with trash bags
Water, coffee, juice, etc.
LATRINE SUPPLIES
Hand Soap and paper towels
Latrine Off limits sign (Available in UPL Handbook)
PACKAGING SUPPLIES (If Required)
Liquid Absorbent Pouches
NSN 6330-01-304-9754
Mailing Pouch-White
NSN 6530-01-304-9762
Envelopes, Plain White (#10 business)
Adhesive tape for packaging
Black marker to sign payroll signature across top and bottom of box
Brown wrapping paper to wrap box if required by mail carrier.

Appendix D DTCP Operation Hours

1. Purpose: Define the operating hours for the Drug Test Collection Point (DTCP), located in building 2464, Room # 114, Fort Meade, Maryland.
2. Applicability: This SOP is applicable to the Installation Drug Testing Program
3. Procedures:
 - a. The operating hours of the Fort Meade DTCP is from 0800-1600, Monday through Friday. The DTCP will be closed for lunch from 1230-1330 hours Monday through Friday.
 - b. Walk-in hours for specimen turn-in are from 0800-1200, Monday through Thursday. Appointments are required for afternoon specimen turn-in.

Appendix E

Temporary Storage Guidelines

1. Purpose. Proper storage of urine specimens at the unit level is essential to ensure the integrity and security of urine specimens.
2. Applicability. All units conducting urinalysis drug testing.
3. References.
 - a. AR 600-85, Army Substance Abuse Program, 28 December 2012
 - b. Army Center for Substance Abuse Programs (ACSAP) UPL Handbook, version 3.
4. Responsibility. Unit Commanders, UPLs, or the DTCs are responsible for securing temporary storage of biochemical specimens. If unable to transport to the DTCP immediately, the specimens, containers and paperwork will be placed into temporary storage at unit level.
5. Procedure for temporary storage of specimens.
 - a. If collected specimens cannot be transported immediately to the DTCP then they will be placed into temporary storage at the unit. The UPL must maintain eye contact with the specimens at all times until they are placed into storage.
 - b. The following requirements must be met for a UPL to place specimens into temporary storage. Failure to comply with the below requirements may invalidate specimen results.
 - (1) A safe, a secure filing cabinet or metal wall locker, will be used to store specimens. This container must be in a lockable room or office.
 - (2) The safe or filing cabinet must weigh at least 500 pounds or be attached to the structure of the building with a chain or heavy duty bolts.
 - (3) If a filing cabinet is used, then a metal bar hasp will be attached to run the entire height of the cabinet. Note: A hasp may be welded to the top drawer, but then only the top drawer may be utilized for temporary storage.

(4) The safe or filing cabinet will have a 200 series padlock (with only 2 keys), which is used to secure the hasp.

(5) One key will be issued to the primary UPL; the other key will be secured in a sealed envelope (signed by the UPL across the seal) and issued to the commander's safe. Both keys will be issued IAW key control SOPs.

(6) All opening/closing of the safe/cabinet will be annotated on a SF 702. DD Form 2624 will be annotated with the following:

(a) When specimens are placed in temporary storage.

(b) DATE: Date specimens are placed in container.

(c) RELEASED BY: UPL's printed name and signature.

(d) RECEIVED BY: Write in building number and room in which the storage container is located.

(e) PURPOSE OF CHANGE/REMARKS: Write, "Place in Temporary Storage."

c. When specimens are removed from the temporary storage container, the back of the DD Form 2624 will be annotated with the following:

(1) DATE: Date specimens removed from container.

(2) RELEASED BY: Write in Building number and room in which the storage container is located.

(3) RECEIVED BY: UPL's printed name and signature.

(4) PURPOSE OF CHANGE/REMARKS: Write in "Removed from Temporary Storage."

(a) The UPL who places the specimens in safe storage will remove the specimens from safe storage. Under extreme circumstances, when the UPL is not available to remove specimens for transportation to the DTCP, the Alternate UPL may do so by annotating the following in Block 12 of the DD Form 2624 in "PURPOSE OF CHANGE/REMARKS" section.

(b) "Removed from temporary storage due to unavailability of Primary UPL."

(c) Unavailability must be explained in a MFR signed by the unit commander and sent with the original DD Form 2624 to the DTCP.

Appendix F

Qualifications, Certification, Desertification, and Training of UPL

1. Purpose. To prescribe requirements, guidance and procedures for the establishment and conduct of Unit Prevention Leaders and their training program.
2. Applicability. This SOP applies to all Unit Prevention Leaders and their commanders.
3. References.
 - a. AR 600-85, Army Substance Abuse Program, 28 December 2012.
 - b. Army Center for Substance Abuse Programs (ACSAP) UPL Handbook, version 3.
4. Procedures.
 - a. Qualifications. Unit Commanders must ensure those individuals being considered for appointment as a Unit Prevention Leader (UPL), at all levels, meet the following minimum standards:
 - (1) Officer or NCO (E-5 promotable or above) for Battalions and officers or NCO (E-5 and above) Companies.
 - (2) Must possess sufficient skills, integrity, and maturity to carry out the highly sensitive duties of a UPL and be familiar with the Army Drug Testing Program.
 - (3) Should have retention (minimum of one year) in assigned additional duty as a UPL.
 - (4) Must have appointment orders signed by Unit Commander.
 - (5) Must have received a favorable local background check.
 - (6) Not be currently enrolled in the ASAP Rehabilitation Program.
 - (7) Not be under investigation for legal, administrative, or substance abuse related offenses or have had a drug or alcohol related incident within the last 3 years.

(8) Must have received a negative drug test result not more than 60 days prior to UPL certification by the ASAP.

(9) Not have been enrolled in the ASAP for counseling or been referred to ADAPT for education in the last 3 years.

b. Certification. Once the DTC has received a copy of a favorable local background check, appointment orders and ASAP checklist, the following steps will be taken to certify the UPL:

c. Training. The Soldier must attend a forty-hour UPL Certification Course given by the ASAP staff. A certification examination will be required to complete the training and certification process. Certification training will be offered two times annually. A test score of 70% or better must be achieved to pass the certification test.

d. After all requirements have been met, the ASAP will certify the individual as a UPL. Unit prevention leaders will receive a UPL certificate and a UPL card that is valid for 18 months. Prior to expiration of the card, the UPL will contact the DTC for recertification.

e. UPLs are required to attend quarterly training conducted by the ASAP.

f. Decertification. UPLs will be decertified for one or more of the following reasons:

- (1) Failure to coordinate annual unit inspections.
- (2) Failure to attend UPL quarterly training.
- (3) Failure to provide the required amount of prevention education and training.
- (4) Failure to perform rehabilitation testing (RO).
- (5) Discrepancy rate above 2%.

Appendix G

Proper Cleaning and Disinfecting

1. Purpose. The Army Drug Testing Program requires the handling of urine samples, which could present a biohazard to Soldiers. Biohazards are those substances that may produce injury or disease upon contact. Contact with human urine poses a threat for hepatitis and other serious contagious diseases. This appendix outlines a methodology and procedure for safeguarding Soldiers involved in processing urine specimens for drug testing.

2. Applicability. This appendix applies to all military and civilian personnel assigned to Fort Meade ASAP and UPLs handling biohazards.

3. Reference: Army Center for Substance Abuse Programs (ACSAP) UPL Handbook, version 3.

4. Supplies.

- a. Latex gloves
- b. Paper towels
- c. Spray disinfectant such as Lysol or Germicidal agents
- d. Plastic waste bags
- e. 10% bleach solution, Mix 1 part bleach with 9 parts water (1/2 cup bleach with 4-1/2 cups of water)

5. Procedure.

- a. All locations where urine is handled will be disinfected. The disinfectant must be a disinfectant and germicide. The table used to process samples will have a working surface composed of non-porous material that will not absorb fluids in the event of a spill. Ample paper towels or other absorbent disposable material will be on hand to be used to apply the disinfectant and to mop up spills. Plastic waste bags for disposal will be available. Latex gloves will be available to all personnel processing specimens.
- b. All individuals handling bottles of urine will wear latex gloves at all times on both hands when receiving, processing, or transporting specimens that are not boxed. The DTC and/or UPL will wear gloves during the clean-up process.

c. Upon completing the specimen collection and quality control check, the surface of the working area will be sprayed with the disinfectant and thoroughly wiped up with clean, unused paper towels.

d. In the event that a spill or leak occurs, the spill will immediately be cleaned up with paper towels and disposed of in plastic waste bags. The surface area of the spill will be sprayed with disinfectant and cleaned with paper towels and disposed of in the same manner. Spill cleanup procedures are as follows:

(1) Lay paper towels over the spill, ensuring that the spill is totally covered and completely absorbed and dispose in plastic bag.

(2) Surface should be thoroughly cleaned of gross contamination.

(3) Apply disinfectant to surface area and let set for a minimum of 10 minutes.

(4) Wipe area with paper towels and dispose in plastic waste bag.

(5) Thoroughly rinse contaminated surface with water and wipe clean with paper towels and dispose of in plastic waste bags.

(6) When cleaning areas, which require the use of chemicals, protective equipment, gloves, and goggles will always be utilized. After clean up, always wash your hands with soap and water.

Appendix H Disposal of Biochemical Waste

1. Purpose: The Army Drug Testing Program requires the proper handling of urine samples, which could present a biohazard to Soldiers. Biohazards are those substances that may produce injury or disease upon contact. Contact with human urine poses a threat for hepatitis and other serious contagious diseases. This appendix outlines a methodology and procedure for safeguarding individuals involved in biochemical waste disposal associated with processing biochemical specimens.

2. Applicability: This SOP applies to all military and civilian personnel assigned to the Fort Meade ASAP and all UPLs handling urinalysis biohazards.

3. Reference: Army Center for Substance Abuse Programs (ACSAP) UPL Handbook, version 3.

4. Supplies:

- A. Latex gloves
- B. Paper Towels
- C. Simple Green D (virucidal/disinfectant)

5. Procedure:

A. The proper disposal of urine and labeled bottles will be as follows:

(1) The UPL or anyone who has contact with the specimen bottle will wear latex gloves at all times on both hands when destroying used specimen bottles.

(2) Urine will be disposed of in latrines by the UPL. At the collection site, when a soldier provides an insufficient specimen; the disposal of the specimen bottle contents will be dumped and rinsed with tap water by the donor under observation.

(3) Urine bottle contents will be emptied into the toilet.

(4) Bottles will be rinsed with tap water and emptied into the toilet.

(5) Labels will be removed from the bottle and all information destroyed.

(6) Bottles will be crushed, made unserviceable and disposed of as general waste in the collection site trash can.

Appendix I Unit Inspections

1. Purpose. Quality Assurance (QA) is part of all ASAP operations. The Drug Testing Program, in order to maintain the integrity of the testing system, requires a constant and consistent review of all facets of the testing process. Unit inspections are an integral part of this quality assurance program.
2. Applicability. This SOP is applicable to all Fort Meade and tenant agency units.
3. References.
 - a. AR 600-85, Army Substance Abuse Program, 28 December 2012.
 - b. Army Center for Substance Abuse Programs (ACSAP) UPL Handbook, version 3.
4. Responsibilities. The DTC will maintain an inspection program of battalions to ensure that collections and maintenance of UPL records are performed by Law.
5. Procedures. The DTC will inspect battalion-level units and battalion or higher-level UPL's will inspect companies.
 - a. DTC will develop a unit Drug Testing Checklist.
 - b. An inspection report generated by the DTC and signed by the ADCO is transmitted to the Commander within 30 working days after completion of the inspection.
 - c. DTC will maintain unit inspection records IAW AR 25-400-2.

Appendix J Inspection Program

1. Each unit is required to be inspected at least annually. Battalions will be inspected by the DTC and companies will be inspected by the battalion. The unit inspection may be conducted as part of a command Inspection Program (CIP) or may be conducted by the local ASAP. The unit and the DTC will maintain the inspection reports.
2. The unit inspection should include, but is not limited, to the following:
 - a. Observed unit collection
 - b. Temporary urine storage area
 - c. Storage area for collection supplies
 - d. Prevention education class requirements (4 hours per year per Soldier)
 - e. Any additional installation requirements such as bulletin boards
 - f. Are new Soldiers being briefed on ASAP policies and procedures within 30 days of arrival to the unit?
3. The Army Center for Substance Abuse Programs (ACSAP) conducts installation policy and procedure reviews approximately every three years. The policy and procedure review of an installation includes at least one unit collection inspection.

Appendix K Military Results Reporting

1. Purpose. The Army Drug Testing Program is legally intensive and has developed through a system of case law. The integrity of the system is based on a tightly supervised quality control system that protects the rights of individual Soldiers. It is imperative that drug testing program personnel follow correct procedures when results are received.

2. Applicability. This SOP is applicable to all Fort Meade and tenant agency units.

3. References.

a. AR 600-85, Army Substance Abuse Program, 28 December 2012.

b. Army Center for Substance Abuse Programs (ACSAP) UPL Handbook, version 3.

4. Military Positives. When a Commander is notified of a positive result by the DTC the following procedures will apply:

a. The Commander or his/her designated representative will pick up the result from the DTC and sign the DTC's positive log book to indicate receipt of the result.

b. If the soldier is positive for a drug which requires MRO review as specified by USAMEDCOM; then the Commander will ensure Soldiers promptly provide medical evidence for legitimate use of the prescribed drug to the MRO when requested.

(1) If MRO determines that the drug use was legal then:

a. The DTC will forward a copy of the MRO's determination to the Commander.

b. The UPL will annotate the unit ledger with the drug type and "legal use" in the remarks block.

c. No further action is required against the soldier.

(2) If the MRO determines that the drug use was illegal then:

(a) The DTC will forward a copy of the MRO's determination to the Commander.

(b) Continue with step A.

A. If the drug positive is for a drug that has no legitimate medical use as specified by USAMEDCOM or is a drug positive for a drug that has a possible legitimate medical use (as specified by USAMEDCOM), but the MRO review determines “no legitimate medical use” then:

(1) The Commander is required to initiate administrative separation or refer the Soldier to the ASAP.

(2) The Commander prepares and submits the DA Form 8003 to the clinical component of the ASAP.

(3) The Commander must also complete DA Form 4833 IAW 190-45.

(4) The UPL annotates the drug on the unit ledger in the remarks block and retains it for 3 years.

5. Military Negatives

- a. DTCs will notify all units of their negative test results by email.
- b. The UPL retains results for 1 year IAW ARIMS filing system.

6. Discrepancies

- a. Specimens that are collected may not be tested for various reasons: the SSN on the DD Form 2624 does not match the bottle label, or the Soldier or UPL did not initial the bottle label, or any of the other numerous errors. Specimens may be rejected (voided without testing) by the DTC or the supporting FTDTL. The commander should be notified of all specimens not tested and have a written policy, in the unit SOP, that the Soldiers whose specimens were not tested will be re-collected.
- b. The following procedure should be utilized when a specimen is identified as possible being adulterated.

(1) The commander should contact CID, OSJA, and the ADCO.

(2) When the commander verifies the evidence of a possible adulteration after consulting with the supporting legal advisor, they may immediately pursue testing under probable cause (PO).

(3) The commander may charge both the Soldier and the observer with offenses if the specimen was adulterated (contact OSJA before charging).

c. Types of Discrepancies - The DTC will notify all units of both fatal and non-fatal discrepancies

Appendix L Rehabilitation Testing

1. Purpose. To prescribe requirements, guidance and procedures for the rehabilitation testing of Soldiers enrolled in ASAP. Rehabilitation testing is an integral part of the treatment program of Soldiers enrolled in ASAP.
2. General. Drug testing will be used to aid the clinical staff in determining the success of treatment, accuracy of diagnosis, and as a means to highlight needed adjustments to the treatment plan.
3. Applicability. This SOP is applicable to all Fort Meade and tenant agency units.
4. References.
 - a. AR 600-85, Army Substance Abuse Program, 28 December 2012.
 - b. Army Center for Substance Abuse Programs (ACSAP) UPL Handbook, version 3.
5. Rehabilitation testing will be conducted by the unit UPL. The Code of "RO" will be used on the DD Form 2624. Commanders and ASAP clinical staff will determine when rehab testing will be initiated. Only Soldiers who are in the rehabilitation program will be given the "RO" code. Everyone enrolled in treatment will be tested a minimum of 1 time per month. Rehabilitation patients may have an additional testing requirement determined by the treatment plan. Testing is determined in the Rehabilitation Team Meeting (RTM), at the ASAP clinic. Following the RTM the commander will inform the UPL of the testing requirement and ensure that a schedule of testing is established.
6. Results of rehabilitation testing will be provided to the Soldier's counselor and the commander.
7. The objective of the "Limited Use Policy" is to facilitate the identification of alcohol and other drug abusers by encouraging identification through self-referral. In addition, the policy is designed to facilitate the treatment and rehabilitation of those abusers who demonstrate the potential for rehabilitation and retention. When applied properly, the "Limited Use Policy" does not conflict with the Army's mission or standards of discipline. It is not intended to protect a member who is attempting to avoid disciplinary or adverse administrative action.

Appendix M

Random Selection Methods

1. Purpose. Random selection ensures a fair and equitable selection process that enhances the deterrent effect of the drug-testing program. Random selection is used to identify Soldiers to be tested. It allows commanders a way to test only part of their unit and ensures fairness throughout the unit. It is important to remember that all personnel selected will be tested; even if the number selected exceeds the quota. The collection procedure cannot be terminated when a certain number of specimens are collected. Excusing Soldiers or getting volunteers can invalidate the randomization and thus invalidate the test results.

NOTE: The method of random selection must be written as a company policy or SOP. The test basis code for random testing is IR.

2. Applicability. All Commanders responsible for unit urinalysis testing.

3. References.

a. AR 600-85, Army Substance Abuse Program, 28 December 2012.

b. Army Center for Substance Abuse Programs (ACSAP) UPL Handbook, version 3.

4. Procedures.

a. Computer-generated random selection programs.

(1) Drug Testing Program (DTP): Pre-prints the DD Forms 2624, labels, and unit ledgers, maintains a database, and uses bar code technology. This is the PRIMARY method of selection.

(2) All personnel selected will be tested.

Appendix N Smart Testing

1. Purpose. Commanders ensure that an active and aggressive urine testing program serves as a powerful tool and an effective deterrent against drug abuse. Effective deterrence requires a random selection process, which ensures that all Soldiers believe that on any day of the year, he or she may be tested.

2. Applicability. All units conducting urinalysis testing on Fort Meade.

3. General: Smart testing is defined as the process whereby drug testing is conducted in such a manner that is not predictable to the testing population. Personal involvement by the unit commander is the key to a successful "smart testing" program. The commander needs to believe in drug testing as deterrence to drug usage and should possess general knowledge about all aspects of the urine drug testing program. It is Army policy that an active and aggressive urine testing program serves as a powerful tool and an effective deterrent against drug abuse

4. References.

a. AR 600-85, Army Substance Abuse Program, 28 December 2012.

b. Army Center for Substance Abuse Programs (ACSAP) UPL Handbook, version 3.

5. Procedures.

a. The "Do's of smart testing:

(1) Test personnel on a back-to-back basis, i.e., on a Friday and then again on Monday.

(2) Perform weekend or holiday testing. These can be easily accomplished at the unit safety briefs prior to holiday or long weekends.

(3) Pre- and post-deployment testing should be done prior to any extended deployment and within 30 days upon return to garrison.

(4) Extended field time without the threat of testing is an open invitation to the use of illicit drugs. There are numerous ways that testing in a field environment can be accomplished.

(5) Test at the end of the duty day. Use the recall formation as a means of assembly.

(6) Do testing throughout the entire month. Vary the collection days, i.e., not just Thursdays, and not just during the beginning or ending weeks of a month. Remember the golden rule of smart testing is to be unpredictable in the way your unit tests.

b. The "Don'ts" of smart testing.

(1) Do not, under any circumstances, ask for volunteers. This may invalidate the randomization of the collection process and could lead to a challenge or defeat if taken into court.

(2) Do not post testing dates on the training schedule. This defeats the entire purpose of testing i.e., unpredictability.

(3) Do not let "shy bladders" off the hook. This is one of the ploys that illicit drug users have used in the past to avoid detection. "But Sarge, I can't go," "O.K., I'll catch you next time, 'cause I've got to get these other specimens turned-in for shipment." Always provide liquids and allow reasonable time limit for the collection process, i.e., four hours. If a Soldier has not been able to provide a specimen, then contact the unit commander for guidance. A medical evaluation to determine if a medical condition is precluding the specimen collection may be needed.

(4) Do not announce testing the day before. Prior notification allows Soldiers to dilute and flush their systems thus avoiding detection.

(5) Do not announce the impending testing of a unit by having the UPL walk through the unit area with the necessary collection supplies. If at all possible, DTCs should allow the units to maintain enough supplies to be able to test 100% of their respective units at any given time. Re-supply at turn-in of collected specimens, i.e., 25 turn-ins = 25 new bottles.

(6) Do not stop testing because it is the end of the duty day and you want to go home.

(7) Random selection is used to identify Soldiers to be tested. It allows commanders a way to test only part of their unit and ensures fairness throughout the unit. It is important to remember that all personnel selected will be tested; even if the number selected exceeds your quota. The collection procedure cannot be terminated when a certain number of specimens are collected. All specimens from personnel available will be collected. Excusing Soldiers and

getting volunteers can invalidate the randomization and thus invalidate the test results.

(8) It is imperative that you and the commander ensure that any random selection test is truly random or you risk the chance of a positive test being thrown out of court.

(9) Always use the correct Test Basis Code for all Urinalysis testing.

**Appendix O
Unit Prevention Leader (UPL) Certification Checklist**

Prior to a new UPL being certified by the ASAP the following actions must be taken and **initialed** by the unit commander:

The commander must ensure that the individual meets the UPL standards in AR600-85. Date Completed/CDR's Initials _____

The commander must have initiated a local and national background check and received favorable reports. Date Completed/CDR's Initials _____

The commander must request a UPL Certification Course slot from the ASAP. Date Completed/CDR's Initials _____

The commander must sign appointment orders, which include background check completed statement. Date Completed/CDR's Initials _____

The commander will ensure that the individual has received a negative drug test result not more than 60 days prior to UPL certification by the ASAP. Date Completed/CDR's Initials _____

As the Commander of _____, I certify that all of the required actions for _____, have been completed and reviewed by me.

Commander's Signature

Commander's Printed Name

Date UPL certified by ASAP: _____

ASAP staff member certifying UPL: _____

Appendix P Unit Urinalysis Ledger

1. Purpose. Completing the Unit Urinalysis Ledger is mandated by regulation and is necessary in conducting a urine specimen collection test.
2. Applicability. This SOP is applicable to the Installation Drug Testing Program. The Unit Urinalysis Ledger will be secured and retained by the unit.
3. References.
 - a. AR 600-85, Army Substance Abuse Program, 28 December 2012.
 - b. Army Center for Substance Abuse Programs (ACSAP) UPL Handbook, version 3.
4. Responsibilities. The Soldier and observer will sign the Unit Urinalysis Ledger. The UPL will initial the Unit Urinalysis Ledger in the appropriate block verifying the data is correct. Prior to initialing the form, the UPL should verify all data utilizing the checklist.
5. Procedural steps. The following steps will be followed in filling out the Unit Urinalysis Ledger:
 - a. The document/batch number, specimen number, SSN, unit identification code, Date specimen collected, and test basis recorded on the Unit Urinalysis ledger and the DD Form 2624 must match. (e.g., Blocks 4, 5,6,7,8, and 9 on the Unit Urinalysis Ledger and DD Form 2624 match.)
 - b. Block 1. Submitting Unit: Unit designation and address to include street, city, state, and zip code.
 - c. Block 2. UPL: Printed name (first, middle initial, last) of the UPL and initials.
 - d. Block 3. Phone number of submitting unit.
 - e. Block 4. Unit Identification Code.
 - f. Block 5. Date specimen collected (year, month, day) e.g. collection date of 1November 1993: 19931101. The date on the DD Form 2624 and the Unit Urinalysis Ledger must match.
 - g. Block 6. Document/Batch number. Each batch, box of 12 or fewer specimens, will be assigned a batch number with the first batch being 01,

the second 02, and the remaining numbered sequentially through 99. No more than one batch number may be recorded on one unit urinalysis ledger sheet.

h. Block 7. Specimen number. Specimen numbers will be from 1 thru 12. The specimen numbers on the DD Form 2624 and the Unit Urinalysis Ledger must match.

i. Block 8. SSN: Enter complete SSN of Soldiers to be tested. SSN on DD Form 2624 and Unit Urinalysis Ledger must match.

j. Block 9. Test Basis: Always use correct test code, (See Below)

DOD codes from ADTP:

Test Codes Uses

Inspection Random	IR	Random selection
Inspection Unit	IU	Total Unit Sweep
Probable Cause	PO	Based on SJA consult
Rehabilitation Testing	RO	Used for Soldiers currently in a drug/alcohol program
Command Directed	CO	Fitness for duty test
Consent	VO	Soldier volunteers for test
Mishap Investigation	AO	Accident
Medical	MO	Physician orders test
Other	IO	Make ups, new Soldiers

NOTE: Each DD Form 2624 is limited to one (1) test basis. For example: Do not record CO, IU, or PO test basis on the same DD Form 2624.

k. Block 10. Soldier's rank.

l. Block 11. Soldier prints name (first, middle initial, last) and payroll signature verifying that the ledger information is correct.

m. Block 12. Action taken/remarks. This will be used to document unusual circumstances (i.e., no ID card/missing SSN on new ID cards, identification verified by CSM, short sample, leave or TDY and tests results must be posted in this block).

n. Block 13. Printed name of observer (first, middle initial, last) and payroll signature.

NOTE: Do not send the Urinalysis Ledger to the FTDTL but it must accompany the specimens when turning in at the DTCP.

UNIT URINALYSIS LEDGER

1. SUBMITTING UNIT		2. UPL:		3. PHONE:		4. DATE SPECIMEN COLLECTED:		5. DATE SPECIMEN COLLECTED:	
6. DO COMBATY BATCH NUMBER	7. SPECIMEN NUMBER	8. COMPLETE SOCIAL SECURITY NUMBER	9. TEST BASIS	10. RANK	11. SOLDIER'S SIGNATURE SOLDIER'S PRINTED NAME	12. ACTION TAKER / REMARKS	13. OBSERVER'S SIGNATURE OBSERVER'S PRINTED NAME	14. UNIT IDENTIFICATION CODE	15. (YYYY) (MM) (DD)
01	1	456-78-9123	US	SFC	<i>Michael C. Biggerstaff</i> Michael C. Biggerstaff		<i>John Pfalser</i> John Pfalser		
01	2	987-65-4321	US	SPC	<i>A. B. Special</i> A. B. Special		<i>John Pfalser</i> John Pfalser		
01	3	123-46-9857	US	LTC	<i>John Q. Officer</i> John Q. Officer	First specimen short, 2nd attempt ok	<i>John Pfalser</i> John Pfalser		
01	4	102-34-5678	US	MSG	<i>Kimberly Henry</i> Kimberly Henry		<i>Brenda Phillips</i> Brenda Phillips		
01	5	010-34-5678	US	MSG	<i>William C. Carr</i> William C. Carr		<i>John Pfalser</i> John Pfalser		
01	6	999-88-8777	US	SGT	<i>James O. Dunn</i> James O. Dunn	No ID card, identity verified by ASG, SSN taken from Alpha roster	<i>John Pfalser</i> John Pfalser		
01	7	963-85-2741	US	SPC	<i>Malcolm F. Bigg</i> Malcolm F. Bigg		<i>John Pfalser</i> John Pfalser		
01	8	159-26-3487	US	LTC	<i>Kaylene Curtis</i> Kaylene Curtis		<i>Brenda Phillips</i> Brenda Phillips		
01	9	142-75-3869	US	1SG	<i>Michael R. Sweeney</i> Michael R. Sweeney		<i>John Pfalser</i> John Pfalser		
01	10	153-62-4789	US	MAJ	<i>Jordan E. Matthews</i> Jordan E. Matthews		<i>John Pfalser</i> John Pfalser		
01	11	751-95-3862	US	PFC	<i>David E. House</i> David E. House		<i>John Pfalser</i> John Pfalser		
01	12	753-95-1482	US	CPL	<i>Sean Cunningham</i> Sean Cunningham		<i>Brenda Phillips</i> Brenda Phillips		

Appendix Q Bottle Label

1. Purpose. It is imperative that the bottle label be completed with extreme care and accuracy. The most common errors made on the bottle label that result in the specimen being rejected for testing are non-matching social security numbers, illegible social security numbers, improper corrections, and incorrect testing date. It is critical that all information is annotated and legible.

2. Applicability. This SOP is applicable to all UPLs and the DTC conducting drug testing.

3. References.

a. AR 600-85, Army Substance Abuse Program, 28 December 2012.

b. Army Center for Substance Abuse Programs (ACSAP) UPL Handbook, version 3.

4. Responsibilities. The UPL is responsible for ensuring the bottle label is filled out correctly.

5. General.

a. Use **blue** ballpoint pens. (Other pens may cause running which may distort the form).

b. Do not use pencils or roller ball/felt tip pens.

Note: Do not allow a Soldier to fill a specimen bottle unless it has a label affixed to it, which includes the unit identification code, base area code, date, SSN, and Soldier's initials.

6. Procedural steps.

a. At a minimum the following five (6) items will be recorded on the specimen label:

(1) Date (year, month, and day). The same as on the DD Form 2624 and Unit Urinalysis Ledger, e.g., date collected, 1 November 1999, 19991101.

(2) Ensure all dates match.

(3) Complete SSN. Ensure all SSNs match.

(4) Base Area Code (BAC).

(5) Unit Identification Code (UIC).

(6) Soldier's initials.

(7) UPL's initials.

SAMPLE OF HANDWRITTEN LABEL

20050815	MW05
_____	_____
UPL Init	Donor Init
123-45-6789	Wxxxx

NOTE: The use of an "X" indicating placement of initials will not be used.
Hand written or computer generated label. Orientations of both labels are as they would appear on the bottle.

**SAMPLE OF
DTP GENERATED
BAR-CODED LABEL**

TAPE HERE		IR 0002 003		987-65-4321		9/30/2001	UPL _____	SM _____	P103	WAAAAA	TAPE HERE
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Appendix R Making Corrections

1. Purpose. Quality assurance is part of all ASAP operations, but is particularly critical in processing biochemical specimens. Quality assurance will assure that drug testing is properly conducted.
2. Applicability. This SOP is applicable to all UPLs and the DTC conducting drug testing.
3. References.
 - a. AR 600-85, Army Substance Abuse Program, 28 December 2012.
 - b. Army Center for Substance Abuse Programs (ACSAP)UPL Handbook, version 3.

4. Procedures.

- a. The DTC, Assistant DTC, or UPL will ensure that no urine specimen is forwarded to a FTDTL unless the specimen and accompanying DD Form 2624 are free from errors. Discrepancies must be corrected as specified below.
- b. Only the person making the error can make the correction on the DD Form 2624 or bottle label. Corrections will be made as follows:

See Figures 9-6 for handwritten bottle label and DD Form 2624 correction examples. Figure 9-7 as an example of a corrected bar-coded DD Form 2624.

1. Line (draw a single line) through the faulty information.
2. Write the correct information directly above the faulty information
3. Place your initials and the date close to the correction.
4. Never write over any number or letter.

NOTE: Bar coded labels and DD Forms 2624 can be corrected. Line through the incorrect SSN with a single line and write the correct SSN next to the incorrect one, initial and date. With a black marker blacken out the front half of the bar code.

5. Certificate of Correction: If corrections cannot be made neatly on the DD Form 2624 or the specimen bottle label by the individual who made the error, a Certificate of Correction should be used to correct and verify the process. See figures 9-8 and 9-9 for example Certificate of Correction.

6. The Certificate of Correction will be filled out noting the faulty information as it now reads and the correct information as it should read.
7. The Certificate of Correction will be signed and dated by the UPL and verified by the commander or the DTC.
8. The Certificate of Correction will not be used to make corrections on the unit urinalysis ledger.
9. Corrections to the unit urinalysis ledger will be made following the procedures listed in ACSAP UPL Handbook.

FIGURE 9-6

EXAMPLE OF
CORRECTED BOTTLE LABEL

20020109	MW03
<u>MCB</u> UPL init	<u>BCP</u> Donor Init
123-45-6789	6 MCB 1/9/02

EXAMPLE OF CORRECTED DD FORM 2624

SPECIMEN CUSTODY DOCUMENT - DRUG TESTING						A. LABORATORY CONDUCTING DRUG TESTING		
1. SUBMITTING UNIT			2. ADDITIONAL SERVICE INFORMATION (Second Echelon)			B. BATCH NUMBER		C. REPORT OF RESULT (DTG/Serial No.)
850 All American City Ave Bldg 6781 Fort NoWhere, VA 12345			740 123rd Avn Bldg Fort NoWhere, VA 12345					
3. BASE/AREA CODE	4. UNIT IDENTIFICATION CODE	5. DOCUMENT/BATCH NUMBER	6. DATE SPECIMEN COLLECTED (YYYY) (MM) (DD)			D. DRUGS TESTED		
F C 1 2	W 2 L A A A	0 0 0 1	1 9 9 8	0 2	2 8			
7. SPECIMEN NUMBER	8. COMPLETE SSN	9. TEST BASIS	10. TEST INFORMATION	11. PRESCREEN THC COC	E. DISC CODE	F. ACCESSION NUMBER	G. RESULT	
(1)	123-45-6789	US	A					
(2)	234-56-7890	US	A					
(3)	345-67-8901	US	B					
(4)	456-78-9012	US	A				Not Used AIR, 28 Feb 98	
(5)	567-89-0123	US	A					
(6)	678-90-1234	US	B					
(7)	789-01-2345	US	B					
(8)	890-12-3456	US	B					
(9)	901-23-4567	US	B					
(10)	012-34-5678	US	A					
(11)	987-65-4321	US	B					
(12)	876-54-3210	US	B					
H. CERTIFICATION. I certify that I am a laboratory certifying official, that the laboratory results indicated on this form were correctly determined by proper laboratory procedures, and that they are correctly annotated.						(3) CERTIFYING OFFICIAL (Printed Name and Title)		
(1) SIGNATURE				(2) DATE SIGNED				

Appendix S
Certificate of Correction

CERTIFICATE OF CORRECTION

MEMORANDUM FOR:

SUBJECT: Certificate of Correction

1. This letter is to certify the following corrections were made as indicated below for urine specimen enclosed with this shipment for testing.

2. REFERENCE: () BOTTLE LABEL () DD FORM 2624

DOCUMENT/BATCH _____ SPECIMEN _____

READS AS:

CORRECTED TO READ AS:

SIGNATURE: _____

DATE: _____

TITLE: _____

VERIFIED BY: _____

DATE: _____

TITLE: _____

CERTIFICATE OF CORRECTION

MEMORANDUM FOR: The FTDTL for your installation, street address, city, state, zip code

SUBJECT: Certificate of Correction

1. This letter is to certify the following corrections were made as indicated below for urine specimen enclosed with this shipment for testing.

2. REFERENCE: () BOTTLE LABEL (X) DD FORM 2624

DOCUMENT/BATCH 0002 SPECIMEN 005

READS AS: 110-54-4224
CORRECTED TO READ AS: 118-54-4224

SIGNATURE: Alan R. York
Date: 8 Jan 99
TITLE: UPL, HQ BN

VERIFIED BY: Edward B. Commander
Date: 8 Jan 99
TITLE: Commander, HQ BN

Appendix T

Specimen Custody Document-Drug Testing (DD Form 2624)

1. Purpose: It is imperative that the DD Form 2624 be completed with extreme care and accuracy. One of the most important aspects of collecting urine specimens is maintaining the Specimen Custody Document Drug Testing (DD Form 2624). Attention to detail and the ability to write clearly are imperative. The most common errors made on the chain of custody documents that result in the specimen being rejected for testing are non-matching social security number, incomplete social security numbers, and improperly made corrections.

NOTE: Utilizing the DOD Drug Testing Program (DTP) can eliminate most errors. This program will preprint the DD Forms 2624, unit ledgers, and specimen labels. See ACSAP UPL Handbook, version 3. The DTP is the mandatory method at Fort Meade.

2. Applicability: This SOP is applicable to Commanders, DTC, and UPLs.

3. Reference: Army Center for Substance Abuse Programs (ACSAP) UPL Handbook UPL, version 3.

4. Responsibilities: The DTC, alternate DTC, and/or UPLs are responsible for completing and/or maintaining the DD Form 2624.

5. Procedures: Data on the front of the DD Form 2624 and label may be typed. Electronic forms may be used. Chain of Custody on the back of DD Form 2624 should be hand written, except that rubber stamps may be procured to stamp appropriate spaces on Block 12 of the DD Form 2624. Example stamps are: "place in temporary storage," "released to US Mail," etc. (See ACSAP UPL Handbook). The following steps will be used in filling out the DD Form 2624.

NOTE: Only blue ballpoint pens should be used in filling out all paperwork associated with the collection process. Roller ball pens, felt tip pens, and pencils will not be used.

- a. Block 1. Specific unit name and address to include street, city, state, and zip code.
- b. Block 2. (ASAP LOCATION) (Location where the FTDTL results are sent).
- c. Block 3. Base/Area Code for the installation. (INSTALLATION BAC CODE)
- d. Block 4. Unit Identification Code (UIC). Every unit has a separate six-digit UIC code.

e. Block 5. Document/Batch Numbers are assigned locally. DD form 2624 will be assigned a separate batch number. The first document batch number will be 0001, the second 0002, and the remaining numbered sequentially through 0099. With a new date the batch number will reset to 0001. Only one document/batch number per DD Form 2624 will be used.

NOTE: The first 2 spaces may be left blank.

f. Block 6. Date specimen collected (year, month, and day), e.g.,
Collection date: "1 November 1999," should be written as 19991101.

g. Block 7. Specimen number - leave blank. The pre-printed number on the DD Form 2624 will be used as the specimen number.

h. Block 8. Enter complete SSN of Soldier to be tested.

i. Block 9. Test basis. (UPL make sure you use the correct code for each test, if not sure of test basis; call the DTC)

DOD Codes from ADTP:

Test Codes Uses

Inspection Random	IR	Random selection
Inspection Unit	IU	Total Unit Sweep
Probable Cause	PO	Based on SJA consult
Rehabilitation Testing	RO	Used for Soldiers currently in a drug/alcohol program
Command Directed	CO	Fitness for duty test
Consent	VO	Soldier volunteers for test
Mishap Investigation	AO	Accident
Medical	MO	Physician orders test
Other	IO	Make ups, new Soldiers

NOTE: Each DD Form 2624 is limited to one test basis. For example: Do not record CO, IO, or IU test basis on the same DD Form 2624.

j. Block 10. Test Information.

A = E-1 thru E-4
B = E-5 thru O-10

k. Block 11. Leave blank

l. Block 12. Chain of Custody (DD Form 2624).

(1) The UPL makes corrections on the bottle label and DD Form 2624 as prescribed by the UPL Handbook.

(2) The UPL will release the specimens to the DTC, who in turn will release the specimens to the courier or storage.

NOTE: Local reproduction (excluding computer generated) of DD Form 2624 is not authorized. The DD Form 2624 is a single sheet form, printed front to back. Supplies will be obtained from unit supply or DTC. Do not use a copy machine to reproduce this form.

NOTE: Only the original (two-sided) DD Form 2624 will be sent to the FTDTL. The FTDTL may reject all specimens for testing that are accompanied by a copy of the DD Form 2624.

m. Male and female specimens do not need to be maintained on a separate DD Form 2624.

n. After completion of the test, the UPL will verify information on the DD Form 2624 and check the forms for errors.

12. CHAIN OF CUSTODY		LAN	THRU	INSTRUCTIONS			
DATE (YYMMDD)	RELEASED BY b.	RECEIVED BY c.	PURPOSE OF CHANGE/ REMARKS d.	BLOCK	USA		
(1)	SIGNATURE NAME	SIGNATURE NAME		1 SUBMITTING UNIT ADDITIONAL SERVICE INFORMATION (SECOND ECHELON)	Message address of unit submitting urine samples Do not use	USAF Optional. May be used to identify the base POC.	
(2)	SIGNATURE NAME	SIGNATURE NAME		2 BASE/AREA CODE	Service Code Area Leave Blank. For future use.	Four character Base Identification Code (Ex. F123). Omit the first four characters of the full 10-character Base Identification Number.	
(3)	SIGNATURE NAME	SIGNATURE NAME		4 UNIT IDENTIFICATION CODE	Unit Identification Code (UIC or RUC) of unit submitting urine sample. Do not use	Do not use	
(4)	SIGNATURE NAME	SIGNATURE NAME		5 DOCUMENT/BATCH NUMBER	Enter the locally assigned batch number. Each batch of 12 samples, or portion thereof, shall be assigned a separate number by the submitting unit. Do not use	3-digit batch number common to all specimens in the shipment (Ex. 501). Comprises the middle part of the full 10 character BDM assigned to each specimen	
(5)	SIGNATURE NAME	SIGNATURE NAME		6 DATE SPECIMEN COLLECTED	Enter the four-digit year, two-digit month, and two-digit day that the samples were collected by submitting unit.		
(6)	SIGNATURE NAME	SIGNATURE NAME		7 SPECIMEN NUMBER	Use number pre-printed on form to itemize bottle.	Enter 3-digit sequential specimen number (last 3 characters of full BDM)	
(7)	SIGNATURE NAME	SIGNATURE NAME		8 COMPLETE SSN	Full SSN of person from whom sample obtained.		
(8)	SIGNATURE NAME	SIGNATURE NAME		9 TEST BASIS	Indicate the testing premise to conduct the collection. 0-Blank A-ET-COP-CD-016; B-Other C-TOP D-Other E-Other F-Other G-Other H-Other I-Other J-Other K-Other L-Other M-Other N-Other O-Other P-Other Q-Other R-Other S-Other T-Other U-Other V-Other W-Other X-Other Y-Other Z-Other AA-Other BB-Other CC-Other DD-Other EE-Other FF-Other GG-Other HH-Other II-Other JJ-Other KK-Other LL-Other MM-Other NN-Other OO-Other PP-Other QQ-Other RR-Other SS-Other TT-Other UU-Other VV-Other WW-Other XX-Other YY-Other ZZ-Other AAA-Other BBB-Other CCC-Other DDD-Other EEE-Other FFF-Other GGG-Other HHH-Other III-Other JJJ-Other KKK-Other LLL-Other MMM-Other NNN-Other OOO-Other PPP-Other QQQ-Other RRR-Other SSS-Other TTT-Other UUU-Other VVV-Other WWW-Other XXX-Other YYY-Other ZZZ-Other AAA-Other BBB-Other CCC-Other DDD-Other EEE-Other FFF-Other GGG-Other HHH-Other III-Other JJJ-Other KKK-Other LLL-Other MMM-Other NNN-Other OOO-Other PPP-Other QQQ-Other RRR-Other SSS-Other TTT-Other UUU-Other VVV-Other WWW-Other XXX-Other YYY-Other ZZZ-Other	Leave Blank.	Enter required only if additional testing is requested. Full P and S; S is required. Other driver Provide clarification in attached message.
(9)	SIGNATURE NAME	SIGNATURE NAME		10 TEST INFORMATION	If screened (field tested) prior to submission and found positive, indicate P for positive or N for negative for drug(s) pre-screened. Leave blank if not screened prior to submission to lab.	Not used	
(10)	SIGNATURE NAME	SIGNATURE NAME		11 PRESCREEN			
12. CHAIN OF CUSTODY (LINE (1))							
a. DATE - Date of collection/shipment.							
b. RELEASED BY - Signature and printed or typewritten name of the urinalysis coordinator having custody of the samples.							
c. RECEIVED BY - Use only if physical change of custody is occurring prior to shipment. Otherwise leave blank.							
d. PURPOSE OF CHANGE/REMARK - Specify the mode of accountable transportation/system utilized to ship specimens to the lab.							
NOTE: If/when custody of specimens changes other than for shipment (unless hand carried to lab), each change of custody requires line number signatures in the (b) RELEASED BY and (c) RECEIVED BY blocks to document change in custody with comment in block (d). If a continuation sheet is necessary, it must contain information/signatures of blocks (b) - (d).							
13. DAMAGE TO SHIPPING CONTAINER/DISCREPANCIES							
DD Form 2624, FEB 93 (Back)							

SAMPLE
DO NOT USE

12. CHAIN OF CUSTODY		LAN	THRU	INSTRUCTIONS							
DATE (YYMMDD)	RELEASED BY b.	RECEIVED BY c.	PURPOSE OF CHANGE/ REMARKS d.	BLOCK	USA	USN/MC	USAF				
(1) 020315	SIGNATURE <i>Alan R. UPL</i> NAME Alan R. UPL	SIGNATURE <i>Safe</i> NAME Room 222, Bldg 4964	Specimens placed in Temporary Storage	1 ADDITIONAL SERVICE INFORMATION (SECOND ECHOLON)	Do not use	Message address of unit submitting urine samples	Optional. May be used to identify the base POC.				
(2) 020316	SIGNATURE <i>Safe</i> NAME Room 222, Bldg 4964	SIGNATURE <i>Alan R. UPL</i> NAME Alan R. UPL	Specimens retrieved from Temporary Storage	2 BASE/AREA CODE	Service Code Area	Leave Blank. For future use.	Four-character Base Identification Code (Ex. F123). Complete the first four characters of the full 10-character Base Identification Number.				
(3) 020316	SIGNATURE <i>Alan R. UPL</i> NAME Alan R. UPL	SIGNATURE <i>Jennifer S. IBTC</i> NAME Jennifer S. IBTC	Specimens received by IBTC	4 UNIT IDENTIFICATION CODE	Unit Identification Code (UIC or RUC) of unit submitting urine sample.	Do not use	Do not use				
(4) 020316	SIGNATURE <i>Jennifer S. IBTC</i> NAME Jennifer S. IBTC	SIGNATURE <i>UPS</i> NAME UPS	Specimens mailed to FTDTL by UPS	5 DOCUMENT/BATCH NUMBER	Do not use	Enter the locally assigned batch number. Each batch of 12 samples, or partition thereof, shall be assigned a separate number by the submitting unit.	3-digit batch number common to all specimens in the shipment (Ex. 501). Comprises the middle part of the full 10 character BION assigned to each specimen.				
(5) 020316	SIGNATURE <i>Jennifer S. IBTC</i> NAME Jennifer S. IBTC	SIGNATURE <i>UPS</i> NAME UPS	Specimens mailed to FTDTL by UPS	6 DATE SPECIMEN COLLECTED	Enter the four-digit year, two-digit month, and two-digit day that the samples were collected by submitting unit.		Enter 3-digit sequential specimen number (last 3 characters of full BION).				
(6)	SIGNATURE <i>UPS</i> NAME UPS	SIGNATURE <i>UPS</i> NAME UPS		7 SPECIMEN NUMBER	Use number pre-printed on form to itemize bottle.		Enter 3-digit sequential specimen number (last 3 characters of full BION).				
(7)	SIGNATURE <i>UPS</i> NAME UPS	SIGNATURE <i>UPS</i> NAME UPS		8 COMPLETE SSN	Full SSN of person from whom sample obtained.		Enter 3-digit sequential specimen number (last 3 characters of full BION).				
(8)	SIGNATURE <i>UPS</i> NAME UPS	SIGNATURE <i>UPS</i> NAME UPS		9 TEST BASIS	Indicate the testing premise to conduct the collection.		Enter required only if additional testing is requested: F (Full Panel); S (Steroid); O (Other drug); P (Provide clarification in attached narrative).				
(9)	SIGNATURE <i>UPS</i> NAME UPS	SIGNATURE <i>UPS</i> NAME UPS		10 TEST INFORMATION	Leave Blank.		Enter required only if additional testing is requested: F (Full Panel); S (Steroid); O (Other drug); P (Provide clarification in attached narrative).				
(10)	SIGNATURE <i>UPS</i> NAME UPS	SIGNATURE <i>UPS</i> NAME UPS		11 PRESCREEN	If screened (field tested) prior to submission and found positive, indicate P for positive or N for negative for drug(s) pre-screened. Leave blank if not screened prior to submission to lab.		Not used				
DD Form 2624, FEB 93 (Back)				12. CHAIN OF CUSTODY (LINE 11): a. DATE - Date of collection/shipment. b. RELEASED BY - Signature and printed or typewritten name of the urinalysis coordinator having custody of the samples. c. RECEIVED BY - Use only if physical change of custody is occurring prior to shipment. Otherwise leave blank. d. PURPOSE OF CHANGE/REMARK - Specify the mode of accountable transportation/system utilized to ship specimens to the lab. NOTE: If when custody of specimens changes other than for shipment (unless hand carried to lab), each change of custody requires line number signatures in the (b) RELEASED BY and (c) RECEIVED BY blocks to document change in a custody with comment in block (d). If a continuation sheet is necessary, it must contain informational signatures of blocks (a) - (d).				13. DAMAGE TO SHIPPING CONTAINER/DISCREPANCIES			

Appendix U

Refusal and Failure to Provide a Specimen

1. Purpose. Defines the protocol for donors who fail to produce a specimen, provide an in- complete specimen, or refuse to provide a specimen.
2. Applicability. To all donors who fail or refuse to provide a sufficient amount of a specimen to be tested by the FTDTL.
- 3: Reference. AR 600-85, Army Substance Abuse Program, dated 28 December 2012
4. Procedures.
 - a. Failure to produce a specimen.
 - (1) If the Soldier is unable to produce a specimen after entering the latrine, he/she will notify the observer.
 - (2) The Soldier will recap the bottle and return the bottle to the UPL.
 - (3) The Soldier will return to the UPL table with the observer and give the specimen bottle to the UPL who will destroy the bottle.
 - (4) The Soldier will be placed in a holding area until able to provide a specimen.
 - b. Failure to produce a complete specimen:
 - (1) If the Soldier is unable to produce a full specimen 30 mL after entering the latrine, he/she will notify the observer. The Soldier will recap the bottle, return to the UPL table, and give the specimen bottle to the UPL who will destroy the bottle. The Soldier will be placed in a holding area until a specimen is provided.
 - (2) If the Soldier is unable to produce a full specimen 30 mL after a reasonable time, the Soldier will notify the observer. The observer will direct the Soldier to pour the urine from the specimen bottle down the urinal and recap the specimen bottle. The Soldier will then return to the UPL table and give the specimen bottle to the UPL who will destroy the bottle and label. The Soldier will be placed in a holding area until a specimen is provided.
 - (3) The holding area will be supervised by an officer or NCO, E-5 or above, as directed by the unit commander. After a reasonable time, the unit commander will be advised of the status of any

Soldier still in the holding area. The commander will take actions, as necessary, to ensure the process is completed. A Soldier will not be released from duty until a specimen has been properly submitted or as directed by the command authority.

c. Refusal to provide a specimen. If a Soldier refuses to provide a specimen, the appropriate command authority will be notified. The Soldier's chain of command should give the Soldier a direct order to provide a specimen. If the Soldier then refuses, it will be a violation of a direct order. Violation of a lawful order is subject to disciplinary action under UCMJ. Possible actions include courts-martial proceedings and processing for separation.

d. Commanders will not order or force a Soldier to submit to blood testing based solely on the refusal or inability to provide a urine specimen.

NOTE: Menstruation, pregnancy, or taking medication for a urinary tract infection does not excuse a Soldier from providing a specimen.

Appendix V
Special Test Request Memorandum

MEMORANDUM FOR: The FTDTL or Special Laboratory
Street Address
City, State, Zip Code

Date: _____

SUBJECT: SPECIFIC TEST REQUEST FOR A FOURTH/FIFTH DRUG TESTED

1. Please test the following specimens for:

LSD PCP Opiates Barbiturates

Document Batch Number _____

Specimen(s) _____

OR

2, SPECIAL TEST REQUEST:

Please test the following for: _____

Document Batch Number _____

Specimen(s) _____

3. The commander of this/these Soldiers has discussed probable cause and/or drug trends with OSJA and the ADCO.

4. POC is CPT Smith at (111)-111-1111 or DSN: 999-1111

John J. Smith
CPT, AR
Commander

Appendix W
Testing Area Signs

LATRINE

OFF

LIMITS

URINALYSIS

HOLDING

AREA

UPL TESTING STATION

**HAVE YOUR ID CARD READY AND BE ABLE
TO PROVIDE A SPECIMEN NOW!**

URINALYSIS TESTING AREA

OFF LIMITS

Appendix X Observer's Memorandum

MEMORANDUM FOR OBSERVERS

SUBJECT: Responsibilities of Observers during Drug Testing

General:

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 this Memorandum for Record.

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 processed for separation.

3. The results of tests may be used in legal proceedings and consequently the urine specimen may be 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 if it is discovered that the specimen was altered in any way while it was under your control. Actions may include, but are not limited to the following:

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.

Article 107: Making a false official statement in signing the UPL's urinalysis ledger 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.

Criteria for Observers:

1. Be an Officer or NCO in the rank of E-5 or above.
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.

Responsibilities: As outlined in AR 600-85, an observer must follow protocol during urinalysis collection procedures.

Once assigned to a specific Soldier:

1. Observer controls the urine collection process at all times.
 2. Maintains visual contact with the bottle at all times.
 3. Ensures the Soldier washes his/her hands with water only, no soap, prior to providing a specimen.
 4. Ensures that the specimen provided is not contaminated or altered.
 5. Directly observes the Soldier (one Soldier at a time per observer) voiding urine into the specimen bottle. (When the optional wide mouth specimen collection container is used, immediately after the collection and while still under direct observation of the observer, the urine must be poured into the currently approved urine specimen bottle and tightly capped by the Soldier providing the specimen.)
 6. Ensures direct observation of the flow of urine from the Soldier's body into the bottle.
7. Supervises the Soldier tightly capping the bottle.
 8. Ensures the bottle is not reopened after the cap is tightened.
 9. Escorts the Soldier back to the UPL station/table with bottle in full view.
 10. Observes the UPL placing tamper evident tape over the top of the bottle, and across the label. Not to cover printed information.
 11. Observes the UPL place the specimen in the collection box.
12. The observer will sign the unit ledger in front of the UPL and Soldier verifying the collection process and direct observation was conducted.

OBSERVER AFFIDAVIT: I have read 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.

_____	_____	_____
Observer's Printed Name	Observer's Signature	Date
_____	_____	_____
UPL's Printed Name	UPL's Signature	Date

Appendix - Y Commander's Briefing

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

Every specimen collected will be tested for Marijuana (THC); Cocaine; Amphetamines

(Methamphetamines, MDMA (ecstasy), MDA, and MDEA); Heroin; Opiates (Codeine, Morphine, Hydrocodone, Hydromorphone, Oxycodone, and Oxymorphone); and Benzodiazepines prescription drugs (Lorazepam, Nordiazepam, Oxazepam, Temazepam, and a-hydroxy-alprazolam).

Synthetic Cannabinoids (Spice) will be chosen 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 135-18, AR 135-178, and AR 635-10.

DOES ANYONE HAVE ANY QUESTIONS?

The UPL will now provide you with details about the drug testing procedures that will be used today.

Appendix - Z UPL'S UNIT BRIEF

You have four major responsibilities during the collection procedure:

1. Initial the specimen bottle label verifying your personal data is correct
2. Provide more than 30ml of specimen.
3. Keep specimen bottle in full sight until sealed with tamper evident tape.
4. Sign your payroll signature to verify that the specimen was yours and you watch it being sealed by the UPL with tamper evident tape and placed in the collection box.

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

Each bottle will have a label affixed to it with today's date that identifies you by your SSN. Do not accept a bottle that does not have a completed label affixed with your correct SSN and today's date.

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 (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 ACU jackets and coats or PT tops.

You will initial the bottle label after you verify your SSN, full name, and date on the Unit Urinalysis Ledger; verify SSN on DD Form 2624; and verify the date and your SSN on the bottle label.

Provide a urine specimen under direct observation.

Sign your payroll signature on the Unit Urinalysis Ledger verifying that the urine specimen provided was yours, the specimen was sealed with tamper evident tape and was 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.

***** UNCLASSIFIED/ *****

Subject: ALARACT 310/2013 - EXPANSION OF SYNTHETIC CANNABINOIDS TO MILITARY URINALYSIS TESTING

Originator: /C=US/O=U.S.

GOVERNMENT/OU=DOD/OU=ARMY/OU=ORGANIZATIONS/L=CONUS/L=WASHINGTON

DC/OU=USAITA(UC)/OU=ALARACT RELEASE AUTHORITY(UC)

DTG: 221513Z Nov 13

Precedence: ROUTINE

DAC: General

To: AL ALARACT(UC), ALARACT

UNCLASSIFIED/

THIS MESSAGE HAS BEEN TRANSMITTED BY USAITA ON BEHALF OF//DAPE-AR//

SUBJECT: EXPANSION OF SYNTHETIC CANNABINOIDS TO MILITARY URINALYSIS TESTING

1. REFERENCES:

A. DEPARTMENT OF DEFENSE INSTRUCTION 1010.16, "TECHNICAL PROCEDURES FOR THE MILITARY DRUG ABUSE TESTING PROGRAM (MPDATP)," 10 OCTOBER 2012//

B. UNDER SECRETARY OF DEFENSE (PERSONNEL AND READINESS) MEMORANDUM, UPDATE TO THE DEPARTMENT OF DEFENSE DRUG TESTING PANEL, 25 OCTOBER 2013//

C. UNDER SECRETARY OF DEFENSE (PERSONNEL AND READINESS) MEMORANDUM, PROGRAM GUIDANCE - INCLUSION OF RANDOM SYNTHETIC CANNABINOIDS TO THE DRUG DEMAND REDUCTION PROGRAM DRUG PANEL,

1 NOVEMBER 2013//

D. AR 600-85, ARMY SUBSTANCE ABUSE PROGRAM, RAPID ACTION REVISION (RAR), 28 DECEMBER 2012//

2. PER REFERENCE B, WITHIN THE NEXT 90 DAYS, THE DEPARTMENT OF DEFENSE (DOD) WILL EXPAND MILITARY DRUG TESTING OF THE MORE COMMONLY-ABUSED SYNTHETIC CANNABINOIDS BEGINNING WITH SPICE AND BATH SALTS. THE CHEMICAL STRUCTURE OF SYNTHETIC CANNABINOIDS IS SIMILAR TO TETRAHYDROCANNABINOL (THC) AND PRODUCES A PSYCHOACTIVE RESPONSE IN THE HUMAN BRAIN LIKE THC. SOLDIERS WHO ARE USING SYNTHETIC CANNABINOIDS ARE ENCOURAGED TO VOLUNTARILY SEEK MEDICAL TREATMENT AND REHABILITATION FOR THEMSELVES IN A MILITARY MEDICAL TREATMENT FACILITY ON A SELF-REFERRAL BASIS NOW. EXPANSION OF URINE TESTING FOR THESE DRUGS WILL BEGIN WITHIN THE NEXT 90 DAYS.

3. THE DOD AND ARMY POLICIES STATE THAT INDIVIDUALS WHO DO NOT SELF-REFER FOR TREATMENT AND WHO SUBSEQUENTLY TEST POSITIVE FOR USE OF ILLEGAL OR UNAUTHORIZED SUBSTANCES MAY BE CONSIDERED IN VIOLATION OF THE UNIFORM CODE OF MILITARY JUSTICE FOR DRUG MISUSE/ABUSE.

4. THE SECRETARY OF THE ARMY BANNED USE AND POSSESSION OF ALL SYNTHETIC CANNABINOIDS IN FEBRUARY 2011 AND APPROVED ARMY DIRECTIVE 2012-14 (PROHIBITED SUBSTANCES (CONTROLLED SUBSTANCES ANALOGUES)) IN MAY 2012 THAT INCLUDED BATH SALTS. THESE PROHIBITIONS WERE INCORPORATED INTO THE DECEMBER 2012 REVISION OF AR 600-85. PUBLIC LAW 112-144, SUBTITLE SYNTHETIC DRUG ABUSE PREVENTION ACT OF 2012, INCLUDED NUMEROUS SYNTHETIC COMPOUNDS THAT ARE NOW SCHEDULE I CONTROLLED SUBSTANCES.

5. SOLDIERS SEEKING SUBSTANCE ABUSE COUNSELING CAN TALK TO THEIR DOCTOR, CHAIN OF COMMAND OR SELF-REFER TO THE ARMY SUBSTANCE ABUSE PROGRAM (ASAP). THE ASAP STANDS READY TO ASSIST SOLDIERS IF NEEDED.

6. IN ADDITION, MILITARY ONESOURCE HAS CONTRACTED CIVILIAN COUNSELORS THAT PROVIDE CONFIDENTIAL ASSESSMENT AND COUNSELING TO MILITARY PERSONNEL.

MILITARY ONESOURCE CAN BE CONTACTED AT 1-800-342-9647, OR THROUGH THE WEB AT:

WWW.MILITARYONESOURCE.COM/MOS/ABOUT/COUNSELINGSERVICES.ASPX.

7. POINT OF CONTACT IS DR. LES MCFARLING, DIRECTOR, ARMY CENTER FOR SUBSTANCE ABUSE PROGRAMS, EMAIL LESLIE.H.MCFARLING.CIV@MAIL.MIL, DSN 671-7224/COM (703) 571-7224.

8. THIS MESSAGE WAS APPROVED BY THE DCS, G-1.

9. EXPIRATION DATE CANNOT BE DETERMINED.

ALARACT 062/2011

DTG: P 232349Z FEB 11

THIS MESSAGE HAS BEEN SENT BY THE PENTAGON TELECOMMUNICATIONS CENTER ON BEHALF OF DA WASHINGTON DC//DASG-HSZ/DAMO-DASG//

THIS ALARACT MESSAGE IS BEING SENT ON BEHALF OF THE SURGEON GENERAL//

SUBJECT: ALARACT CHANGES TO LENGTH OF AUTHORIZED DURATION OF CONTROLLED SUBSTANCE PRESCRIPTIONS IN MEDCOM REGULATION 40-51

REF/A/CONTROLLED SUBSTANCE ACT OF 1970//

REF/B/ MEDCOM REGULATION 40-51/MEDICAL REVIEW OFFICERS AND REVIEW OF POSTIVE URINALYSIS DRUG TESTING RESULTS//

REF/C/OTSG/MEDCOM POLICY MEMO 10-076/PREVENTION AND MANAGEMENT OF POLYPHARMACY/09NOV10//

1. (U) PURPOSE: TO INFORM MEDICAL PROVIDERS, COMMANDERS, AND SOLDIERS OF CHANGES IN MEDCOM REGULATION 40-51, WHICH WILL IDENTIFY NEW REQUIREMENTS FOR AUTHORIZED DURATION OF USE OF CONTROLLED SUBSTANCE PRESCRIPTIONS.

2. (U) BACKGROUND:

2.A. (U) THE ARMY HEALTH PROMOTION, RISK REDUCTION, SUICIDE PREVENTION REPORT RECOMMENDED LIMITING THE PERIOD OF TIME FOR APPROPRIATE USE OF ANY PRESCRIPTION TO ONE YEAR.

2.B. (U) FEDERAL REGULATIONS LIMIT THE DURATION OF CONTROLLED SUBSTANCE PRESCRIPTIONS TO SIX-MONTHS (E.G., A PRESCRIPTION MUST BE FILLED WITHIN SIX-MONTHS OF THE DATE THE PRESCRIPTION IS WRITTEN).

3. (U) EXECUTION:

3.A. (U) MEDCOM REGULATION 40-51 WILL BE REVISED LIMITING THE DURATION OF AUTHORIZED USE OF CONTROLLED SUBSTANCE PRESCRIPTIONS.

3.B. (U) PRESCRIPTIONS FOR CONTROLLED SUBSTANCES (SCHEDULES II-V) WILL HAVE AN AUTHORIZED USE OF SIX-MONTHS FROM DATE OF DISPENSING.

4. (U) RESPONSIBILITIES:

4.A. (U) MEDICAL PROVIDERS WILL PRESCRIBE ONLY THE MINIMUM QUANTITY OF CONTROLLED SUBSTANCES NECESSARY TO TREAT AN ACUTE ILLNESS OR INJURY. QUANTITIES OF CONTROLLED SUBSTANCES USED TO TREAT ACUTE CONDITIONS WILL NOT EXCEED A 30-DAY SUPPLY. PROVIDERS WILL ROUTINELY ASSESS THE PATIENT FOR MEDICATION EFFECTIVENESS AND ADVERSE EVENTS.

4.B. (U) PROVIDERS USING CONTROLLED SUBSTANCE MEDICATIONS TO TREAT CHRONIC CONDITIONS MAY PRESCRIBE A 30-DAY SUPPLY OF MEDICATION WITH UP TO 5-REFILLS. PROVIDERS SHOULD SCHEDULE FREQUENT, BRIEF CLINICAL VISITS WITH THE PATIENT TO ASSESS MEDICATION COMPLIANCE, PATIENT BEHAVIORS, THE POTENTIAL FOR OVERMEDICATION, AND DRUG DIVERSION OR ABUSE.

4.C. (U) MILITARY TREATMENT FACILITY OR CLINIC STAFF WILL EDUCATE SOLDIERS ON THE LIMITATIONS FOR AUTHORIZED USE OF CONTROLLED SUBSTANCES.

4.D. (U) SOLDIERS WILL UNDERSTAND THAT CONTROLLED SUBSTANCE PRESCRIPTIONS WILL HAVE AN EXPIRATION DATE AND THAT A POSITIVE URINALYSIS AFTER THE PRESCRIPTION EXPIRATION DATE MAY RESULT IN A "NO LEGITIMATE USE" FINDING.

5. (U) POCS:

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6. (U) EXPIRATION DATE: 60-DAYS AFTER REVISED MEDCOM REGULATION 40-51
IS PUBLISHED.