



1 September 1998

Medical

DRUG ABUSE TESTING PROGRAM

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

AFI 44-120, 1 April 1997 is supplemented as per the following paragraphs and attachments.

2.5.3.3.1. (Added) The MTF/CC will appoint a Drug Testing Program Administrative Manager (DTPAM) and alternate in writing. The MTF/CC will ensure that all appointees are trained in carrying out their duties and responsibilities. An information copy of the letter of appointment will be forwarded to the Wing Social Actions Office.

2.5.4.2. One hour prior to the end of the testing period, the DTPAM, using the roster provided by the Demand Reduction Program Manager, will notify each unit commander of individuals in their organization who have not yet arrived for testing. Failure to appear as ordered should be dealt with by appropriate administrative or military justice proceedings, after consultation with the Staff Judge Advocate.

2.5.5.9. The DTPAM will brief observers and have them sign the Drug Testing Observers Briefing (See Attachment 4).

2.5.6.4. Members of the California Air National Guard who are selected for testing, but who are not available due to TDY or excused absence will be excused from that testing cycle for that Unit Training Assembly (UTA).

2.5.6.7. All administrative actions taken by the unit commander relating to drug positive results will be coordinated with the appropriate Staff Judge Advocate, Director of Personnel, and Chief of Social Actions.

2.5.7.3. Formats for letters of notification for drug urinalysis inspections(PC-III), searches and seizure, and commander-directed examinations, are included in Attachments 1, 2, and 3.

2.5.7.5. The full-time Health Services Manager (HSM) will be responsible for notifying the medical testing laboratory when a positive specimen needs to be retained, in lieu of the Staff Judge Advocate who is a traditional guardsman available on UTAs only.

5.2.1.1. (Added) Upon being notified of a positive drug specimen from the drug testing laboratory, the full-time HSM will immediately verbally notify the appropriate Wing or Group Commander, Director of Personnel, and the individual's unit/detachment commander.

5.2.1.2. (Added) Upon receipt of the DD Form 2624 from the drug testing laboratory, the full-time

HSM will immediately forward a letter of notification to the individual's unit/detachment commander using the letter format in Attachment 8. Information copies will be sent to the Social Actions Officer, the Staff Judge Advocate, and the State Executive Support Staff Officer (HQ CA ANG/DS). A sealed inner envelope with "to be opened by addressee only" clearly printed on the envelope will be used for all notifications. The unit commander will notify the member of the drug positive results by the end of the next UTA or within 30 days whichever is sooner. (See CA ANGI 36-3209 for sample letter format).

4.4.3. See Attachment 6 for examples of correctly completed labels and application of tamper resistant tape.

4.4.4. See Attachment 5 for instructions for completion of DD Form 2624.

4.4.5. See Attachment 7 for example of correct taping of boxes.

4.5. Due to drug testing being completed on weekend UTAs, unit mail room personnel are authorized to sign the DD Form 2624, and accept the sealed urine specimen box for safekeeping in a secure area until mailed the next duty day.

5.2.4.1. When notified by the appropriate Judge Advocate, the full-time HSM will notify the medical testing laboratory when the urine specimen must be kept longer than 180 calendar days. The HSM will advise the laboratory every 60 calendar days of the need for further retention beyond the initial 180 day period and when further retention is no longer necessary.

ROBERT W. BARROW
Major General, CA ANG
Commander

Attachments:

1. Sample Ltr, Random Inspection Testing (PC-III)
2. Sample Ltr, Search and Seizure Probable Cause
3. Sample Ltr, Commander-Directed Testing
4. Drug Testing Observer's Briefing
5. Instructions for Completing DD Form 2624
6. Example of Correctly Completed Labels and Bottle Taping
7. Example of Correct Taping of Boxes
8. Sample Ltr of Notification of Drug Positive Results

**SAMPLE LETTER, RANDOM INSPECTION TESTING
(PC-III PRODUCED)**

MEMORANDUM FOR (Rank, Name of Member, SSAN)

FROM: (Unit/CC)

SUBJECT: Order to Provide a Urine Specimen – Random Urinalysis Inspection Drug Testing

1. You have been randomly selected and are hereby ordered to provide a urine specimen for drug inspection purposes. Compliance with this order requires you to:

a. Report to _____ on _____ at _____ hours with this letter.

b. Present your military ID card or another picture ID upon arrival at the testing location and remain there until you have provided your urine specimen, your ID card has been returned to you, and you have been given permission to leave.

c. Be observed urinating directly into the bottle or other receptacle provided to you for collecting the urine specimen.

d. Avoid contaminating the specimen. Fill the bottle with a minimum of 30 milliters of your urine.

2. You are advised that a specimen that tests positive for drugs will be used to support an involuntary discharge action against you according to AFI 36-3209, as supplemented by CA ANG Sup 1. You are further advised that failure to comply with this order may be the basis for judicial or nonjudicial action under the California Manual for Courts-Martial for Judicial and Nonjudicial Punishment.

3. Please acknowledge receipt of this order with the time and date it was received, then present it to the Drug Testing Program Administrative Manager (DTPAM).

(SIGNATURE ELEMENT OF COMMANDER)

1st Ind, (Name, Rank of Member)

MEMORANDUM FOR (Unit/CC)

I have read and understand this order, I further understand that failure to comply with this order in any way will result in disciplinary action under the California Manual for Courts Martial for Judicial and Nonjudicial Punishment. Date/Time Notified: _____.

(SIGNATURE ELEMENT OF MEMBER)

SAMPLE LETTER, SEARCH AND SEIZURE-PROBABLE CAUSE

MEMORANDUM FOR (Rank, Name of Member, SSAN)

FROM: (Unit/CC)

SUBJECT: Drug Testing – Search and Seizure-Probable Cause

1. Based on probable cause evidence, you are hereby ordered to provide a urine specimen for drug testing purposes. Compliance with this order requires you to:

a. Report to the following location on _____ at _____ hours with this letter.

b. Present your military ID card or another picture ID upon arrival at the testing location and remain there until you have provided your urine sample, your ID card has been returned to you, and you have been given permission to leave.

c. Be observed urinating directly into the bottle or other receptacle provided to you for collecting the urine specimen.

d. Avoid contaminating the specimen. Fill the bottle or other receptacle provided to you with a minimum of 30 milliliters of your urine.

2. You are advised that a specimen that tests positive for drugs will be used to support an involuntary discharge action against you according to AFI 36-3209, as supplemented by CA ANG Sup 1. You are further advised that failure to comply with this order may be the basis for judicial or nonjudicial action under the California Manual for Courts-Martial for Judicial and Nonjudicial Punishment.

3. Please acknowledge receipt of this order with the time and date it was received, then present it to the Drug Testing Program Administrative Manager (DTPAM) at the testing location.

SIGNATURE ELEMENT OF COMMANDER

1st Ind, (Name, Rank of Member)

MEMORANDUM FOR (Unit/CC)

I have read and understand this order. I further understand that failure to comply with this order in any way will result in disciplinary action under the California Manual for Courts Martial and Nonjudicial Punishment.

Date/Time Notified: _____.

SIGNATURE ELEMENT OF MEMBER

SAMPLE LETTER, COMMANDER-DIRECTED DRUG TESTING

MEMORANDUM FOR (Rank, Name of Member, SSAN)

FROM: (Unit/CC)

SUBJECT: Drug Testing – Commander Directed

1. Based on suspicion of drug use, you are hereby ordered to provide a urine specimen for drug testing purposes. Compliance with this order requires you to:

a. Report to the following location at _____ on _____ with this letter.

b. Present your military ID card or another picture ID upon arrival at the testing location and remain there until you have provided your urine specimen, your ID card has been returned to you, and you have been given permission to leave.

c. Be observed urinating directly into the bottle or other receptacle provided to you for collecting the urine specimen.

d. Avoid contaminating the specimen. Fill the bottle or other receptacle provided to you with a minimum of 30 milliliters of your urine.

2. You are advised that a specimen that tests positive for drugs will be used to support an involuntary discharge action against you according to AFI 36-3209, as supplemented by CA ANG Sup 1. You are further advised that failure to comply with this order may be the basis for nonjudicial action under the California Manual for Courts-Martial for Judicial and Nonjudicial Punishment.

3. Please acknowledge receipt of this order with the time and date it was received, then present it to the Drug Testing Program Administrative Manager (DTPAM) at the testing location.

SIGNATURE ELEMENT OF

COMMANDER

1st Ind, (Rank, Name of Member)

TO: (Unit/CC)

I have read and understand this order, I further understand that failure to comply with this order in any way will result in disciplinary action under the California Manual for Courts Martial for Judicial and Nonjudicial Punishment. Date/Time Notified: _____.

SIGNATURE ELEMENT OF MEMBER

DRUG TESTING OBSERVERS BRIEFING

1. You have been selected by your commander to act as an Observer for the Urinalysis Drug Testing Program. Your duty is to witness the collection of the urine specimen by direct "Eyes-On" observation.
2. You must be of the same gender as the member being observed, and you must not be tasked to provide a sample on the date you are to observe specimen collection.
3. You may obtain a pair of gloves from the Drug Testing Program Administrative Manager (DTPAM). You will only have to touch the bottle to write your initials and the collection date on the label.
4. You must ensure the member has a proper military ID or another picture ID that he or she checks the log for proper SSAN, specimen number, and date, and you must witness the member signing and initialing the log.
5. You must see the member receive the specimen bottle from the DTPAM and you will enter the restroom with the member. You must directly observe male members urinating into the specimen bottle. Female members may urinate into a sterile collection cup under direct observation. You must observe the female member transfer the urine into the specimen bottle, place the lid on the specimen bottle, and you will ensure that the bottle is not reopened.
6. Stay with the member until he or she is ready to exit the restroom. The member and the specimen bottle cannot be out of your sight at any time. You must see the member carry the specimen bottle out of the restroom and hand it to the DTPAM. Observe the member initial and date the specimen bottle, then you will initial and date the bottle as well.
7. You must observe the DTPAM secure the bottle with tamper resistant tape. You will dispose of the gloves in a specific biohazard bag kept by the DTPAM. Then sign the log with your payroll signature and initial where indicated.
8. If the member cannot fill the bottle with the required amount of urine (30 milliliters), the bottle will be emptied, and you will both report back to the monitor. The member will be required to wait until a sufficient amount of urine can be given, and the entire process will start over again.
9. You should not advise the member about legal rights. If he or she desires, they may contact legal counsel. The member need not be excused from giving a sample to seek legal counsel.
10. You may be called to testify as a witness in legal proceedings, which result from drug positive testing.
11. Complete the information below certifying that you have read and understand your duties.

_____	_____	_____	_____
Date	Unit	Printed Name	Signature
_____	_____	_____	_____
Date	Unit	Printed Name	Signature
_____	_____	_____	_____
Date	Unit	Printed Name	Signature

INSTRUCTIONS FOR COMPLETION OF DD FORM 2624

These instructions are provided as a quick reference and training aid. Any changes to these instructions will be provided by AL/AOT (Drug Testing Division) at Brooks AFB, TX, and will take precedence over these instructions. Typing is always best, but if you choose to hand print, use a black ball point pen. DO NOT use felt tip markers. All forensic corrections should also be made with a ballpoint pen.

Item 1. Your complete address to include: organization, numbered street or name, installation or city, state and zip +4.

Item 2. Name, rank and DSN number of the Base full time Health Services Manager (HSM).

Item 3. This block must contain your unit's number, for example, "F" is for Active Duty Air Force, "G" is for Guard, and "R" is for Reserves, followed by the base number assigned by AL/AOT (e.g., F123, R123, G123).

Item 4. Leave blank.

Item 5. This block must contain the 3-digit batch number (e.g. 001, 002), changes after 999 specimens) from the member's bottle label. If all specimens collected are not within the same batch, a separate DD Form 2624 must be completed for each batch number.

Item 6. This block must contain the actual date of collection for the specimens on that form (these dates are verified with the date on the bottle). If all specimens are not collected on the same day, a separate DD Form 2624 must be completed.

Item 7. This block must contain the individual specimen numbers. Do not reenter the batch number in this block.

Item 8. Self-explanatory.

Item 9. Testing Codes: IO – Random Inspection	CC – Command Directed
PC – Probable Cause	MC – Medical
VO – Consent	NO – New Entrant
AC – Accident Mishap	OO – Other

Item 10. Use only for Special Testing Codes. Leave blank for routine testing.

F – Full Panel (includes all drugs, e.g., cocaine, marijuana, LSD, MET, etc.)
O – Other drugs
S – Steroids (Must use separate DD Form 2624).

Item 11. Please ensure that you enter the correct address here. Also ensure mailing labels are correct.

Item 12. Your last entry in the "Chain of Custody" block. Must be an original signature in addition to what method the specimens are being shipped to the drug testing laboratory.

EXAMPLE OF LABEL REQUIREMENTS

Complete Tape Here	SSAN: <u>OF MEMBER GIVING SPECIMEN</u>	Start Tape Here	
	BIDN: <u>F999-001-003</u>		
	Collect Date: <u>Date Specimen Given</u>		

Member Initials: Certifying Ownership of Specimen

Obs. Initials/Date: Certifying Integrity of Sample, & Date

EXAMPLE OF A CORRECTLY COMPLETED LABEL

Complete Tape Here	SSAN: <u>562-22-1234</u>	Start Tape Here	
	BIDN: <u>F999-001-003</u>		
	Collect Date: <u>1 Sep 98</u>		

Member Initials: mm

Obs. Initials/Date: SK

EXAMPLE OF ACCEPTABLE FORENSIC CORRECTIONS

(Each correction must be initialed and dated individually)

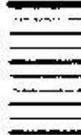
Complete Tape Here	SSAN: <u>456-56-5487</u>	Start Tape Here	
	BIDN: <u>F999-001-004</u>		
	Collect Date: <u>1 Sep 98</u>		

Member Initials: mmw

Obs. Initials/Date: SK 1 Sep 98

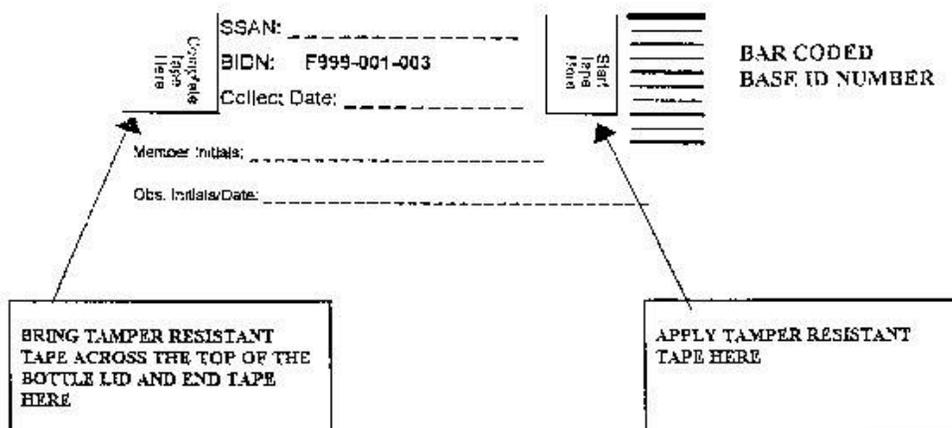
EXAMPLE OF AN UNACCEPTABLE CORRECTION, CANNOT HAVE ANY WRITE OVERS

(Must see original information, corrected information, initials of individual making the correction and the date)

Complete Info Here	SSAN: <u>488-80-7654</u>	Start Info Here	
	BIDN: F999-001-005		
	Collect Date: <u>1 Sep 98</u>		
Member Initials: <u>mqj</u>			
Obs. Initials/Date: <u>SK 1 Sep 98</u>			

EXAMPLE OF APPLICATION OF TAMPER RESISTANT TAPE

(Tape cannot cover the bar code or any pertinent label information)



CORRECT TAPING OF BOXES

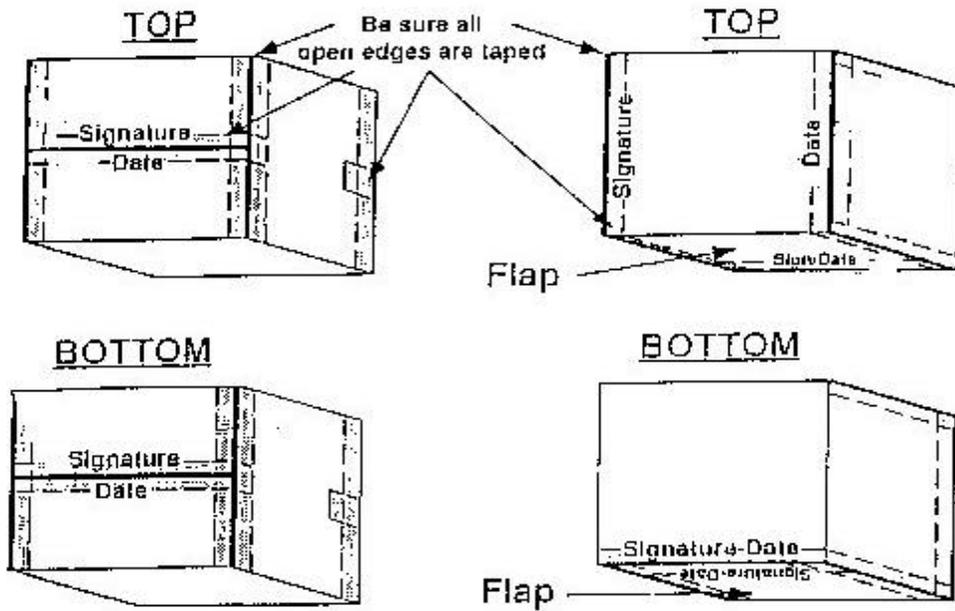


figure 1

Box with 2 flaps on top and on bottom

figure 2

Box with flap over side

**SAMPLE LETTER, NOTIFICATION TO COMMANDER OF LABORATORY
POSITIVE URINE SPECIMEN**

MEMORANDUM FOR (Member's Unit/CC)

FROM: (Medical Squadron/HSM)

SUBJECT: Notification to Commander of Laboratory Positive Urine Specimen

1. The following individual from your squadron was tested in the Drug Abuse Testing Program on (Date). The individual was found to have a laboratory positive result for the substance indicated.

NAME	DATE			
SUBSTANCE				
SSAN	TESTED	TEST #	TYPE TEST	FOUND

2. In accordance with AFI 40-120/CA ANG Sup 1, the commander must notify the member of these drug positive results by te end of the next UTA or within 30 days whichever is sooner. CA ANGI 36-3209 provides information on notification procedures.

(NAME, RANK, CA ANG)
Health Service Manager

cc: MPF/DP
SL
SJA
HQ CA ANG/DS