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Preface
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Welcome to the Unit Prevention Leader Certification Course

The Army G1 and the Director of the Army Center for Substance Abuse Programs (ACSAP) welcome you to the Unit Prevention Leader Certification Training Program (UPL CTP)!

UPL Certification Training includes instruction on drug testing procedures, instructor training and prevention/training of alcohol and other illicit drugs.

As the Unit Prevention Leader (UPL) you are expected to be the Commander’s subject matter expert on all areas of the Army Substance Abuse Program (ASAP), conduct flawless urinalysis collections, provide alcohol and other illicit drug training to the Unit, and assist the Commander in the administration of the ASAP drug testing and prevention programs.

Purpose of this Handbook

The goal of the UPL Handbook is to provide Commanders and UPLs a desktop reference that provides the necessary information for the design and implementation of a successful Unit substance abuse program that includes prevention, education, identification, and rehabilitation or separation.

The UPL Handbook is one component of UPL Certification Training. It supports and expands upon the Web-Based Training (WBT) and Instructor-Led Training (ILT) components. The UPL Handbook serves as a reference for the training and liaison aspects of the UPL’s job that are not covered elsewhere in the certification training. This reference includes condensed versions of the specimen collection processes and substance abuse prevention information covered in the WBT and ILT and provides Commanders and UPLs quick answers for responding to substance abuse and urinalysis collection issues that may arise.

In addition, the UPL Handbook provides Commanders with relevant information that is not covered in AR 600-85. This reference serves as a tool when working with the ASAP and UPLs to fulfill Command responsibilities regarding substance abuse prevention at the Unit level.

How this Handbook is Organized

The UPL Handbook contains 5 main sections:

- Section 1 covers the topic of substance abuse prevention and the Risk Reduction Program.
- Section 2 covers pre-collection procedures for urinalysis testing.
- Section 3 covers collection procedures for urinalysis testing.
- Section 4 covers post-collection procedures for urinalysis testing.
- Section 5 includes appendixes with a wide range of reference materials and document samples.
- Section 6 includes job aids to assist UPLs with drug testing procedures.

Within each section, material is organized under main headings and subheadings. Special topics are indented and set apart visually to complement the main text. In addition, some supporting material appears in sidebars to the sides of the page.
Qualifications to Serve as a UPL

The qualifications to serve as a UPL are:

- Rank of E5 or above
- Designated on appointment orders by the Unit Commander
- Successfully complete this certification training
- Possess unimpeachable moral character
- Not currently enrolled in the Rehabilitation Program
- Not under investigation for legal, administrative, or substance abuse related offenses or have had a drug or alcohol-related incident within the last 3 years; and not enrolled for substance abuse counseling for at least 36 months

Your Commander may also request a local review of your medical, personnel, and criminal records and a background check for past drug or alcohol treatment or positive urinalysis tests.

Designating UPLs While Deployed

AR 600-85 directs Commanders to maintain substance abuse program elements while deployed, to the maximum extent possible. To designate UPLs, Unit Commanders must:

1. Select candidates who meet the qualifications to serve as a UPL.
2. Enroll candidates in UPL Certification training. Candidates must register on the ASAP Web site to access the course.
3. Give candidates sufficient time to complete the training course and all required homework. The course should be completed within 14 days of the start date.
4. Sign your UPL appointment orders to comply with AR 600-85.
5. Sign your Unit's Substance Abuse Program SOP.
6. Complete and send an e-mail memorandum of verification to upl.acsap@conus.army.mil certifying that the UPL candidate has successfully completed all required training and are requesting access for the candidate to the certification exam.

Appointment Orders

Commanders must sign appointment orders on all primary and alternate UPLs. You will need the original and at least four copies of the appointment orders. Place the original in the company's appointment order file/book, issue a copy to each UPL, place one copy in the ASAP files, and include another copy in your Unit Army Substance Abuse Program SOP.

A modifiable appointment order is available on the ASAP Web site. Change all information that is italicized and bold. Print the document on Unit letterhead paper and have the Commander sign it.

Completing UPL Certification

Here’s what you need to do to become certified as a UPL:

- Complete the UPL Certification Training Program.
- Complete and pass ACSAP’s Practical Exam, which must be administered by your Commander, another officer, senior NCO, or certified UPL.
- Your Commander must sign your appointment orders.
- Your Commander must sign your Unit SOP.
Your Commander must complete a Memorandum of Verification to certify that you have successfully completed all training, required homework, and the practical exercise, and must e-mail it to upl.acsap@conus.army.mil.

For deployed UPLs, the ACSAP will send instructions to your Commander for you to access the UPL Certification Exam.

**Recertifying as a UPL**

UPL certification upon completion of classroom-based training is active for 18 months. Certification completed through the online distance learning method is active for 12 months. The UPL must successfully complete the UPL Certification exam to recertify. The UPL must retake the entire UPL Certification training if he or she fails the re-certification exam or if his or her certification has been expired for more than 30 days.

If a UPL's certification expires, the UPL has up to 60 days to contact the ASAP to attend any locally-required update training, and take and pass the recertification exam to be recertified for another 18 months from the date of examination. The UPL is not authorized to collect drug-testing specimens if their certification expires before they recertify. To recertify a UPL within 60 days of certification expiration, the deployed Commander/1SG must:

1. Send an e-mail to upl.acsap@conus.army.mil with the following information: UPL's rank, name, certification date and Installation/RRC/State where certified or provide a copy of the last Certificate of Training.
2. Appoint the UPL according to AR 600-85 and review and/or sign the Unit’s deployment SOP.
3. E-mail a recertification verification memorandum to ACSAP to request a certification exam.

**Commander Top 10 list**

According to AR 600-85, these are the responsibilities of Unit Commanders:

- Appoint on orders two officers or non-commissioned officers (E-5 or above) who have integrity, maturity, attention to detail and maximum retention ability to be the primary and alternate Unit Prevention Leaders (UPLs). Ensure the appointees complete UPL certification training.
- Implement a Unit Drug Testing Program.
- Implement ASAP prevention and education initiatives.
- Ensure all newly assigned Soldiers are briefed on ASAP policies and services.
- Maintain liaison with ASAP clinical and non-clinical personnel.
- Maintain ASAP elements while deployed, to the maximum extent possible.
- Support positive and non-attributable approaches to Soldier risk reduction.
- Work with the Risk Reduction Coordinator and the Installation Prevention Team (IPT) in designing and effecting prevention and intervention approaches.
- Immediately report all offenses involving illegal possession, use, sale, or trafficking in drugs or drug paraphernalia to the Provost Marshal (PM) for investigation or referral to the Army Criminal Investigation Command (USACIDC).
- Assess programs and provide feedback to the Risk Reduction Coordinator and IPT for program improvements.
Information and Assistance

If you need more information, or have a question or problem with the course now or in the future, here are ways to get help:

- Contact your local garrison Army Substance Abuse Program office.
- Find additional information on the ASAP Web site at www.acsap.army.mil.
- Contact the ACSAP staff for assistance at the following e-mail address: upl.acsap@conus.army.mil.
Section 1

Substance Abuse Prevention
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Section 1: Substance Abuse Prevention

Warrior Pride

Warrior Pride is an Army-wide Substance Abuse marketing and education campaign designed to reduce and deter alcohol abuse and drug use among Soldiers.

The letters in P.R.I.D.E. stand for qualities that reflect Army Values.

**Personal Courage**
Have the personal courage to always make the right decisions and to help your fellow Soldiers do the same.

**Respect**
Show respect for the Army, the Unit, your fellow Soldiers, and yourself by knowing your alcohol limits and staying drug-free.

**Integrity**
Stay true to the Warrior Ethos by supporting the Army’s alcohol and drug policies.

**Duty**
Do your duty as a Soldier and stay physically and mentally tough by not abusing alcohol and/or using drugs.

**Excellence**
Exhibit honorable behavior on and off duty—be a drug-free Soldier 24-7!
Warrior Ethos

“Warrior Ethos” is a creed that Soldiers live by.

Always Place the Mission First

If you always put the mission first, you won’t risk the mission’s success by abusing alcohol and/or drugs.

Never Accept Defeat

You are an American Soldier; a drug-free warrior fighting for freedom; never accept defeat.
**Never Quit**

If you feel that you need to drink or use drugs to cope with whatever is going on in your life, seek help.

**Never Leave a Fallen Comrade Behind**

You would never leave your buddy behind on the battlefield; remember that this applies to the social scene, too. Don’t let your buddy be at risk because he or she is drunk or doing drugs.

Together, we fight the battle against substance abuse with Warrior Pride!
The Army Substance Abuse Program (ASAP)

Program Authority

The Secretary of Defense requires each of the Armed Services to develop alcohol and other drug abuse prevention and control programs in accordance with Department of Defense Directive (DODD) 1010.1 and Department of Defense Instruction (DODI) 1010.16.

In response to this directive and instruction, the Army conducts a comprehensive program to prevent and control the abuse of alcohol and other drugs. The Army’s Substance Abuse Program (ASAP) follows the guidelines set forth in AR 600-85.

Mission

The ASAP’s mission is to strengthen the overall fitness and effectiveness of the Army’s workforce, to conserve manpower and enhance the combat readiness of Soldiers.

Objectives

- Increase individual fitness and overall Unit readiness.
- Provide services which are proactive and responsive to the needs of the Army’s workforce and emphasize alcohol and other drug abuse deterrence, prevention, education, and rehabilitation.
- Implement alcohol and other drug risk reduction and prevention strategies that respond to potential problems before they jeopardize readiness, productivity, and careers.
- Restore to duty those substance-impaired Soldiers who have the potential for continued military service.
- Provide effective alcohol and other drug abuse prevention and education at all levels of command, and encourage Commanders to provide alcohol and drug-free leisure activities.
- Ensure all personnel assigned to ASAP staff are appropriately trained and experienced to accomplish their missions.
- Achieve maximum productivity and reduce absenteeism and attrition among Civilian Corps Members by reducing the effects of the abuse of alcohol and other drugs.
- Improve readiness by extending services to the Soldiers, Civilian Corps Members, and family members.

Concept and Principles

The ASAP is a Command program that emphasizes readiness and personal responsibility. The ultimate decision regarding separation or retention of abusers is the responsibility of the Soldier’s chain of Command. The Command role in substance abuse prevention, drug and alcohol testing, early identification of problems, rehabilitation, and administrative or judicial actions is essential. Commanders will ensure that all officials and supervisors support the ASAP.

ASAP Components

There are two major components of the Army Substance Abuse Program (ASAP) both at Department of the Army (DA) level and at the installation level. The components are: Non-Clinical and Clinical.
ASAP Non-Clinical Components

The Army Center for Substance Abuse Programs (ACSAP) is the DA proponent for all non-clinical functions of the Army Substance Abuse Program (ASAP). ACSAP falls under the direction of the Human Resources Policy Directorate of the Army G-1.

The local (non-clinical) garrison ASAP provides training and education, administers the anti-drug and alcohol abuse campaigns, and processes urine specimens to be shipped to the drug testing laboratories. This is the office with which you, as a UPL, will primarily interact. The garrison non-clinical ASAP staff for the Army, United States Army Reserve (USAR) and the National Guard Bureau (NGB) consists of the following staff positions:

- Alcohol and Drug Control Officer (ADCO–Army and USAR) or Joint Substance Abuse Program Officer (JSAPO–NGB). The ADCO’s and JSAPO’s responsibilities are to:
  - Provide direct supervision and management over all ASAP staff and programs in garrison.
  - Manage and monitor the drug and alcohol testing program (military and civilian).
  - Develop, coordinate, and recommend local garrison ASAP policies and procedures for implementation.
  - Serve as the coordinator of all substance abuse and risk reduction issues for the Installation Prevention Team/Human Resource Council or other similar appropriate forums.
  - Ensure there is a continuous and comprehensive ASAP staff training plan for all garrison staff to enhance professional skills.
  - Assist Commanders and supervisors in the identification and referral of individuals suspected of alcohol and/or other drug abuse.
  - Institute procedures and strategies designed to enhance the deterrent effect of drug and alcohol testing.
  - Consult with the ASAP counseling staff, local law enforcement personnel, and other installation personnel in designing and implementing the Installation Prevention Plan (IPP).
  - Using input from the PCs, evaluate all prevention education and training aspects of the local ASAP at the end of the fiscal year, and forward through the Commander, Installation Management Command (IMCOM) to the Director, ASAP, a written report of the installation prevention program activities and accomplishments.
  - For military personnel only, restrict notification of positive drug test results with personally identifiable information (PII) (name and SSN) to: the Commander who ordered the test; the chain of Command over the Commander who ordered the test; and the supporting legal office when they are acting on behalf of the Commander who ordered the test.
  - Appoint a primary and alternate Drug Testing Coordinator (DTC–Army and USAR) or Joint Substance Abuse Program Coordinator (JSAPC–NGB) on orders and ensure they are trained and certified through the DA DTC certification course.
Prevention Coordinator (PC). The PC reports to the ADCO and is responsible to:

- Promote ASAP services using marketing, networking, and consulting strategies.
- Provide training and any other services to assist organizations in ensuring all military and civilian personnel are provided prevention education training.
- Coordinate with the installation training officer to assist in integrating the preventive education and training efforts into the overall installation training program.
- Design, develop, and administer target group-oriented alcohol and other drug prevention education and training programs in coordination with the ASAP staff and other installation prevention professionals.
- Maintain liaison with schools serving military family members, civic organizations, civilian agencies, and military organizations to integrate the efforts of all community preventive education resources.
- Oversee the UPL training program. Provide UPLs with education and training materials.
- Maintain lists of available continuing education and training courses and workshops provided by ACSAP, IMCOM, and appropriate civilian agencies for ASAP garrison staff and coordinate allocations for military and civilian training courses through the IMCOM.
- Address military community risk levels and work toward reducing the risk factors.
- Within the National Guard, the PC is responsible for prevention, treatment, and outreach.

Drug Testing Coordinator (DTC). Installation DTCs are responsible to:

- Serve as the subject matter expert on urinalysis collection and testing.
- Ensure that Unit urine collections are performed as required according to AR 600-85.
- Operate a forensically secure installation drug and alcohol testing program control point.
- Augment the installation Inspector General Inspection teams.
- Teach the drug testing procedures portion of the UPL certification course and, in coordination with the PC, provide pre- and post-deployment training to UPLs.
- Advise Unit Commanders and ADCOs on test procedures and results.
- Manage drug testing supplies and expenditures.
- Initiate medical review process for positive drug testing results as required according to AR 600-85.
- Be prepared to testify as an expert witness about the urinalysis collection process during courts martial.
- Retrieve Soldiers drug test results from the FTDTL Web portal, and within five working days of when results were posted, notify the Commanders who ordered the tests. For any positive results, review the Soldiers’ past urinalysis records in DAMIS to determine if they have previous positive urinalysis results. Notify the Soldiers’ Company Commanders of all positive urinalysis results in the Soldiers’ records and provide a copy of the Commander’s Top 10 Guide to the ASAP with the positive result to Company Commanders if they have not previously received one.

Deployed UPLs perform selected Drug Testing Coordinator duties.
• Maintain the Installation/Command Drug Testing SOP and ensure that the ADCO reviews it annually and the appropriate SJA reviews it when changes are made.
• Conduct background check on UPL candidates.
• Provide the Installation Clinical Director (CD) with the results of all rehabilitation urinalysis tests.
• Manage installation quotas if required.
• Manage UPL access to DA and/or DOD Web-based applications as needed.
• Employee Assistant Program Coordinator (EAPC). The EAPC reports to the ADCO and is responsible to:
  • Serve as the point of contact for civilian employees who have any kind of problem and need assistance.
  • Coordinate with the PC on prevention education and training for supervisors and Civilian Corps Members at all levels on alcohol and other drugs, and appropriate information on common adult living problems encountered by civilian employees that are specific to the needs of the population serviced.
  • Publicize and market ASAP services available for civilian employees.
  • Assist the PC in developing and executing prevention campaigns and conducting education and prevention programs.

ASAP Clinical Components
The Office of the Surgeon General (OTSG) is the proponent for all clinical aspects of the ASAP and the drug-testing laboratories.

The local clinical ASAP provides evaluation and treatment for Soldiers who have been identified as possible alcohol and/or other drug abusers. The local clinical ASAP provides services to Army members free of charge and to Army Reserve (USAR) and National Guard (NGB) members at their own cost. The staff of the garrison clinical ASAP consists of the Clinical Director (CD) and counselors.

The Clinical Director (CD) is the chief clinician within the clinical ASAP. Installation CDs are responsible to:
  • Supervise drug and alcohol counselors.
  • Administer and manage the rehabilitation function of the ASAP.
  • Inform the ADCO of issues affecting the ASAP program.
  • Ensure that ASAP evaluations and Command consultations are performed as required.
  • Notify Unit Commanders and the ADCO when Units are not conducting rehabilitation testing as outlined in the rehabilitation team meetings.

Medical Treatment Facility
The Medical Treatment Facility (MTF) provides a Medical Review Officer (MRO) to ensure the validity of positive urinalysis test results related to the use of prescription drugs.

The Medical Review Officer (MRO) is a physician that should be on appointment orders from the Medical Treatment Facility Commander. The MRO is responsible to:
  • Determine whether Soldiers who test positive for drugs have a legitimate prescription. The MRO reviews only those positive test results that may have occurred through legitimate medical use, as determined by USAMEDCOM.
  • Review and sign all civilian drug test results.
Roles and Responsibilities

Unit Prevention Leader (UPL)

The Unit Prevention Leader is appointed on orders by the Company, or equivalent, Commander.

Unit Prevention Leaders are required to:

- Meet the criteria in AR 600-85 to be a UPL.
- Be trained and certified using the ACSAP UPL Certification Training Program.
- In coordination with the Company Commander, design and implement the Company Substance Abuse Program SOP and Unit Prevention Plan.
- In coordination with the PC, deliver informed prevention education training to all Soldiers assigned to the Unit.
- Assist the Battalion Prevention Leader in administering the Battalion Drug and Alcohol Testing Program.
- Assist in New Unit Personnel Briefings.
- Advise and assist Command leadership on all matters pertaining to the ASAP.
- Inform the Commander of the program status and of trends in alcohol and other drug abuse in the Company.
- Maintain liaison with the servicing ASAP counseling center when in garrison and with the servicing behavioral health unit when deployed.
- Develop Command support for prevention activities by establishing an open, honest, and trusting relationship with the Unit Commander and subordinate leaders.

Battalion Prevention Leader (BPL)

Battalion Prevention Leaders must first meet the criteria to be a UPL, be trained and certified using the ACSAP UPL Certification Training Program, and are appointed on orders by the Battalion Commander. Responsibilities include:

- Supervise and provide technical guidance to UPLs.
- Inspect and assist Company UPLs in the performance of their duties in coordination with the Installation DTC or State Joint Substance Abuse Program Coordinator (JSAPC).
- Be the Battalion Commander’s subject matter expert on the ASAP.
- Coordinate with other UPLs within the Battalion to support the Battalion drug testing program as necessary to accomplish the specimen collection mission.
- Use the DOD Drug Testing Program software as the primary method of randomly selecting Soldiers for drug testing and for preparing the drug testing forms and bottle labels, and ensure that the Commander approves all lists of randomly selected Soldiers before notifying them to report for testing.
- In coordination with the Battalion Commander, design and implement the Battalion Substance Abuse Program SOP and prevention plan. Provide a copy, signed by the Battalion Commander, to the local ASAP.
- In coordination with the PC, ensure Company UPLs deliver informed prevention education and training to all Soldiers assigned to the Battalion.
- Inform the Commander of the status of the ASAP and of trends in alcohol and other drug abuse in the Battalion.
- Maintain liaison with the servicing ASAP counseling center when in garrison and with the servicing behavioral health unit when deployed.
- Develop Command support for prevention activities by establishing an open, honest, and trusting relationship with the Unit Commander and subordinate leaders.

- Advise and assist Unit leaders on all matters pertaining to ASAP.

**Unit Commander**

Unit Commanders are required to:

- Assist the Battalion Commander in implementing the Battalion drug and alcohol testing program.

- Implement ASAP prevention and education initiatives addressed in the AR 600-85. Ensure that all Soldiers receive a minimum of four hours of alcohol and other drug abuse training per year.

- Appoint an officer or noncommissioned officer (E-5 or above) on orders as UPL and alternate UPL, who must be certified through the UPL Certification Training Program.

- Document that all newly assigned Soldiers are briefed on ASAP policies and services within 30 days of arrival.

- Maintain liaison with ASAP garrison and counseling staffs.

- Maintain ASAP elements while deployed, to the maximum extent possible.

- Foster a positive Command climate that discourages alcohol and drug abuse and is supportive of those who need assistance from the ASAP for problems related to alcohol and other drug abuse. Support substance abuse prevention campaigns and alcohol-free activities in the Unit and on the installation.

- Consult with the servicing legal office for all drug and alcohol related offenses.

- Initiate administrative separation in accordance with Army regulations.

- Immediately report all offenses involving illegal possession, use, sale, or trafficking in drugs or drug paraphernalia to the Provost Marshal (PM) for investigation or referral to the Army Criminal Investigation Command (USACIDC).

- Ensure that Soldiers promptly provide medical evidence for legitimate use of a prescribed drug to the MRO when requested.

- Refer any Soldier to the ASAP for evaluation within five duty days of notification that the Soldier received a positive urinalysis for illicit drug use or was involved in alcohol-related misconduct.

- Assist the UPL in the development of a Unit Substance Abuse Program SOP and sign it at least annually.

- Ensure that the Unit Risk Inventory (URI) is administered to all Soldiers at least 30 days before an operational deployment and the Reintegration Unit Risk Inventory (R-URI) is administered to all Soldiers between 90 and 180 days after returning from an operational deployment.

**Responsibilities for All Soldiers**

All Soldiers in the U.S. Army are required to:

- Be responsible for personal decisions relating to alcohol and drug use and be fully accountable for substandard performance or illegal acts resulting from such use.

- Encourage Soldiers suspected of having an existing or possible alcohol or drug abuse problem to seek assistance.

- Be prepared to provide a copy of any prescription or medical treatment involving controlled substances received from any medical personnel outside the military medical system for at least six months after receiving such prescription or medical treatment.
Overarching Tenets

The two overarching tenets of the ASAP are Prevention and Treatment.

Capabilities Supporting Prevention:

- **Education & Training**
  Definition of this capability: Instruction for the Soldiers and other beneficiaries with increased knowledge, skill, and/or experience as the desired outcome.

- **Deterrence**
  Definition of this capability: Action or threat of action to be taken in order to dissuade Soldiers or government employees from abusing or misusing substances. The Army's primary mechanism of deterrence is Random Drug Testing.

- **Identification/Detection**
  Definition of this capability: The process of identifying Soldiers and other beneficiaries as potential or actual substance abusers. The methods of identification are: Self ID, Command ID, Drug Testing ID, Medical ID, and Investigation/Apprehension ID.
  The methods of identification are covered in detail later in this section.

- **Referral**
  Definition of this capability: Modes by which Soldiers and other beneficiaries can access ASAP services. Modes are self-referral and Command referral.

- **Risk Reduction**
  Definition of this capability: Compile, analyze, and assess behavioral risk and other data to identify trends and Units with high-risk profiles. Provide systematic prevention and intervention methods and materials to Commanders to eliminate or mitigate individual high-risk behaviors.

Capabilities Supporting Treatment:

- **Screening**
  Definition of this capability: An in-depth individual biological/psychological/sociological evaluation/interview to determine if Soldiers and other beneficiaries need to receive treatment. This capability is a U.S. Army Medical Command (MEDCOM) responsibility.

- **Rehabilitation Programs**
  Definition of this capability: Clinical intervention with the goal of returning Soldiers and other beneficiaries to full duty or identify Soldiers who are not able to be successfully rehabilitated. This capability is a MEDCOM responsibility.

Capability that Spans Both Prevention and Treatment:

- **Targeted Intervention**
  Definition of this capability: An educational/motivational program which focuses on the adverse effects and consequences of alcohol and other drug abuse. The Army implements targeted intervention through the Alcohol and Drug Prevention Training (ADAPT) program—currently, the Prevention Research Institute’s PRIME For Life course curriculum. All Soldiers and other beneficiaries screened for substance abuse issues will receive targeted intervention.

Soldiers who do not have the potential for future substance abuse-free service to the Nation should be separated. The most important elements of managing an effective alcohol and drug abuse prevention program are Commanders and supervisors who advocate the legal and responsible use of alcohol and other drugs and who use the ASAP's professional services to strengthen their organizations.
UPL Values

Backbone of the Drug and Alcohol Program

- As a UPL you are the backbone and leader of the Substance Abuse Program within your Unit.
- You must set the example and be drug-free.
- You must be technically and tactically proficient at Unit urinalysis and at providing drug and alcohol training.
- You are the Subject Matter Expert (SME) and must assist the Commander with the Substance Abuse Program.

Drug-Free Fighting Force

- As a UPL, you show your loyalty to your Unit and the Army by:
  - Educating the Soldiers within your Command on drugs and alcohol.
  - Deterring drug abuse by ensuring the Commander conducts regular Unit urinalyses using the principles of Smart Testing.
  - Detecting drug abusers by performing legally sound urinalysis testing with proper chains of custody.
- This ensures that you have drug-free Soldiers to perform your Unit’s required missions.
- Your pledge should be to ensure that no Soldier within your Unit causes personal injury to themselves or others through drug or alcohol abuse.

Your Duty as a UPL

- Conduct Unit urinalysis in compliance with DODD 1010.1, DODI 1010.16, AR 600-85 and the UPL Handbook.
- Ensure that Observers perform their duties correctly and professionally.
- Assist the Commander in fulfilling his/her duties and responsibilities in support of the Substance Abuse Program.

Treat Other Soldiers Like You Would Like to Be Treated

- Treat all Soldiers with respect and dignity.
- Ensure that Observers treat donors with maximum respect and as much privacy as is allowed.
- Keep personal information about medications, medical conditions, Soldiers in rehab, and positive results obtained between you and the Commander.
**Selfless Service to a Drug-Free Army**

- Take the time to learn everything you can about drugs and alcohol, so you can educate your Unit and truly be a subject matter expert for the Commander.
- Complete Unit urinalysis in compliance with regulations, handbooks, and SOPs despite the time that it takes away from other duties.
- Know that the selfless service you provide could save countless lives.

**Honor Your Freedom**

- Honor America, the Army, your Unit, and your fellow Soldiers by helping to make your Army drug-free.
- Educate your Unit and help others make honorable decisions not to use drugs or abuse alcohol.
- Demonstrate honorable behavior on and off duty. Set the example for others to follow in regard to alcohol and drug abuse.

**Make the Right Choices**

- Make the right decisions about drug and alcohol:
  - Don’t use drugs.
  - Don’t drink and drive.
  - Report users so they can get help.
- Ensure that all Soldiers within the Unit are treated equally when providing a specimen.

**Do the Right Thing**

- Do the right thing despite possible repercussions from others.
- Have the personal courage to:
  - Say “no” to drugs and/or alcohol.
  - Report other Soldiers who are abusing drugs or alcohol.
  - Inform the chain of command of problems or concerns about the Substance Abuse Program.
  - Ensure that the collection standards are applied equally, regardless of rank or position.
**Risk Reduction Program**

**Purpose**

The Risk Reduction Program is a Commander’s program designed to reduce high-risk behavior in Soldiers. It supports ASAP initiatives by integrating prevention and intervention programs into a framework contributing to the four institutional outcomes of performance, readiness, retention, and recruiting.

**How it Works**

The program monitors 14 targeted high-risk behaviors (HRBs), including those involving substance abuse (e.g., drug and alcohol offenses, accidents, sexually transmitted diseases), and 7 other factors and incident data such as warning letters and positive urinalysis results. It also assists Commanders in deciding which actions to take to solve behavioral problems. All policies and procedures for the Risk Reduction Program apply to the Army, the Army National Guard, and the Army Reserve (AR 600-85).

The Target graphic below provides a comparison between the rate of incidents at the battalion level (white “bullet holes”), region level (“R’s”), and Army as a whole (large white circle between the amber and green) per thousand Soldiers. Commanders can quickly identify high risk behavior of concern and provide educational interventions.

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<tr>
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<td>Bullseye</td>
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The Risk Reduction Program is normally implemented at the Battalion level and measures high-risk behaviors. The ASAP runs this program because of the relationship between substance abuse and other high risk behaviors such as:

- The majority of sexual assaults involve the use of alcohol and/or drugs by the victim and/or the assailant.
- Spouse and/or child abuse incidents increase when the abuser uses or abuses alcohol and/or drugs.

**Strategies**

Strategies of the Risk Reduction Program include:

- Identifying and reducing high-risk factors
- Promoting risk reduction as a prevention strategy
- Collaborating with Army resources in a coordinated effort to change high-risk behaviors
- Increasing Soldier and Unit readiness
- Providing Commanders and UPLs with valuable information on which to base their strategies for delivering substance abuse prevention training

For more information on the Risk Reduction Program, contact your supporting ASAP.

**Unit Risk Inventory (URI) and Reintegration Unit Risk Inventory (R-URI)**

Two prominent features of the Risk Reduction Program are the Unit Risk Inventory (URI) and Reintegration Unit Risk Inventory (R-URI). The inventories are Command climate surveys that help Commanders determine the actual occurrences of high-risk behavior through anonymous Soldier self-reported information.

**The URI**

One Army Command Climate Survey designed and approved for use at the Company level is the URI. The URI is an anonymous questionnaire with 53 items that takes approximately 30 minutes to complete. It is administered at least 90 days before an operational deployment. Features of the URI include:

- Screens for high-risk behavior and attitudes that compromise Unit readiness.
- Applies the World Health Organization (WHO) Alcohol Use Disorder Identification Test (AUDIT) score to identify potential problem drinking.
- Provides Commanders with valuable information on which to base their strategies for addressing high risk behavior problems in the Unit.
The R-URI

The current intensity of high operational tempo throughout the Army creates a higher potential for high-risk behaviors and attitudes affecting Unit readiness. In order to monitor and provide required support for the well-being of personnel, the Army Center for Substance Abuse Programs (ACSAP) developed another Command climate survey called the R-URI.

Like the URI, the R-URI is also an anonymous questionnaire conducted at the Company level. It contains 80 items and takes approximately 45 minutes to complete. It is administered 90-180 days after returning from an operational deployment (AR 600-85).

Features of the R-URI include:

- Applies the World Health Organization (WHO) Alcohol Use Disorder Identification Test (AUDIT) score to identify potential problem drinking.
- Provides Commanders insight to develop strategies to address high risk behavior problems in the Unit.
- Measures both high risk behaviors that occurred during deployment and those that have occurred since returning.
Important Definitions

Responsible Drinking

Responsible drinking is that which does not adversely affect an individual’s ability to fulfill their obligations, nor negatively impacts the individual’s job performance, health, or well-being or the good of the order and discipline of the Unit or organization.

Substance Misuse

Substance misuse occurs when a Soldier uses drugs but has no apparent diagnosis for a drug or alcohol problem and no continuing pattern of abuse is present. This is usually a one-time event, but may be significant enough to require enrollment in the ASAP.

Substance Abuse

Substance abuse occurs when a Soldier exhibits maladaptive behavior patterns (actions that are counterproductive to the individual) over a 12-month period, involving one of the following:

- Failure to perform at work
- Using in physically hazardous situations (for example, getting charged with a DWI)
- Recurrent legal problems
- Recurrent social problems

Substance Abuse Indicators

- Using a substance specifically to get drunk, high, buzzed, or impaired.
- Experiencing an impairment problem related at least in part to the substance (e.g., falling down, slurred speech, throwing up, incurring a DWI/DUI citation, being involved in a car crash, reporting late for duty, falling grades).
- Experiencing a health problem related at least in part to the substance (e.g., fatty liver, rotting teeth, memory loss, depression, impaired abstract thinking, heart disease, certain forms of cancer, brain damage).
- Experiencing a relationship problem related at least in part to the substance (e.g., unwanted sex, getting into a fight, verbal abuse, physical abuse, and lawsuit).
- Using a substance in such a way that it jeopardizes valued things in life (e.g., family, friends, career, Unit mission, religion, promotions, self-respect, good health, loving and being loved).

Substance Dependence

Substance dependence exists when a Soldier exhibits any three of the following behaviors regarding substance use over a 12-month period:

- Increasing tolerance (able to consume markedly increasing amounts before becoming impaired)
- Withdrawal effects when abstinent
- Unsuccessful efforts to cut down or stop
- Continuing use despite medical or psychological reasons to stop
- Life centers on obtaining the substance
- Social and occupational activities impacted by use
Identification and Referral

There are six ways to identify substance abuse problems in Soldiers. Soldiers must be referred to the ASP when they have been identified with one of these methods.

Voluntary Identification

Voluntary (self) identification is the preferred method of discovering alcohol or drug abuse. To self-identify, Soldiers can either:

- Approach the Unit Commander, OR
- Approach the installation ASAP, a Medical Treatment Facility, a chaplain, or any officer or non-commissioned officer in the chain of command.

AR 600-85 states that if a Soldier initially seeks help from an activity or individual, other than his or her Unit Commander, that activity or individual should immediately notify the Soldier’s Unit Commander and Installation Alcohol and Drug Control Officer (ADCO).

The requirement for Commanders to initiate separation proceedings does not apply if the Soldier properly self-identified according to the Limited Use Policy. After being notified of a Soldier’s Self-Identification, the Commander may initiate a separation action; however, the information is protected evidence under the Limited Use Policy. If the Army discharges the Soldier, it will be treated as an Honorable Discharge.

Command Identification

Command Identification occurs when a Commander/Supervisor observes, suspects, or otherwise becomes aware that alcohol or drug abuse is adversely affecting an individual’s job performance, social conduct, interpersonal relations, physical fitness, or health.

When a Commander or a designated representative identifies a Soldier with probable alcohol or drug abuse, he or she must:

- Explain the Limited Use Policy to the Soldier after consulting with the ADCO and supporting legal advisor, if the Limited Use Policy applies to the circumstances at hand in the Command Identification.
- Initiate a Commander’s inquiry to investigate suspected misconduct after consulting with the supporting legal advisor.

Drug Testing Identification

Drug testing identification occurs after a laboratory tests a specimen and determines a drug test result.

If laboratory urinalysis determines a positive drug test result on a Soldier, the Commander must refer the Soldier to the ASAP counseling center within 5 duty days of receiving the validated result. This referral is mandatory regardless of the Soldier’s rank or time in service.
Alcohol Testing Identification

Alcohol testing identification occurs after a Soldier participates in blood or breath testing to detect alcohol use.

The purposes for alcohol testing are largely the same as the purposes for drug testing.

- Inspection – Commanders can order that an entire Unit or part of a Unit submits to an examination to ensure military fitness and discipline.

- Search or Seizure/Probable Cause – This applies to cases in which the Commander has sufficient reason to believe that a Soldier has violated the UCMJ by using or abusing alcohol and that evidence currently remains within the Soldier’s body. It also applies to searches based on probable cause.

- Competence for Duty – Commanders can order a Competence for Duty test when they have reason to question a Soldier’s competence based on bizarre, uncharacteristic behavior.

- Consent – Soldiers may consent to alcohol testing as part of a consent search.

- Medical – This applies to specimens that Soldiers submit during any medical examination for a valid medical purpose (e.g., an emergency room visit or periodic physical examinations).

Alcohol Testing - Military

Commanders may conduct alcohol testing for the same reasons as drug testing (Inspection, Probable Cause, Fitness for Duty, etc.). An unpredictable testing pattern will produce a more accurate indicator of alcohol impairment and abuse within a particular Unit than one which is predictable, just as it does for drug testing.

Although no testing rate is currently mandated, Commanders may conduct alcohol screening tests, and confirmation tests as required, on the whole or a part of their Units for the primary purpose of ensuring the security, military fitness, and good order and discipline of their Units. This inspection is to determine if Soldiers are maintaining proper standards of readiness, and are fit and ready for duty.

Alcohol Test Scheduling

Alcohol screening and confirmation tests should only be performed during duty hours when the Soldiers selected for testing have prior knowledge that they should be on duty. Example: If a Commander calls an unannounced alert and Soldiers report for duty at 0430 when they were originally scheduled to report at 0630, then the alcohol test cannot be administered until at least 0630. However, if the Soldiers were previously told that they had to report at 0430, then they may be tested for alcohol at 0430.

Legal Alcohol Limits

- Per AR 600-85, impairment of Soldiers is defined as having blood alcohol content equal to or greater than .05 grams of alcohol per 100 milliliters of blood.

- Underage drinking is prohibited. Army policy governing the minimum age for dispensing, purchasing, consuming, and possessing alcoholic beverages is found in AR 215–1. Any underage Soldier using alcoholic beverages will be referred to the ASAP for screening within 5 working days except when consumption is permitted by AR 215–1.
Commander Action

- Within 5 working days of the incident or investigation, the Commander will refer to the ASAP for screening and potential enrollment all potential alcohol abusers identified by self referral, alcohol testing, DUI/DWI investigation, apprehension, underage drinking or other incident involving the use of alcohol. The Commander will use DA Form 8003 for the referral.
- All potential alcohol abusers identified by self referral, alcohol testing, DUI/DWI, investigation apprehension or other incidents involving the use of alcohol that do not require treatment will be required to attend the Army’s educational ADAPT.

Evidentiary vs. Non-evidentiary

The legal terms evidentiary and non-evidentiary apply to drug and alcohol testing results. Evidentiary test results are those that a board or courts martial can use in legal proceedings against a Soldier. Non-evidentiary test results are those that a board or courts martial cannot use in legal proceedings against a Soldier.

Drug tests conducted according to the AR 600-85 meet the requirements to be evidentiary. The following discussion pertains to the use of alcohol tests.

Evidentiary Requirements (Military)

For an alcohol test result to be considered evidentiary, it must meet ALL of the following requirements. If any one of the evidentiary requirements is not met, then a test will be considered non-evidentiary.

- The test must have correctly completed and maintained chain of custody documentation.
- The lab instrument used for testing must have proper calibration.
- The lab instrument operator must have a certification. The instrument manufacturer usually issues a certification, and usually recertifies the operator on an annual basis.
- The instrument must be properly maintained in accordance with standing operating procedures and the manufacturer’s recommendations.
- The operator must print and maintain a copy of test data. This should include calibration, quality control, and the Soldier’s specimen data.

Conducting Evidentiary Tests

Commanders should request evidentiary tests through the MP or their MTF based on established policies on the installation. Contact the Alcohol and Drug Control Officer (ADCO) for installation-specific information. Most installations have two possible ways to conduct evidentiary tests (check with your local SOP and ASAP for procedures):

- Military Police can administer an evidentiary breath test.
- The Medical Treatment Facility can administer an evidentiary blood test.

National Guard, Army Reserve, and other personnel not located near installations (i.e. recruiters) should consult with the Region/Major Army Command (MACOM) for guidance on memorandums of agreement with local law enforcement or with other possible agencies.
Non-Evidentiary Testing (Military)

- Commanders may use non-evidentiary alcohol screening devices that are listed on the Department of Transportation’s (DOT) Conforming Products List of Alcohol Screening Devices.
- Commanders should request devices for testing through the ASAP’s DTC.
- Alcohol results received with these devices cannot be used in any administrative action until the Soldier’s test is confirmed with an evidentiary alcohol breath measuring device (ABMD) or through a legal blood alcohol test under chain of custody.
- Soldiers that screen positive using the ABMD will be referred to the Commander for a determination as to whether Probable Cause exists and further search is warranted. Under no circumstance will the Soldier that screened positive drive any personal or military vehicle until identified as not impaired or until the next day.

Letter of the Law - The Limited Use Policy

Remember, you are not a legal expert! The UPL should encourage the Commander to consult with the SJA to determine when the Limited Use Policy applies. See section 2 in this handbook for more information on the Limited Use Policy.

Medical Identification

Medical identification occurs when a physician or healthcare worker discovers signs of alcohol and/or drug abuse during routine or emergency medical treatment.

The physician will immediately inform the Soldier’s Commander if any one of the following conditions exist:

- Abuse is current
- Impaired judgment is evident
- Potential dangers exist to others as a result of the Soldier’s alcohol and/or drug abuse
- The individual’s drug use may cause a security breach or information breach

Medical Identification and the Limited Use Policy

If a Soldier reveals personal abuse of alcohol and/or drugs during a routine medical screening, his or her admission, as well as any urinalysis resulting from the admission, is covered under the Limited Use Policy and the Commander does not initiate adverse administrative action on the Soldier. If the physician identifies abuse through any means other than a Soldier’s self admission, the Limited Use Policy does not apply. See section 2 in this handbook for more information on the Limited Use Policy.

Investigation/Apprehension Identification

Investigation/apprehension identification occurs when military or civilian law enforcement identifies a Soldier’s alcohol or other drug abuse.

According to AR 600-85, identification through investigation or apprehension is not covered under the Limited Use Policy. See section 2 in this handbook for more information on the Limited Use Policy.
**Referring Soldiers to the ASAP**

**Commander Response to Identification**

After identifying a Soldier’s probable use of alcohol or drugs, the Commander (or designated representative) must:

1. Coordinate with law enforcement to determine whether the Commander or designated representative should conduct the initial interview of the alcohol or drug abuser.

2. Consult with the ADCO and supporting legal advisor when the Unit Commander believes the Limited Use Policy applies. The Unit Commander may then explain the Limited Use Policy, if applicable to the particular circumstances.

3. Investigate suspected misconduct through a Commander’s Inquiry, AR 15–6 investigation, or other appropriate method after consulting with the legal advisor if law enforcement does not initiate an investigation.

4. Refer individuals suspected or identified as alcohol and/or other drugs abusers to the ASAP counseling center for screening. These includes those identified through drug testing (except those determined to be legitimate medical use by the MRO) and/or blood alcohol tests. The Commander must complete and sign a DA Form 8003 to complete the referral.

**UPL Response to Identification**

If the UPL suspects a Soldier of alcohol or drug abuse, he or she must:

- Speak with the Soldier’s supervisor and/or the Commander.
- Refer Soldiers to the ADCO if you encounter any questions for which you are not 100 percent sure of the answer, such as alcohol use versus abuse.
Prevention Types

The Army bases its efforts to promote and reinforce drug abuse prevention on the Institute of Medicine’s Prevention Model. The Prevention Model describes three types of prevention:

- Universal
- Selective
- Indicated

Universal Prevention

In the Universal Prevention, the Army delivers messages and programs to the entire population to support alcohol and/or drug abuse prevention. This approach is the one you are most likely to implement through your Unit Prevention Plan (more information on the Unit Prevention Plan appears later in this section).

Examples of Universal Prevention are:

- Four hours of Substance Abuse education as an annual requirement for all active duty Soldiers; two hours for the Army Reserve and the National Guard
- Media and public awareness campaigns
- Posters, pamphlets and bulletins
- Random drug and alcohol testing

Selective Prevention

In Selective Prevention, the Army targets smaller groups who are at risk for substance abuse. Examples of Selective Prevention include:

- Drug threat classes for Soldiers deploying to certain geographical areas of the world
- Underage drinking classes for all Soldiers under 21
- Date rape drug classes for female Soldiers
- Substance Abuse and Post Traumatic Stress Disorder (PTSD) training for Soldiers who recently returned from combat areas

Indicated Prevention

Indicated Prevention targets individuals who show signs of alcohol/drug misuse or abuse. The specific training is ASAP's Alcohol and Drug Abuse Prevention Training (ADAPT) class—currently, the Prevention Research Institute’s PRIME For Life course curriculum. Soldiers may be required to attend ADAPT if they:

- Are referred to the ASAP and enrolled in the rehabilitation program and the counselor determines the Soldier should attend as part of treatment
- Tested positive for drugs, but do not require rehabilitation
Conducting Training as a UPL

You must ensure that all active Soldiers meet the mandatory requirement to complete 4 hours of Substance Abuse Awareness training per year (AR 600-85). The annual substance abuse training requirement for the Army Reserve and National Guard is 2 hours. Preferably, Soldiers should take the required training in increments over the course of the year.

How to Provide Training

As an officer or NCO, you should have received some training on how to train Soldiers and/or how to give a briefing at a professional development course such as the Primary Leadership Development Course (PLDC), Basic Non-Commissioned Officer Course (BNCOC), Officers Basic Course, etc. Unfortunately, the training you received may not help you feel comfortable giving a class to your entire Unit.

If you need more in-depth information on providing training, then you may want to see if you can take the Total Army Instructor Training Course.

Here are some tips to help you perform this part of your duty most effectively.

- Be creative in planning and delivering courses and other training events.
- Change it up! You don’t always have to give lectures. Try conducting interactive discussions, hosting guest speakers such as CID, local police officers or the ASAP staff, and playing question games.
- Remember that the regulation requires sign-in rosters to document training.

The Reg says “All Unit substance abuse training—whether conducted by the Commander, UPL, the ASAP staff, or a guest speaker—will be documented using a sign-in sheet to record who attended, the topic, the date, start time, and end time of the class. A copy of the sign-in sheet will be provided to the ASAP staff within 5 working days.”

- Assist the Commander in briefing new Soldiers on the Unit Substance Abuse Program.

Training Materials

Soldiers—especially new Soldiers—have little to no knowledge on the ASAP and its functions. Your job is to educate Soldiers so that they will know what to do and where to go when they need help. Use the resources available to you and be as creative as you can in your training.

- PowerPoint presentations with scripted lesson plans are available on the ASAP Web site (www.acsap.army.mil).
- The ASAP Web site also contains a standardized Newcomers Briefing that you can modify to address your installation’s specific issues.
- Your installation’s Prevention Coordinator will gladly help you with additional presentations, videos, guest speakers, and may teach a class as a guest instructor upon request.
- You can also use other existing training—perhaps from classes you have taken yourself—to create your own classes. Examples of this material include:
  - How to be a good Observer—good Non-Commissioned Officer Professional Development (NCOPD) class.
  - Self referral—how does it work?
- Laboratory procedures—ACSAP has a video available that demonstrates these.
- Guest instructors such as the SJA on the Limited Use Policy or CID, on local drug threats.

**Methods of Instruction**

- **Lecture:**
  The instructor basically does all the talking. Many of your training sessions will be lectures because the format allows you to provide a lot of information in a short amount of time with few questions.

- **Demonstration**
  This type of instruction shows the class the correct way to complete a task. You could use a demonstration to teach all NCOs how to properly perform observation tasks during a collection.

- **Performance**
  Students practice a skill to learn it. An example would be having students simulate the urinalysis collection procedure.

**Presentation Components**

Each presentation should have:

- A motivator or introduction—Captures the audience’s attention.
- A learning objective—Summarizes what you want the audience to know or be able to do.
- The body of the presentation—Covers the information required for each main point.
- A summary or conclusion—Recaps the main points and ties it all together.

**Preparing for Class**

Whether using a lesson plan (LP) and presentation provided to you or creating your own, you should:

- Become familiar with the presentation, LP, training materials, and any handouts.
- Review references, research the topic, or ask the ASAP staff to clarify any material that you may have questions about.
- Make mental notes of cues on the slides to help you remember what you want to say.
- Rehearse your presentation until you can provide the necessary information without reading it.
- If your LP is scripted, rephrase the information to make it easier for you to talk about. Scripts are written as a guide to the instructor. Modify it to fit your style and personality.
**Presentation Day**

- Take a tour of the room you will use for the presentation early in the day to make sure that the setup is correct and that your equipment works properly.
- Before you start: check your general appearance, your voice, and make a bathroom run.
- Avoid standing behind a podium or desk during the presentation. Stand to one side of the projection screen or blackboard, and closer to the audience if possible.

**Communication**

- Position your body so that you face the audience. Avoid reading the slides word-for-word.
- Use hand and arm movements only to illustrate or emphasize points.
- Try to make eye contact with the entire audience.
- Avoid distracting mannerisms.
- Be clear and concise with your speech. Avoid wordiness.
- Avoid distracting expressions and jargon.
- Use pauses effectively—they separate thoughts and ideas.
- Vary the pitch and volume of your voice.
- Be confident in yourself and the knowledge you have of the material.
- Display sincerity, enthusiasm, and humor when appropriate.

**Answering Questions**

- If you are unsure of the answer then tell the audience that you will find out the answer and get back with them.
- Although no single instructor can possibly know everything, researching your topic will reduce the number of questions that you cannot answer.

**Ending the Presentation**

- Summarize the main points.
- Ask the audience questions to see if they understood the material you presented.
- Thank the audience for their time and attention.
- Provide a point of contact for further questions or assistance: you or the ASAP staff.
- If available, provide printed materials on the subject matter you presented. Check with your ASAP for pamphlets and products.
Resources

There are many resources available to help you prepare for substance abuse training with your Soldiers, which you can also refer to during your training sessions.

Garrison Comparison

UPLs in garrison should contact the following people for support to plan and deliver training: Army–ASAP Prevention Coordinator, USAR–ADCO, NGB–JSAPC or Prevention/Treatment & Outreach (PTO) Coordinator.

ASAP Web site

The ASAP Web site is a great resource for UPLs and Commanders. It contains the most pertinent and up-to-date information. As a rule of thumb, you should visit the site monthly. You can find these resources to assist with training efforts on this site:

- Pamphlets—These are desk references that provide information on a variety of topics in a clear and concise manner.
- Campaign posters and materials associated with campaigns—These materials assist in promoting substance abuse prevention.
- Presentations and lesson plans—Instructional materials to be used as resources when delivering training.

The Web site content is organized into three categories: UPL-focused, Commander-focused, and Resources.

UPL-Focused Content:
- UPL Handbook
- DTP software
- Drug and alcohol presentations
- Campaign information
Commander Focused Content:

- Risk Reduction
- Appointment Orders
- Treatment information
- UPL certification
- Commander’s FAQ

Resources Content:

- Newsletters
- Non-DOD Web sites
- AR 600-85
- Modifiable Unit SOP

Targeted Web Sites

The UPL should check several Web sites in addition to the ACSAP site for additional information in their substance abuse prevention efforts. These sites contain a wealth of information that can help UPLs build their programs and answer questions. Some explain prevention programs that are currently operating while others provide helpful research-supported information.

PATROL (Project for Alcohol Training, Research, and Online Learning)—Supported by TriCare and accessible via the ASAP Web site. PATROL is an alcohol prevention program which utilizes narration, audio and video elements to show that program users experience significantly reduced alcohol misuse.

That Guy (http://www.thatguy.com)—Created by the Department of Defense to educate Soldiers about reducing excessive drinking. Encourages Soldiers to reject binge drinking because it affects the things they care about: family, friends, dating, sex, money, and reputation.
National Institute on Drug Abuse (http://www.nida.nih.gov/)—NIDA is a federal entity with the mission to apply the power of science for a positive impact on drug abuse and addiction.

Substance Abuse and Mental Health Services Administration (http://www.samhsa.gov)—SAMHSA is a federal entity that helps people build resilience and experience recovery. The program is targeted to those who have or are at risk for developing mental or substance use disorders.

**UPL Handbook**

This Handbook is a reference to provide the UPL with the tools and information to implement a successful Substance Abuse Prevention program. It contains step-by-step instructions for performing urinalysis testing procedures, including all of the tasks the UPL must perform before and after urine collection. The handbook also contains valuable reference materials such as testing forms, checklists, job aids, and procedure diagrams.
USAP Standing Operating Procedures

The Unit Substance Abuse Program Standing Operating Procedures (USAP SOP) is a document that the UPL writes. It outlines how the Unit conducts urinalysis testing and substance abuse training and prevention efforts. All Units must have Commander-approved USAP SOP in place.

The Substance Abuse program is a Commander’s program. Therefore, the UPL should collaborate with the Commander in creating the program for the Unit. The UPL must also consult with the higher Command (BN, BCT/BDE, DIV, ARCENT - Army Central Command, for deployed Soldiers) to ensure that the Unit SOP has all the information and references it needs to drive a successful Substance Abuse Program.

Garrison Comparison–Unit SOP

In garrison, the UPL consults with the local ASAP when creating the program for the Unit.

Unless mandated differently in the installation SOP, your Unit SOP should include:

- Random selection process normally used and an alternate
  DTP should be the primary method and a ten-sided die or number out of a hat as the alternate method in case of a computer problem.

- Procedures for testing personnel when not available because of leave, TDY, etc.; and procedures for retesting personnel when specimens failed to be tested at the FTDTL

  The UPL should make a plan for how to handle these cases and include that plan in the SOP. When making a plan for these cases, decide whether you will:
  - Conduct the later test or retest during a specific time period (e.g., within 3 days of return), OR
  - Conduct the later test or retest during a specific event, such as the next Unit test.

- Required means of Soldier identification to include an alternate reliable method to verify Soldier identity if the Soldier does not have an ID card (e.g., alpha roster) in his/her possession

- Collection Procedure–this should be in your installation SOP

- All required personnel briefings (i.e., Commander, Observer, UPL)

- Unusual circumstances and how to handle them (e.g., no ID, short sample, shy bladder, adulteration)

- Disinfection procedure

The USAP SOP also includes the procedures for urinalysis testing while deployed. This section should include:

- Authority for ordering and canceling urinalysis (Commander, appointed representative)

- Testing rate

- UPL Certification requirements

- Base Area Codes for garrison or deployment

- UPL duties when deployed

- Shipping and recordkeeping procedures
You may use policy letters in lieu of USAP SOPs. Although this is acceptable, the policy letter must address all Unit-specific procedures and information that the Installation Military Collection SOP does not mandate.

A modifiable USAP SOP is available on the ASAP Web site.

**Deployment Testing SOP**

The deployment testing SOP is part of the USAP SOP. Upon deployment, the UPL should perform the following tasks to complete their testing SOP. The deployment testing SOP includes the following information about what the UPL does when arriving at the deployment area:

- Coordinate with the Base Area Code (BAC) Manager in the deployment area for drug testing information to include policy, BACs to enter on the DD Form 2624 for proper reporting of test results, addresses for the Forensic Toxicology Drug Testing Laboratories, local supply system and testing results. If the BAC Manager cannot be identified, go to the ASAP Web site for instructions.

- Determine the local region requirements for turn in of specimens for shipment. The official mail channel should be used first. If there is no official mail system at your location, determine if there is a U.S. flagged carrier (Federal Express, United Parcel Service, U.S. Postal Service, etc.) and ask your Commander to set up an account with the available carrier to have your Unit’s specimens shipped to the servicing FTDTL. Mail inspection may impact the specimen chain of custody. A guidance for mailing specimens is available from HQDA for your specific deployment area. Go to the ASAP Web site for instructions.

- Set up an area for the collection, quality control, temporary storage, packaging and shipping of specimens. Minimum requirements for temporary storage in AR 600-85 will be followed, or the UPL will guard the specimens until they are mailed.

- Supply logistics will be coordinated between the UPL and supporting supply channel.

For a modifiable Deployment Testing SOP and additional information, please refer to the ASAP Web site.

**Unit Prevention Plan (UPP)**

Embedded in the Unit SOP is the Unit Prevention Plan. The UPP is a comprehensive document that defines how to address substance abuse issues in your specific Unit. Additionally, the Unit Prevention Plan outlines the following key issues:

- Minimum amount of Substance Abuse training.
- Frequency of contact with higher Command (e.g., ARCENT) or ASAP to obtain new information and/or pamphlets.
- How the Commander identifies high-risk populations (URI, R-UIR, health and welfare inspections).
Writing the UPP

The UPL should work with the installation ASAP staff to create the UPP.

Remember that:

- There is no single effective approach to preventing substance abuse. Your plan should include multiple strategies.
- You should coordinate with the people who directly participate in prevention efforts (i.e. the Commander and the ASAP staff) when developing the prevention strategy.
- Unit prevention programs should be part of a larger effort to create a healthier installation community (i.e., the Installation Prevention Plan).

Making Prevention Efforts Effective

Adhere to these guidelines to make the most of your time with prevention efforts:

- Coordinate and talk with your installation ASAP staff members, USAR ADCO, and NGB JSAPC or PTO for information and ideas for substance abuse training. Your installation ASAP office should have some of the following resources available to assist you with your Unit prevention efforts:
  - Multimedia prevention and education products, such as videotapes, audiotapes, and CD-ROMs. You can obtain these from the Prevention Coordinator.
  - Prevention services to assist with early detection and referrals of Soldiers before military careers are in jeopardy.
  - Social marketing “giveaways” that educate and inform Soldiers about problem issues and the programs available to address their needs (such as posters, flyers, buttons, pens, etc.).
- Increase knowledge and raise awareness within your Unit.
  - Use various means such as the Unit bulletin board, newsletters, and e-mail messages to keep Soldiers informed about substance abuse-related issues. Refer Soldiers to the various materials and resources available to them.
  - You may also want to participate in national campaigns such as Red Ribbon Week or 3D Month in order to increase awareness and gain access to additional substance abuse prevention materials.
- Assist in building social/life skills through training and education. This training can address areas such as avoiding negative peer influence, DUI education, and decision-making.
- Effective prevention planning requires creativity, organization commitment and support.

REMEMBER: Successful Unit ASAP starts and ends with the Unit Prevention Leader!
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Section 2

Pre-Collection
Section 2: Pre-Collection

Drug Testing Preparation

Drug testing within the military is defined as the chemical analysis of urine for specific drugs or the analysis of breath or blood for alcohol. The terms “drug testing” and “urinalysis testing” are commonly used to refer to the same procedures.

There are governing regulations that explain the purpose for drug testing:

- DOD Directive 1010.1 outlines the formal mandate given to the military services to update their policies and responsibilities with respect to substance abuse urinalysis programs.
- DOD Instruction 101.16 provides the technical procedures for how to implement a substance abuse testing program.
- AR 600-85 governs the Army Substance Abuse Program (ASAP). The regulation defines Army policy on alcohol and other drug abuse and assigns responsibilities for implementing this program. The complete AR 600-85 is available for download on the ASAP Web site or www.apd.army.mil.

Use the AR 600-85 as a reference document and ensure that it is always present during urinalysis testing. AR 600-85 also defines the scope of the UPL’s responsibilities.

Random Testing

The most important elements of the Army’s drug testing program are that it is conducted completely randomly but yet executed consistently.

- DOD Directive 1010.1 and AR 600-85 state that the minimum annual rate of testing is to collect a number of random samples equal to the number of active duty members in the Unit. For example, if your Unit has 120 Soldiers, you must collect a minimum of 120 samples during the year. However, the process of random selection leads to some Soldiers providing more than one specimen and others possibly providing none.
- The recommended minimum weekly rate of random testing is 4-5 percent of Unit strength. However, Commanders can order testing to be conducted at a higher rate than the minimum.
- For Army Reserve and National Guard, the regulations mandate 10 percent of Unit strength per month or 25 percent per quarter.

Testing Requirements for Specific Personnel

AR 600-85 requires UPLs to submit to urinalysis testing a minimum of once in each 12 month period to ensure their continuing fitness for the positions they hold and the integrity of the drug testing program.

In addition, some personnel must submit to drug testing at least once in each fiscal year unless they are detailed to duties outside their military occupational specialty (MOS) or are assigned as instructors or to Battalion or higher staffs for the entire fiscal year. They include:

- 21M Firefighter
- 31B MP
- 31D CID Special Agent
- 31E Corrections Specialist
- 68D Operating Room Specialist
- 68E Dental Specialist
- 68K Medical Laboratory Specialist
- 68P Radiology Specialist
- 68Q Pharmacy Specialist
- 68W Healthcare Specialist
- 68X Mental Health Specialist
- 92R Parachute Rigger
- All officers in the medical corps, dental corps, medical specialist corps, nurse corps, or medical Service corps officers with a primary Area of Concentration of 67E, 67F, 67G, 71E, 62C, 73A, or 73B

**Testing Documents Overview**

There are three forms that you must have on hand in order to perform testing that is compliant with AR 600-85:

- DD Form 2624 - the specimen custody document. It records where the specimens are at all times.
- Testing Register - The Testing Register lists Soldiers selected to test and their assigned Observer, and is the only document that links SSN's to Soldier names. The UPL holds this document and annotates it with the testing results. The UPL prints the Testing Register when using DTP software. There is also a blank form that can be filled out by hand and serves the same purpose as the Testing Register. AR 600-85 refers to the blank form as the Unit Urinalysis Ledger.
- Bottle Labels - The labels attached to every specimen bottle provide an evidentiary link between the specimen and the individual listed on the DD Form 2624.

**Drug Testing and Unit Readiness**

Drug testing is a critical mechanism for maintaining your Unit’s readiness. When Soldiers abuse drugs, they compromise their own capacity for duty and put the entire Unit at risk.

Drug testing can:

- Deter Soldiers from abusing drugs (including illegal drugs and prescribed medication).
- Facilitate the early detection of alcohol and/or drug abuse.
- Enable Commanders to assess the security, military fitness, good order, and discipline of their Units.
- Monitor rehabilitation of those enrolled in the ASAP for alcohol and/or other drug abuse.
- Collect data on the prevalence of alcohol and/or other drug abuse within the Army.

**IMPORTANT**

When using a manual method for random selection, the UPL must acquire blank testing forms from the ASAP Web site or in the appendixes in this handbook.
Hallmarks of a Good Unit Drug Testing Program

Unit Drug Testing Programs are running properly if they:

- Conduct testing in a truly random manner, employing random selection methods and varying the frequency and time periods for tests, so that testing is unpredictable to the testing population.
- Submit at least 95 percent of their urinalysis specimens to the FTDTL using the DOD DTP software.
- Maintain a specimen discrepancy rate below 3 percent.
- Appoint at least two UPLs on orders signed by the Commander who are certified in accordance with the ACSAP UPL Certification Training Program.
- Pass a Unit-level inspection, using the ACSAP checklist or similar standard, as conducted by a higher Unit or the ASAP staff each fiscal year.
- Have a Unit-level substance abuse program SOP signed by the Commander.
- Have Command team presence during most urinalysis collections.
- Use officers and senior NCOs as Observers during urinalysis collections when possible to reinforce Command support for the program.
- Emphasize to Observers the crucial importance of performing their duties exactly as specified in the Observer briefing.
- Test every Soldier selected and do not excuse any Soldier before a complete and acceptable urine specimen has been provided.

UPL Guiding Principles

These principles should guide every UPL interaction, regardless of the circumstances, and challenges that arise while conducting urinalysis testing.

- Creativity—This is a critical factor in effective urinalysis testing because it improves the ability to deter drug abusers.
- Teamwork—The UPL works with Observers to obtain all specimens in accordance with AR 600-85, DOD Directive 1010.1, and DOD Instruction 1010.16.
- Respect—It is a UPL’s responsibility to treat all Soldiers with respect and dignity. The UPL must also maintain Soldier privacy.
- Precision—The UPL must ensure that the approach to specimen collection is flawless. They must abide by Army regulations to maintain collection process integrity.
**Smart Testing**

**Definition**

“Smart Testing” is drug testing conducted without set patterns and schedules. The goal of Smart Testing is to make testing unpredictable to the testing population.

The result of properly implemented Smart Testing techniques is that every Soldier believes that he or she may be tested on any given day at any given time.

Soldiers who abuse drugs will do almost anything to avoid being caught. A Soldier who knows when the urinalysis will be conducted may attempt to substitute another fluid for his specimen or contaminate his specimen, so that it is un-testable. Any testing plan or strategy used must be consistent with the requirements of a valid health and welfare inspection.

The keys to obtaining a good urinalysis specimen are to:

- Prevent Soldiers from knowing when they will be tested until just before the test.
- Maintain control of the Soldiers until they provide their specimens.
- Ensure that Observers perform their duties correctly.

**Examples**

**Weekly Testing**

You should randomly test a part of your Unit each month, preferably 4 percent of your Unit every week when mission and organizational structure allows. Many deployed Units conduct 10 percent random testing per month.

Soldiers may become accustomed to weekly testing, which may make it even easier for them to identify any established testing patterns. Therefore, it is critical that the UPL implements Smart Testing techniques by testing on different days each week.

**Weekend/Holiday Sweeps**

Most Soldiers expect to attend Unit Safety Briefings before a long weekend, and then expect to be tested when they return. Surprise them by testing during the weekend.

Most Units are also required to test their alert system periodically. This is a good time to test Soldiers on a weekend.

**Back-to-Back Testing**

Some Soldiers believe that if a urinalysis was conducted Friday, it’s safe for them to abuse drugs over the weekend. An occasional back-to-back test will make them rethink this strategy—and could deter them from abusing over future weekends.

For the National Guard and the Army Reserve, back-to-back testing can consist of testing on Saturday and Sunday.

**Pre-and Post-Deployment Testing**

Many Soldiers think the Command will be so focused on other tasks that there will not be enough time to test prior to deployment or upon returning.

Remember, Smart Testing strategies include testing when Soldiers least expect it.
Testing During Field Exercises
When training in the field, use random selection strategies to conduct urinalysis testing. Consider these suggestions:

- Chow Line—Select every fourth person and test them after they eat.
- POL Point—Select every third vehicle and test all occupants of the vehicle.

Testing at the End of the Duty Day
Another advantageous time to test is during the end-of-duty routines, such as:

- Recall Formation
- Afternoon PT

Avoid Setting a Pattern
Remember, since testing should be conducted on a weekly basis, Soldiers will be aware that the likelihood of being tested at some point is high. Take steps to avoid setting a pattern. Don’t just test on the first or last day of the week; alternate testing days.

Do Not Ask for Volunteers
Being a volunteer is a great thing. However, asking for volunteers to submit samples for drug testing is not a good idea. Soldiers who are abusing drugs are not likely to volunteer to be tested. Asking for volunteers will invalidate the randomization of the collection process.

Do Not Announce Testing Before Notification
If a Soldier has abused drugs and knows that a test is coming up, he or she may have enough time to flush their system with lots of water possibly diluting the amount of evidence in their urine. That means a reduced chance of detecting substance abuse within the Unit and an increased risk for Unit readiness. Soldiers should receive no more than two hours’ advance notice, preferably less.

Avoid Signaling a Test
Be aware that people around you may observe all of your actions as a UPL.

The UPL can inadvertently signal an upcoming test. Soldiers are smart—if they spot a UPL walking about with boxes filled with specimen cups, they will figure out that a test is about to happen. Keep supplies out of sight until the day of testing.

If You Select Them, Then Collect Them
Don’t stop testing because it is the end of the duty day. For example, if you regularly halt testing at 1700 before you’ve gotten through the entire ledger, Soldiers will catch on and may try to wait you out.

Collection is complete only when the last tested Soldier’s name is signed on the Testing Register.

Collect From Every Soldier on Your Testing Register
If the test has more names than required to meet the testing percentage, continue anyway. By regulation, you are required to collect a specimen from all Soldiers selected for testing.
Know Your Options for Random Selection

It is critical that you and the Commander ensure that any random selection test is truly random. If test selection is not truly random, there is a risk that a court will dismiss positive results.

There are two approved random selection methods: computer-generated and manual.

**Random Selection Methods**

**Computerized Random Selection Methods**

The Army has approved two computer programs for you to use as tools to automatically generate a random sample:

- DOD’s Drug Testing Program (DTP) Full Version
- DTP Lite

See the DTP Lite software demonstration for details on how to use the program.

**Non-Computerized (Manual) Random Selection Methods**

- Roll a ten-sided die or draw numbers (0-9) from a hat. Personnel whose SSN ends with the number rolled or drawn are selected to test. Numbers on the die or in the hat could repeat in two consecutive tests, which means that some Soldiers could be tested a second time.
- Write every Soldier’s name on 3-by-5 cards, shuffle the cards, and draw the names from the deck to populate the Testing Register.

**Testing Dates**

The Commander may delegate the responsibility to select the testing date and the percentage of the Unit to be tested to the UPL and/or the First Sergeant (1SG); but the Commander must still order the test.

**Scheduling**

Choosing an unpredictable pattern will increase drug testing effectiveness. For example, if a UPL is choosing dates over a two-week span to meet the weekly testing requirements and the test for the first week was conducted Friday at 0800, the UPL should schedule the subsequent weekly test on a different day. Monday is probably the most effective day.
Testing Codes

In accordance with the DOD Directive 1010.1, there are nine purposes for ordering urinalysis testing of Soldiers. The Commander must always order the urinalysis test and determine the test basis code to use.

As a UPL, you must not only know all of the urinalysis testing codes, but you must also use testing codes accurately.

The testing codes below represent how the Army categorizes these nine purposes. When you prepare documentation for urinalysis testing, you will use these codes to identify the purpose of the test.

**Inspection Testing Codes**

**Inspection Random (IR)**

Use the IR testing code when randomly selecting a percentage of the Unit for urinalysis testing. You will use the IR code most often, since you should randomly test at least 4-5 percent of your Unit on a weekly basis.

For example, the Commander orders the UPL to test 10 percent of the Soldiers in the Unit. In this scenario, the UPL uses the Inspection Random (IR) code since the test involves only a randomly selected group within the Unit.

**Inspection Unit (IU)**

Use the IU testing code when testing 100 percent of your Unit.

For example, a Commander orders the UPL to test the entire Unit. In this scenario, the UPL will use the Inspection Unit (IU) code since 100 percent of the Unit is being tested.

The most effective programs conduct periodic Unit sweeps in addition to random selection for drug testing. Do not use IU testing when the Commander suspects a Soldier of abusing drugs but does not have sufficient probable cause to conduct a collection. The Battalion Commander should ensure that the number of specimens collected under a Unit sweep is no more than 75 percent of the number of randomly-selected specimens submitted for testing annually.

**Inspection Other (IO)**

Use the IO code for specific testing circumstances outlined in the Commander’s policy memorandum or Unit SOP.

Some circumstances to use this testing code include:

- Soldiers returning from Absent Without Leave (AWOL)
- Soldiers returning from passes or R & R
- Soldiers who were selected for testing, but were unavailable during a recent random inspection

For example, several Soldiers have returned from R & R. The Commander’s policy states that any Soldiers returning from R & R must undergo urinalysis testing. In accordance with this policy the Commander orders the UPL to test the Soldiers. The UPL uses the Inspection Other (IO) code in this scenario.

Remember that testing is about deterring drug use rather than “playing gotcha” to catch abusers.

**IMPORTANT**

Using an incorrect testing code may cause legal implications.

**IMPORTANT**

You should not conduct IU tests routinely. For example, Commanders should not use a Unit sweep to target an individual Soldier or small group of Soldiers they suspect of using drugs.
Commander-Directed Testing Codes

Probable Cause (PO)
Use the PO testing code to identify cases where the Commander has sufficient evidence to believe that a Soldier has violated the UCMJ through the abuse of alcohol or drugs.

Commanders are strongly advised to consult with the local SJA prior to ordering this test, although it is not a requirement. The SJA will advise the Commander whether they truly have probable cause. However, if the SJA is not available, the Commander can still proceed.

For example, during a routine inspection, the Commander finds hypodermic needles in a Soldier’s room. The Soldier has no medical reason for possessing the needles. In this scenario, the UPL uses the Probable Cause (PO) code since the Commander has reason to believe the Soldier has used an illegal substance still detectable in urine.

Fitness for Duty/ Competence for Duty (CO)
Use the CO code to identify situations where the Commander believes that a Soldier is using drugs on the basis of unusual or bizarre behavior and/or breaches of discipline. The Commander may order this test to ensure the safety of the Soldier and the Unit.

For example, over the past month, a Soldier exhibits tardiness and a decline in personal hygiene. He recently displayed bizarre behavior towards his fellow Soldiers. Prior to this, he had an exemplary attendance record and got along well with his fellow Soldiers. In this scenario, the UPL uses the Command Direct (CO) code which supports the Commander’s suspicions that the Soldier’s competence for duty is compromised based on his uncharacteristic behavior.

Rehabilitation (RO)
Use the RO testing code when the Commander orders a test as part of a Soldier’s rehabilitation program for drug and alcohol abuse.

For example, a Soldier is enrolled in the ASAP rehabilitation program. She is participating in testing in order to comply with the requirements of the program. The UPL uses the Rehabilitation (RO) code because testing is mandated as part of a Soldier’s enrollment and treatment in the ASAP rehabilitation program.

Other Codes
Mishap or Safety Inspection (AO)
Use the AO test code to indicate testing that occurs as a result of a Soldier being involved with an accident that destroys property or causes injuries to personnel.

For example, the Commander has ordered the UPL to conduct a test on a Soldier because she was involved in a vehicle accident on the Forward Operating Base (FOB). In this scenario, the UPL uses the Mishap or Safety Inspection (AO) code, because there has been an accident that destroyed property.

Consent (VO)
Use the VO testing code to identify a test for which a Soldier volunteers to provide a sample.

For example, a Soldier volunteers to provide a sample since he has been plagued by rumors of drug use. The UPL uses the Consent (VO) code because the Soldier volunteered the sample.
Medical Examination (MO)

Use the MO testing code to indicate testing that occurs as a result of a physician ordering a urinalysis test.

For example, a physician may order a urine test after examining a Soldier and determining that medical signs suggest drug abuse. The UPL uses the Medical Examination (MO) code because the test has been ordered by a physician.

Special Testing Scenarios

This list covers some examples of special testing situations. You may encounter other testing circumstances for which you will need to take special steps. When you have questions or need assistance, please contact your DTC, USAR ADCO, NGB JSAPC, or ACSAP for more information.

As a UPL, you will be asked to test Soldiers for drugs that are not normally tested. Some of these scenarios include:

Rotational Drugs

If a Commander wants to test a Soldier specifically for Phencyclidine (PCP), Oxycodone/Oxymorphone, or for opiates such as codeine or morphine, the Commander must complete a memorandum to request a test. The memorandum must include the specific drug to test and the Soldier’s SSN from the urinalysis paperwork.

Steroid Testing

The Commander must complete a memorandum to request a test for steroids. For more information on steroid testing, including an example of the memorandum to request a test, refer to the ASAP Web site.

Commanders must have probable cause in order to issue this request. The testing code is PO. The Soldier must provide 60 milliliters of specimen.

Since steroid testing is not done on a regular basis, contact your installation Drug Testing Coordinator, component program manager, or the DA proponent the ACSAP for assistance with steroid testing requests. See the Post-Collection section in this handbook for the address to send specimens for steroid testing.

To order a steroid test, the Commander must coordinate with the ASAP in advance. The UPL submits each specimen and written request for steroid testing on a separate DD Form 2624.

Special Tests

If a Commander wants to test a Soldier for other drugs such as mushrooms (psilocybin) or prescription drugs, probable cause must be established. The correct testing code is PO. The UPL must complete different paperwork depending on the drug in question; therefore you must contact your DTC or ACSAP for more information. There is also information available on the ASAP Web site. See the Post-Collection section in this handbook for the address to send specimens for special testing.

General Retesting

AR 600-85 requires Commanders to retest Soldiers in these circumstances:

- The specimen or the accompanying urinalysis paperwork was not forensically correct, OR
- The drug testing laboratory refused to test the specimen on suspicion of adulteration

Use the IO test basis code for retests.
The Limited Use Policy

Purpose

The Army’s purpose for implementing the Limited Use Policy is to encourage Soldiers to identify their own drug or alcohol problems and to self-refer to the ASAP for help without fear about negative consequences for coming forward. The Limited Use Policy provides a way for Soldiers to demonstrate their potential for rehabilitation and retention, as an alternative to discharge.

Protected Evidence

The Limited Use Policy basically prevents the Commander and/or SJA from using certain information in a Court Martial, for UCMJ action, or for characterization of service in a discharge. The information is known as “protected evidence.”

Examples of protected evidence include:

- Drug test result when a Soldier self-refers to the ASAP (Self-referral is discussed in detail later in this section).
- Information collected during emergency medical care of a Soldier for an overdose. The Army considers an overdose, or possible overdose, to be “a cry for help” and therefore treats a Soldier who overdoses as a self-referral.

Exceptions to the Limited Use Policy

In addition to the cases in which information does not qualify as protected evidence, these are situations in which the Limited Use Policy does NOT apply. Authorities may use drug test results against a Soldier in these cases:

- If a Soldier self-refers after receiving notification to participate in a drug test (such as a random inspection or probable cause test).
- A positive drug test result after a rehabilitation test (RO test basis) on a Soldier who is enrolled in the ASAP for alcohol abuse.
- Information regarding continued substance abuse occurring after a Soldier self-refers.
- Positive results for drugs from a test conducted during regular Unit urinalysis (e.g., test basis of IR, IU, or IO) after a Soldier is enrolled in ASAP.
- If a Soldier is apprehended by law enforcement prior to receiving emergency medical care.

Legal Responsibilities of Commanders and UPLs

Commanders must initiate separation actions on all identified drug abusers except Soldiers who properly self-refer to ASAP either directly or through Command channels. The Commander may still opt to administratively discharge a Soldier, but the Limited Use Policy mandates that the Soldier receive an Honorable Discharge.
**DTP Software**

When it comes to creating test selections, the DTP method is preferred over manual random selection methods because it helps:

- Reduce errors
- Speed up collection time
- Speed up processing time
- Standardize the selection process, which validates randomization

DTP software automatically creates a selection of Soldiers and produces all of the required documentation available for printing. When used to generate your test selection, DTP Lite software enters and prints the pertinent information on the forms.

For a review of basic DTP Lite functions, refer to the DTP Lite Quick Reference Guide in this handbook. If you experience any difficulties using DTP Lite on your own, check the DTP Lite Troubleshooting Job Aid or contact ACSAP for assistance.

**DTP Software Types**

There are two versions of the software:

- DTP Full Version
- DTP Lite

Both versions are approved by the Army G-6 for use and are available on the ASAP Web site. Instructions for using the programs are also available on the site. Your local ASAP will determine which version of DTP you should use. Your local ASAP will also provide additional training on the DTP full version if you are required to use it.

Download the software to your desktop. Obtain the Unit roster in MS Excel and save it to your desktop.

**DTP Software Instructions**

**Step 1: Start the DTP Lite Program**

1-1. Double-click the DTP Lite folder on your desktop to access the program. The folder should contain a copy of your Unit alpha roster in an Excel file.

1-2. Open the Excel file to check the roster before using DTP Lite to ensure that the roster is up to date.

1-3. Close the roster.

1-4. Locate the Dtplite.exe file.

1-5. Double-click to open the DTP Lite program. A title window will appear briefly and close automatically. The **Identify Roster File** screen appears.
DTP Screen Layout

Every screen in DTP Lite has three main areas: Screen Title/Instructions, Controls, and the Work Area. Note: The contents of the Work Area change as you move from one screen to the next.

Step 2: Identify the Correct Roster File to Use

The work area of the Identify Roster File screen has three components: the File Location Box, the Directory Pane and the Document List.
2-1. In the Document List, locate the Unit roster file that you reviewed in Step 1-2.

2-2. Click on the file name.
2-3. Click Next to import the file into DTP Lite. The Format Roster screen appears.

Step 3: Format the Roster

The Format Roster screen shows all of the raw roster data for your Unit.

- Familiarize yourself with the screen. If your roster is not in MS Excel file format, click on the File Type list to select the correct file type.
- The columns all have the same temporary heading of “Do Not Import”.
- The first row shows the original roster file column headings (Name, SSN, etc.).
- Starting on the second row, each line under the category headings lists a separate record for each person in your Unit. You should see the following:
  - Name
  - SSN
  - Rank
  - Gender
  - Organization (optional)

Fyi
If you do not see the file on the list, search through the Directory Pane to locate it.

Important
If the “Next” button is not active, you have not labeled all the required columns. Check the error message in the lower left corner to see what’s missing.

Fyi
The field for Organization is optional. If this column heading is assigned, the program will print one separate form for each different organization.

Fyi
If both the first and last name are in the same column in your original roster file, select Last Name for the column heading name. DTP Lite only requires the Last Name entry.
To format the roster file, follow these steps:

3-1. Identify which data to import into DTP Lite:

3-2. Click on the temporary “Do Not Import” heading to open the label drop-down list.

3-3. Select the name of the column heading that matches the data in the column.

3-4. Repeat steps 3-2 and 3-3 until the Name, SSN, Gender and Rank columns are each labeled.

3-5. Click in the “Ignore Header” check box to remove column headings that import from the Excel file.

3-6. Click Next to continue.

**Step 4: Choose Testing Parameters**

The Choose Testing Parameters screen shows all of the formatted roster data for your Unit and contains the entire test parameters that you need to input. The roster data appears in the list on the left. The test parameters appear on the right.

**IMPORTANT**

Do not remove the column headings if Soldier data appears in the first row.
4-1. Click on the Location Code list and select the location code for your Unit’s present location.
   - If you are located in one of the 50 states then select “US-UNITED STATES” or “ND-NON-DEPLOYED”.
   - If you are stationed in another country, a US territory, or deployed to another country then select the appropriate country, such as “IZ-IRAQ”, or “RQ-PUERTO RICO”.

4-2. Click on the Testing Premise list and select the appropriate testing premise (Test Basis Code).
   - You may only assign one Test Basis Code at a time.
   - If you are testing for multiple purposes, you will need to create additional selections after printing documents for this selection.

   It is imperative that you assign an accurate premise every time.

   - The default testing premise is Random Testing (IR).
   - When you select any other premise types, the remaining test parameters turn gray and unavailable as selections. See step 5 (Select Members for Testing) or what to do when selecting other testing premise types.

4-3. For Random Selection (IR) tests only, choose a Selection Method:

   - If you select Probability, DTP will select approximately (plus or minus a few percent) the percentage of the Unit entered in the Testing Probability field (since DTP is based on random selection). However, over time the percent of Soldiers selected will average out to the correct percentage. Note: selecting a small percentage of a small population may result in no one being selected at all.
   - If you select Total Number, DTP will select the number of Soldiers that you specify in the Testing Count field. This is the recommended selection method.
4-4. For IR tests only, enter a desired number for testing count or testing probability, depending on the choice for Selection Method. Either clear the field and enter a new value, or continue to accept the default entry of 10.

For example, if you wanted to test 10 percent of your Unit and you have 120 Soldiers assigned, you would either:

- Select Total Number and enter 12 for the Testing Count, or
- Select Probability and enter 10. Keep in mind, however, that a 10 percent selection will yield approximately 8-12 percent of the Unit each time because DTP is based on random selection. Over time this will average out to 10 percent a month.

4-5. Click Finish. A confirmation dialogue box will appear.

4-6. Click No to modify the parameters or click Yes to continue to the Print Products screen (step 6). Note: See step 5 for tests other than IR or IU.

**Step 5: Select Members for Testing (only for tests other than IR and IU)**

The Select Members for Testing screen appears only if you select a testing premise other than Inspection Random (IR) or Inspection Unit (IU) and click Next on the Choose Testing Parameters screen in step 4. This screen lists all of the Soldiers in your Unit so you can select which individuals are to be tested.

The full list of Soldiers in your Unit appears in the Available list on the left.

The Soldiers you select will appear in the Selected list on the right.

5-1. Select members using one of the following methods:

- To select all of the members of your Unit for a Unit Sweep, click on the upper red double arrow in the center of the screen.
- To remove all of the members of your Unit from selection, click on the lower red double arrow in the center of the screen.
- To select a particular individual for testing, highlight the name and click on the upper red single arrow in the center of the screen.
- To remove a particular individual from selection, highlight the name and click on the lower red single arrow in the center of the screen.
- To select multiple individuals for testing, click each name and click the upper red single arrow in the center of the screen for each one.
You may also click the first name, depress and hold the Ctrl key on the keyboard, click the remaining names, and click the upper red single arrow on the screen.

5-2. Click Finish and a confirm dialog box opens.

5-3. When you are ready to create your test sample, click Yes.

**Step 6: Input Data on the Print Products Screen**

The **Print Products** screen shows the list of Soldiers selected for testing and contains all of the print settings for your testing documentation. A list of Soldiers selected for testing appears on the left. The testing data and items to print appear on the right.

6-1. Click in the BAC box and carefully enter your Base Area Code.

6-2. Click in the UIC box and carefully enter your Unit Identification Code.

6-3. Click on the DD Form 2624 Block 1 box and carefully enter the Unit designation, complete address, and phone number for the Unit conducting the collection.

**Example:**
HHC 2/16 INF
Bldg 9277 Warrior Ave, Fort Swampy, LA 12345
Comm: (123)-555-1234

**IMPORTANT**
During deployment a BAC may be assigned to an area or major Command. Refer to the ASAP Web site if you don’t know your BAC. It is critical that you enter the correct information in these fields.

**FYI**
The “W” in the UIC is already entered for you.

**FYI**
Refer to AR 600-85 for Block 1 information. You can only enter three lines of information and only a portion of your actual entries will be visible. You can write in additional lines for Block 1 by hand.
6-4. Click on the DD Form 2624 Block 2 box and carefully enter contact information for the installation ASAP (in garrison), state JSAPC/O (NG Units in garrison), RSC ADCO (USAR Units in garrison), or BACM information (all deployed Units).

**Example:**

Fort Swampy ASAP
Bldg 2146 Swamp Ave
Fort Swampy, LA 12345

6-5. Click on the “Collection Date” to open a calendar. Select the date that the test will occur. The default setting is the current date, but you can change it to print your documents a day or two ahead of time.

6-6. Click in the “Starting Batch” box if you wish to change the batch number.

A single batch contains data for 12 Soldiers; this matches the size of the box used for shipping specimens.

The program will automatically calculate the batch numbers if your sample is larger than 12. If you select personnel for one test, and then select personnel for an additional test later in the same day, be sure to change the batch number before printing products for the second test.

**Example:**

You run two test samples to identify Soldiers for two different testing premises.

Your first selection includes 26 Soldiers for a random test (IR). DTP automatically generates three batches and assigns numbers to them:

- Batch 0001 has 12 Soldiers.
- Batch 0002 has 12 Soldiers.
- Batch 0003 has 2 Soldiers.

Your second selection includes 15 Soldiers for Command-Directed testing (CO). DTP automatically generates two batches and assigns numbers to them:

- You must set the number for the starting batch number to 0004.
- Batch 0004 has 12 Soldiers.
- Batch 0005 has 3 Soldiers.
6-7. If you want to print separate sets of documents for males and females, click the Group by Gender check box so that a checkmark appears.

DTP Lite allows you to print separate sets of documents for males and females selected for testing, but it is not necessary to do this. Some UPLs find that printing separate lists is easier for effective organization and test execution. It can be especially helpful for locating names on the list when conducting a Unit Sweep or any test involving a large number of Soldiers.

6-8. Click the check boxes under Available Printouts to select the **required** products to print.

Required products to print are: Testing Register, DD Form 2624, front and back) DD Form 2624 (Back Side) and Bottle Labels.

6-9. Click the check boxes under Available Printouts to select **optional** products to print, if desired.

The optional products to print are: Personnel to Be Tested (Notification Copy) and Personnel to Be Tested (Working Copy).

**IMPORTANT**

You must print both sides of the DD Form 2624 on the same sheet of paper with the top in the same position on both sides.
These documents help simplify contacting and tracking Soldiers for testing. Using them also helps reduce risk of damaging or losing the official testing documents. The Notification Copy is for contacting Soldiers to report for testing. The Working Copy is for tracking Soldiers who are due to return for testing at a later date and the reason to delay testing.

These documents are only available in DTP-Full Version software.

**Step 7: Preview and Print Documentation**

7-1. Click the Print button. The *Print Preview* screen opens showing the first product to print—in this case, the Testing Register.

7-2. Click the printer icon in the upper left corner of the screen. The print dialogue box opens.

Verify that the correct Printer Name is selected. If it is not correct, click the name box to open a drop-down list and select the correct printer.

7-3. Click OK to send the first product to the printer.

7-4. Click Close at the top of the screen. The *Print Preview* screen will open showing the second product that is to be printed.

7-5. Repeat steps 7-2 to 7-4 above for the remaining products to be printed.

- **Remember** that you must print both sides of the DD Form 2624 on the same piece of paper with the top in the same position on both sides. If you did not print the forms correctly the first time, you must reprint them. To reprint, select only the DD Form 2624 check boxes on the *Print Products* screen.

- You must enter a Starting Label Position in a dialog box when printing bottle labels. The starting position is the label number to print the first label, counting from the top of the blank sheet. The default selection is 1. Keep in mind that there are 10 labels on a sheet. Change the default position if you are starting with a partially used sheet. Click “OK” after entering the starting label position.

7-6. Click Close on the *Print Products* screen if all products printed properly. A “Confirm” dialogue box will appear.

7-7. Click Yes to close DTP Lite or No to return to the *Print Products* screen.

**IMPORTANT**

Be sure that you treat any printed papers as “For Official Use Only (FOUO).” Shred them or use a burn bag to dispose of them.

**IMPORTANT**

If you close the program, all information you entered to this point is deleted and you cannot print any other forms from your selections.
Setting Up for Testing

Roles and Responsibilities

Unit Commander
The Unit Commander has overall responsibility for the testing procedure and has these specific duties pertaining to urinalysis testing (AR 600-85):

- Perform the Commander briefing and be accessible during testing.
- Be aware of the times that urinalysis testing begins and ends.
- Appoint the UPL on written orders and outlines the UPL's responsibilities for testing in the appointment document.
- Select Observers; can delegate responsibility to the UPL.
- Select the holding area NCO/Officer; can delegate responsibility to the UPL.

Unit Prevention Leader
The UPL has these specific duties pertaining to urinalysis testing:

- Conduct the testing and address any questions that may arise.
- Conduct the UPL briefing, Observer briefing and training, and when required, the Commander briefing.
- Serve as Liaison to the Commander for urinalysis testing and substance abuse prevention.
- Ensure that SOP for urinalysis testing exists and is followed.
- Use the DTP software as the primary method for randomly selecting Soldiers for drug testing.
- Set up the testing station and holding area.
- Conduct latrine inspection.
- Ensure that all UPL documentation is completed in accordance with established standards.
- Ensure that urinalysis testing supplies are available and handled appropriately.

Multiple UPLs Working on a Single Collection
If two or more UPLs conduct a collection, each UPL should handle their own DD Form 2624. Two UPLs cannot share a form as this would invalidate the chain of custody.

If the UPL cannot finish collecting a complete batch of specimens due to an emergency, the UPL closes out the DD Form 2624 by marking any specimens not yet collected as "Not Tested" and blackens out approximately 1/2 inch of the individual Soldiers’ barcodes. The alternate UPL then prepares a new, handwritten DD Form 2624—and therefore, a new batch number—with the uncollected specimens from the batch by the original UPL. The alternate UPL then proceeds to collect specimens from the remaining Soldiers.

Observer
Observers ensure that Soldiers follow the proper testing procedures while providing a urine sample. Commanders may select Observers prior to the test date, but should not notify Observers of this duty until notifying Soldiers to report for the test. Making as few Soldiers as possible aware of the test beforehand is one way to practice Smart Testing. UPLs may select Observers if the Commander delegates the task to the UPL.
Observers must perform the following tasks:

- Sign the Memorandum for Observers prior to beginning collection procedures.
- Maintain direct eye contact with the specimen bottle from the time the UPL hands it to the Soldier until the time the UPL places it in the collection box.
- Guide the Soldier through the collection process.
- Observe urine leaving the Soldier's body and entering the specimen bottle.
- Ensure that no one tampers with the Soldier's specimen.
- Report unusual occurrences and attempts to adulterate the specimen to the UPL.
- Correctly follow the procedure for destroying the specimen bottle if a Soldier does not provide a sample of at least 30 milliliters (or 60 milliliters for steroid tests).
- Sign the Testing Register in front of the UPL and Soldier verifying the collection process and that direct observation was conducted.

In order to serve as an Observer, Soldiers must have the following qualifications:

- Be an officer, warrant officer, or NCO (E5 or above), or civilian corps member (general schedule (GS5) or National Security Personnel System (NSPS) Pay Ban equivalent). The recommended rank for Observers is Sergeant First Class or above.
- Possess sufficient maturity and integrity to preserve the dignity of the Soldier whom they observe providing a urine sample.
- Be the same gender as the Soldier submitting a specimen.
- Not be enrolled currently in the ASAP Rehabilitation Program or be under investigation currently for any substance abuse related offense.

Letter of the Law

Observers must maintain a continual line of sight with the urine samples. They must acknowledge that they directly observed the urination process and do not suspect that the sample is adulterated. Failing to do so could subject them to the following UCMJ articles:

- 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 by signing the Testing Register, acknowledging the urination process was directly observed and no tampering occurred.
- ARTICLE 134: False swearing by authenticating that no substitution or tampering of the urine sample occurred.

Holding area NCO/Officer

The Commander is responsible for selecting the holding area NCO/Officer or Officer, but may delegate this responsibility to the UPL or the 1SG. Holding area NCO/Officers perform the following duties:

- Ensure that only personnel participating in the test are present.
- Remain in the holding area without leaving until the last Soldier provides a validated specimen.
**Base Area Code (BAC) Manager**

Base Area Codes (BACs) are assigned for selected deployment areas. The senior Commander for each deployed Unit that is assigned a BAC will appoint a BAC Manager for the Command and maintain liaison with higher Commands and ACSAP. BAC Managers perform the following duties to support the UPL in urinalysis testing:

- Retrieve urinalysis test results for the Command on a regular basis from the designated FTDTL Web portal, and forward the results via a secure means to Unit Commanders and MROs as appropriate.
- Coordinate with the Command’s MRO to obtain their review of those results that could be the result of a legitimate prescription. The BAC manager will forward the MRO’s decision to the Unit Commander and enter it in DAMIS.
- Ensure that subordinate Units have sufficient drug testing supplies to conduct testing.
- Monitor drug testing rates, trends, specimen discrepancy rates, and MRO delinquency rates.
- Provide reports as requested.
- Monitor UPL certification.
- Maintain ASAP files in accordance with AR 25-400-2, Army Records Information Management System (ARIMS).

**Holding Area Set-Up**

The holding area is the location to which Soldiers report for urinalysis testing. In accordance with AR 600-85, a Soldier who reports for urinalysis testing will remain in the holding area until providing a specimen. The preferred location for the holding area is near the UPL testing station. Non-testing personnel are barred from the holding area.

Once a Soldier is in the testing site holding area, only the Commander who ordered the test may authorize the Soldier to leave before the Soldier provides a specimen. If the Commander allows the Soldier to leave the holding area, an NCO or officer escort should be provided to accompany the Soldier at all times until he or she returns to the holding area.

The holding area must include these elements:

**Signs**

Post a sign in the holding area stating “Urinalysis Test in Progress”.

**Seating for the Testing Participants**

Plan to have enough seats to avoid crowding. Crowded areas could allow Soldiers to conceal efforts to adulterate specimens.

**Beverages**

Consuming fluids prior to urinalysis testing increases the likelihood that the Soldier can provide a specimen. The holding area must have water and disposable cups available. Optional beverages include coffee, juice, and soda. Soldiers in the holding area should drink 8 ounces of water every 30 minutes but not to exceed a total volume of 40 ounces in three hours.

**Trash Can**

Have a trash can on hand for discarding used disposable cups.
Audio-Visual Equipment

Show a substance abuse prevention video. This would allow participants to partially fulfill their Substance Abuse training requirement while they wait. All Soldiers must receive a minimum of 4 hours of alcohol and other drug awareness training per year.

In exceptional cases, an individual with an NCO/officer escort and permission of the 1SG or Commander may leave the holding area for a brief period.

Latrine Inspection

The steps to prepare the latrine are the same whether the latrine is a portable toilet, a trailer toilet, or a building toilet. Portable toilets commonly appear in outposts. Trailer toilets appear in most FOBs. Building toilets (also known as hardstands) appear in FOBs and garrison installations.

The UPL must prepare latrines prior to conducting a urinalysis test according to the following steps:

1. Decide which latrines to use to conduct your test. They should be as close as possible to the testing station. After choosing a latrine, display a sign to indicate the latrine is reserved for testing.

2. Remove any cleaning products from the latrine. Soldiers could use cleaning products to adulterate samples and invalidate the test.

3. Place hand sanitizer in the latrine if it is not already present. Soldiers can use the hand sanitizer to wash their hands after the collection and maintain good hygiene. Prior to providing a specimen Soldiers must wash their hands with water only.

Testing Station Set-Up

The testing station is the “control center” for the urinalysis test. Soldiers report here to check in, meet with their Observer, deliver a sample, and check out.

Remember these points when setting up the testing station:

- Set up the table in a non-carpeted area with your back to a wall.
- Locate the UPL station as close as possible to the latrine(s) that will be used for the collection.
- The UPL station may be the same area as the holding area, although having separate areas is preferred. The UPL should try to set up a table away from the holding area; this reduces distractions by waiting personnel and provides privacy in the collection process. Make sure that you have a table with sufficient space to perform assigned duties.
- Make sure that the desk is constructed from non-absorbent material or is covered with a waterproof-backed and top absorbent covering.
- The testing area should be a controlled area. Only testing personnel, Command personnel and Soldiers selected to provide a specimen should be in the area.
- Make sure that the following materials are available at the UPL station, in addition to the testing supplies:
  - Copy of AR 600-85
  - Copy of installation and Unit SOPs
  - Copy of MACOM and/or installation policy letters
  - UPL appointment orders
  - Disinfectant and materials for a possible spill
Testing Supplies

At a minimum, the UPL should maintain enough supplies to collect 12 specimens at any time for probable cause or competence for duty tests that the Commander may order. It is recommended that enough supplies are on hand to test 100 percent of the Unit strength. To ensure that you have sufficient supplies for the number of specimens you will collect, increase the amount of supplies requested by 10 percent of the number of Soldiers selected to test.

Garrison Comparison—Obtaining Supplies

Deployed UPLs can order testing supplies from their Supply Sergeant. UPLs in garrison can obtain testing supplies from their Drug Testing Coordinator (DTC).

The following items are the testing supplies that the UPL must have for every testing session. AR 600-85 includes a complete list of testing supplies required for urinalysis testing.

**Rubber Gloves**

Wearing rubber gloves and handling testing materials appropriately supports good biosafety practices. You should change gloves every 2 hours during testing.

**Paper Towels**

Have paper towels on hand to wipe up spill or dry bottles when necessary. When testing is complete, use paper towels to wipe down the urinalysis testing station.

**Disinfectant**

Keep disinfectant on hand during testing in case of a spill. When testing is complete, use disinfectant to clean the urinalysis testing station.

**Urine Specimen Bottles**

Use urine specimen bottles to collect samples from all Soldiers. Use only new, unused specimen bottles for specimen collection.

**Urine Female Collection Cup**

The female collection cup is optional. If a female Soldier chooses to use the cup, she must transfer the urine sample from this cup to a specimen bottle. The Soldier must perform the fluid transfer in front of a female Observer.

**Tamper-Evident Tape**

After checking each bottle for the required quantity of specimen, apply tamper-evident tape to the lid in accordance with Army guidelines.

**Avery 5163 Labels**

Bottle labels are essential for indentifying and tracking specimen bottles. Whenever possible, use the DTP software to pre-print your labels.

**Ball Point Pens**

Use blue ink pens so that edits are easy to see among original entries, if the documents are copied and new edits are made. If blue ink pens are not available, it is acceptable to use black ink pens.
**Black Marker**

Use a black marker to make edits on the DD 2624, Testing Register, and Bottle Label.

**Ruler (optional)**

It’s a good idea to have a ruler available in case you need to line out an entire entry on the DD Form 2624.

**Testing Documents**

**DD Forms 2624, Specimen Custody Document-Drug Testing**

Form DD 2624 is sent with the specimen shipment. This is a critical document for testing purposes. Chain of Custody is recorded on this form.

**Testing Register**

The UPL is responsible for maintaining the Testing Register and for annotating it with the testing results.

**Memorandum for Observers**

The Observer signs this document to indicate that he/she understands the responsibilities of the Observer role and that he/she will notify any suspicious activity immediately to the UPL.

**Observer Briefing**

The Observer Briefing document serves as the UPL’s script for the verbal portion of the observer briefing. The UPL must also give observers a demonstration of the appropriate male or female observation tasks before the Observer reads and signs the Memorandum for Observers.

**Commander’s Briefing**

The Commander’s Briefing explains the purpose of testing. The testing participants are notified with a verbal briefing. The briefing becomes the legal order to participate.

**UPL Unit Briefing**

The UPL uses the document to deliver a verbal Unit briefing to participants prior to testing. The document that is used as a script for the briefing outlines the donor’s responsibility during testing and explains how Soldiers comply with the Commander’s legal order to participate.

**Alpha Roster or AAA 162**

The Alpha Roster is used to verify a Soldier’s identity if he/she does not have his/her ID card when checking in for testing.
Reference Materials

AR 600-85
AR 600-85 describes all aspects of the Army urinalysis testing program and its purpose.

Installation and Unit SOPs
Your installation and Unit SOPs describe how your Unit conducts its testing in accordance with the AR 600-85.

UPL Appointment Orders
Your UPL Appointment Orders validate the Commander's appointment of you as a trained and certified UPL.
Notifying Soldiers and Briefing Personnel

After Soldiers are randomly selected, tell the Soldiers only where and when to report. Do not disclose the purpose. You should notify Soldiers less than 2 hours beforehand to report for a urinalysis test. Soldiers should report immediately; however, Soldiers reporting from a remote location should report within 2 hours. Notify Soldiers who have to travel from remote locations with the minimum time in advance as possible.

Observer Briefing

Typically, the Observer briefing occurs prior to the UPL Unit briefing. The UPL may brief Observers before notifying Soldiers to report for the collection.

As a UPL, you must walk each Observer through the collection process before each collection begins and ensure they understand their duties. The Observer Briefing includes a verbal briefing and a demonstration of the appropriate male or female observation tasks. After the verbal briefing, instruct Observers to read and sign the Memorandum for Observers. You can find both the verbal briefing script and the memorandum in this handbook.

These are the key Observer responsibilities:

- Sign the Memorandum for Observers that explains duties and legal implications.
- Maintain visual contact with the specimen bottle at all times during the entire collection process.
- NOT touch the bottle nor hold the bottle cap at any time.
- Directly observe each Soldier voiding urine into the specimen bottle (or urine female collection cup).
- Notify the UPL of any unusual circumstances, such as suspicion that the specimen did not come from the Soldier’s body or is modified.
- Ensure that Soldiers wash their hands with only water before providing a specimen, and with soap and water after providing a specimen.
- Observe that each bottle is sealed and placed in the collection box, and then sign the Testing Register each time.
- Fulfill duties with maturity and integrity to preserve the dignity of the Soldiers they observe.

Letter of the Law

Observers may be subject to administrative action or discipline under the following UCMJ articles if they fail to perform their duties properly:

- 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 by signing the Testing Register and the DD Form 2624, 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.
Commander’s Briefing

The Commander’s briefing should occur prior to starting collection. The Commander can delegate the briefing to a designated representative (commonly the UPL, 1SG, or Holding area NCO/Officer). Here are some critical points to remember from the Commander’s Briefing:

- The Commander’s briefing, upon delivery, becomes the legal order for Soldiers to participate in the test.
- The briefing should include the reason for selection. The Commander should mention that selection is random only if the test is a random sample.
- It is mandatory for all selected personnel to participate.
- The drugs tested for detection may change based on trends occurring within the military population.
- Testing procedures are carried out in compliance with AR 600-85; if violated, consequences may involve UCMJ action.

If a Soldier misses the Commander’s briefing, the Commander or designated representative is required to brief the Soldier.

Here are some additional tasks Commanders may delegate to the UPL:

- Selecting Observers
- Selecting personnel to be tested
- Conducting Commander briefing if the Soldier missed the initial briefing
- Selecting the Holding Area Officer

Letter of the Law

If a Soldier selected for testing does not provide a urine sample, or an adulterated sample is found, the Soldier in question may be subject to the following UCMJ articles:

- ARTICLE 9: Willfully disobeying a lawful order of the superior Commander by not providing a urine sample as directed.
- ARTICLE 107: Making a false official statement by signing the Testing Register, acknowledging the submission of a sample as only urine.
UPL Unit Briefing

The UPL Unit briefing takes place after the Commander briefing. This is the time that the UPL informs Soldiers about the specific procedures they must follow to provide a urine sample. If a Soldier arrives after the personnel briefings have been presented, the holding area NCO/Officer, the Commander or the 1SG must read the UPL Unit brief to the Soldier.

Key Points to remember from UPL Briefing:

- Soldiers need to verify that their SSN is accurate on all the urinalysis documentation.
- Soldiers need to provide the specimen in line of sight of the Observer.
- Soldiers are responsible for ownership of their own specimen bottle from check-in to check-out.
- There is no valid excuse for not participating in testing. Remind Soldiers that non-participation in urinalysis testing can make them subject to UCMJ and administrative actions.

Letter of the Law

The UPL must execute urinalysis testing procedures properly every time or they may face disciplinary action according to the following UCMJ articles:

- ARTICLE 92: Being derelict in the performance of one’s duties in allowing a non-urine or adulterated sample to be submitted for testing.
- ARTICLE 134: Wrongful interference with an adverse administrative proceeding.
Section 3

Collection
Section 3: Collection

Check-In

Testing All Selected Soldiers

All Soldiers selected for testing and present for duty will provide a specimen. You could invalidate the collection process if you excuse anyone randomly selected for testing.

Frequent excuses the UPL may hear from Soldiers attempting to avoid providing a urine sample include:

- “I’m pregnant.”
- “I’m on my period.”
- “I’m taking medication that turns my pee orange.”
- “I’m taking prescription medication.”
- “I have to dispatch a truck.”
- “I want to self-refer myself, I have a problem.”
- “I am enrolled in the ASAP, it should be a rehabilitation test.”

None of these is valid reason to exempt a Soldier from a test or to change the reason for the test. Remind Soldiers who have concerns about participating in testing that non-participation can make them subject to UCMJ and administrative actions.

The UPL and the Observers must make every effort to preserve the privacy and dignity of personnel who have concerns or are embarrassed about current medications they are taking, their enrollment in the ASAP, or other conditions.

Commanders should not stop random testing or probable cause testing on any Soldier. Soldiers should only be exempted from drug testing when they are truly not available to provide a specimen (leave, TDY, etc.); however, they must be tested upon their return or during the next random urinalysis after their return.

Neither Commanders nor ASAP staffs will discontinue Unit sweeps, random tests, Command-directed tests, or rehabilitation tests just because Soldiers continue to test positive under these test bases. Even though a Soldier has tested positive on previous drug tests or is pending separation for drug test failures, these are not valid reasons to exempt any Soldier from continued testing.
**Biosafety Basics**

The goal of the biosafety program in urine collection is to prevent disease, disability and death associated with handling potentially biologically hazardous materials such as urine.

**Biosafety**

The UPL helps identify and remove hazardous conditions and fulfill the goals of the biosafety program when they:

- Communicate possible hazards and prevention measures to all personnel.
- Properly train personnel in biosafety procedures.
- Provide and use Personal Protective Equipment (PPE) when any personnel handle potentially hazardous materials.
- Identify and change habitual behaviors (like chewing on ink pens tips, etc).

Follow these general precautions the UPL must take during the urine collection process in order to apply good biosafety practices:

- Spread paper towels on the top of the testing station before Soldiers arrive.
- Place rubber gloves on both hands before beginning testing procedures.
- You should change rubber gloves every 2 hours while conducting testing.
- Avoid touching face, ears, mouth or nose with hands or other objects when wearing gloves.
- Avoid wearing rings other than a plain band.
- Wash your hands after you remove your gloves.
- Do not eat, drink, smoke, or apply cosmetics or contact lenses in the work area.
- Store all food and drinks outside the restricted area.
- When following the procedure for short samples, Observers must witness the Soldier discarding the remaining urine in the urinal or toilet and rinsing out the bottle with tap water.
- Rinse any bottle that may have contained urine prior to discarding it.
- Disinfect the testing station after the urine collection process. This includes supplies at the intake station such as pens.
- Check with your local military treatment facility for possible hepatitis vaccinations that are required.

The single most important action that you can take to prevent the transmission of diseases is to wash your hands. Pathogens (germs that cause disease) generally do not penetrate intact skin.

Always wash your hands in these cases:

- After exposure to body fluids.
- After removing gloves.
- After touching specimen or performing test procedures.
- After using the restroom.
- Before leaving a contaminated work area.
- Any time hands become dirty.
Follow these steps to properly wash your hands:

1. Remove your wristwatch or push it to the middle of your forearm.
2. Stand before the sink, keeping your hands and clothing away from the sink surface.
3. Turn on the water and adjust the temperature to warm.
4. Wet your hands and wrists thoroughly under the running water.
5. Keep your hands and forearms lower than your elbows to prevent water from flowing from the most to the least contaminated area.
6. Apply 3 to 5 milliliters (ml) of liquid soap to your hands and lather thoroughly. (If you must use bar soap, rinse it before and after you use it.).
7. Wash your hands for 10 to 15 seconds using plenty of lather and friction. Vigorously wash the palms and backs of your hands, each finger, areas between your fingers, your knuckles, and wrists. Wash at least 1 inch above any area of possible contamination.
8. Clean under your fingernails.
9. Rinse your hands and wrists thoroughly while keeping your hands down.
10. Blot your hands from the fingers toward your wrists and forearms with a clean paper towel.
11. Turn off the water. If using a hand-operated faucet, cover it with a paper towel to avoid contaminating your hands.
12. Cover the door handle with the paper towel before opening the door. Many people do not wash their hands and bathroom door handles carry germs.
13. Discard the paper towel in a proper receptacle.

Check-In Instructions

It is very important that the UPL performs the check-in process precisely according to the AR 600-85. If you skip or perform any of these steps in the wrong order, a court could invalidate the specimen. To check a Soldier in for testing:

1. Request the Soldier’s ID card.
2. Instruct the Soldier to remove their ACU or any other heavy clothing. This minimizes the opportunity for the Soldier to be able to contaminate the specimen with concealed adulterants and also aids in observation.
3. Initiate all required paperwork. If preprinted forms and labels are used, the UPL verifies the Soldier’s identity.
4. Instruct the Soldier to verify the information on the DD Form 2624, Testing Register and Bottle Label.
5. Instruct the Soldier to initial the Bottle Label indicating that all information is correct.
6. Remove a specimen bottle from the slotted collection box and place the Soldier’s ID card in the same collection box slot.
7. Place the label on the specimen bottle in full view of both the Soldier and the Observer, and hand it to the Soldier.
8. Instruct the Observer to escort the Soldier to the latrine.

The Observer must maintain line of sight with the specimen bottle. The Soldier must hold the specimen bottle above his/her shoulder while walking to the latrine so that the Observer can maintain eye contact with the bottle at all times.
Verifying a Soldier’s Identity

Verifying each Soldier’s identity is critical to the check-in process. If you do not verify the Soldier’s identity, a court could invalidate the results of that particular specimen. If a Soldier reports for testing without a military identification card, the UPL must verify identity based on Unit/Installation SOP:

- The First Sergeant or Commander verifies identity, OR
- The UPL uses a different picture ID (such as a driver’s license) or AAA 162.

Completing Check-in

After verifying a Soldier’s identity, follow these steps to complete the check-in process.

1. Annotate the “Remarks” section of the Testing Register and/or create a Memorandum for Record (MFR) to indicate the Soldier had no ID card and how the UPL verified the Soldier’s identity. Attach the MFR to the Testing Register.
2. Locate the Soldier’s Social Security Number (SSN) on the Unit Alpha Roster.
3. Check that the Social Security Number on the Unit Alpha Roster matches with the DD Form 2624, Testing Register and Bottle Label.
4. Instruct the Soldier to verify the information on the DD Form 2624, Testing Register and Bottle Label.
5. Instruct the Soldier to initial the Bottle Label to indicate that all data are correct.
6. Remove a specimen bottle from the slotted collection box and place the Soldier’s ID card in the same collection box slot.
7. Place the label on the specimen bottle in full view of both the Soldier and the Observer, and hand it to the Soldier.
8. Instruct the Observer to escort the Soldier to the latrine.

The Observer must maintain line of sight with the specimen bottle.
The Soldier must hold the specimen bottle above his/her shoulder while walking to the latrine so that the Observer can maintain eye contact with the bottle at all times.

Verifying Base Area Codes and Test Basis Codes

The Base Area Code (BAC) is a unique four-digit code that identifies where urine specimens originated. It is critical to verify the BAC so that test results are reported correctly. In addition, it is imperative to use the correct testing code in order to be compliant with the DOD Directive.

If you discover you have made any errors before the test, you can correct them before the test begins. If any information is incorrect, you must make corrections on all applicable forms. For example, if the BAC is incorrect, you must edit the DD Form 2624 and all bottle labels. You may also complete a Certificate of Correction to correct the BAC for an entire batch.

To verify a Base Area Code (BAC):

1. Contact your BAC manager if you are deployed. Contact your DTC, USAR ADCO or NGB JSAPC if you are in garrison.
2. Make sure that you enter the correct code within the DTP software.
To verify a Test Basis Code:

1. Check the code definition to validate the Commander's intent for testing.
2. Make sure that your testing code matches the type of test you are conducting.

**Editing Requirements**

During testing, the UPL may need to edit urinalysis documentation. It is important to accurately follow steps for precise editing to reduce the chance that a court of law finds the documentation invalid.

Here are some guidelines to help you stay within compliance with forensic standards:

- When writing a “0” (zero), avoid drawing a slash through it.
- When writing a “1” (one), avoid drawing a “1” that has a “hat.”
- When writing a “4” (four), avoid drawing a “4” that is closed.
- When writing a “7” (seven), avoid drawing a slash through the lower segment.
- When writing an “8” (eight), avoid drawing two circles on top of each other. Draw the “8” in one continuous motion.
- Do not use whiteout, pencil, or overwrite information. Write numbers with a single pen stroke only.

**Editing Instructions**

When making new edits to copies of documents, use blue ink to note changes on the copy so that your edits are easy to see among the original entries. If blue ink pens are not available, it is acceptable to use black ink pens.

**Editing the UIC on a Bar-Coded DD Form 2624**

Bar-coded DD Form 2624s (Pre-Printed using DTP or DTP Lite) have a different editing process than handwritten DD Form 2624s. To correct the Unit Identification Code (UIC), Base Area Code (BAC) or date for a bar-coded DD 2624, the UPL must:

1. Blacken about half an inch of the barcode at the top with a black marker.
2. Line through the incorrect information.
3. Enter the correct information.
4. Initial and date the correction.
Note: If you have to edit the UIC, BAC, and/or date for an entire batch, then complete a Certificate of Correction to annotate that all specimen bottle labels should have the change.

**Correcting the SSN on a Bar-Coded DD Form 2624**

The laboratory will reject specimens that have an incorrect Social Security Number (SSN) on the DD Form 2624. A court could also invalidate the results of that particular specimen. Therefore, the UPL must correct mistakes on SSNs. The UPL has three options for correcting the SSN:

**Option #1**

1. Blacken out approximately 1/2 inch of the barcode with a black marker.
2. Line through the incorrect information.
3. Rewrite the SSN in the same field on the DD Form 2624 and initial and date next to the incorrect information.

Don’t forget to correct the Bottle Label and Testing Register also.
Option #2:
1. Blacken out approximately 1/2 inch of the barcode with a black marker.
2. Line through the incorrect information.
3. Void out the original entry, initial and date next to the incorrect information, and then enter the correct information onto an empty space on the DD Form 2624.

Option #3:
1. Blacken out approximately 1/2 inch of the barcode with a black marker.
2. Line through the incorrect information.
3. Void out the original entry and initial and date next to the incorrect information on the original DD Form 2624.

Then write the correct information on a separate DD Form 2624.

Don’t forget to correct the Bottle Label and Testing Register also.

IMPORTANT
Be sure to assign the correct line number to the handwritten entry. For example, if the last pre-printed line number is 008, the new handwritten entry is line number 009.
Correcting the Test Basis or Test Info on a Bar-Coded DD Form 2624

To correct the test basis or test info (Block 9 and Block 10) perform these steps in order.

1. Blacken out approximately 1/2 inch of the barcode with a black marker.
2. Line through the incorrect information.
3. Enter the correct information.
4. Initial and date the correction.
5. Repeat steps 2 - 4 for all lines on the form.

IMPORTANT
Be sure to correct all bottle labels also.

Editing Handwritten DD Forms 2624

When editing a handwritten DD Form 2624, be sure to make the edits on the correct part of the document. To correct the Unit Identification Code (UIC), Base Area Code (BAC), date, or Social Security Number (SSN), the UPL must:

1. Line through the incorrect information.
2. Enter the correct information.
3. Initial and date the correction.

Editing the Testing Register

You must pay close attention when editing the SSN on a Testing Register. If this document is edited incorrectly, you cannot match the Soldier’s identity to the SSN.

To edit an incorrect SSN on a Testing Register, the UPL must:

1. Line through the incorrect SSN.
2. Enter the correct SSN.
3. Initial and date next to the correction.

Don’t forget to correct the Bottle Label and DD Form 2624 also.
Correcting a Bar-Coded Bottle Label

Bar-coded bottle labels (pre-printed using DTP or DTP Lite) have a different editing process than handwritten bottle labels. The UPL must know how to edit the label or create a handwritten label if a bar-coded bottle label is incorrect.

A common edit made on bar-coded bottle labels is to correct an SSN. If the SSN on a bottle label is incorrect, you can make an edit directly on the bar-coded label if it is forensically-correct and legible, or you can create a new label. To edit the SSN directly on the bottle label:

1. Blacken out the first ½ inch of the barcode.
2. Line through the incorrect Social Security Number.
3. Enter the correct Social Security Number.
4. Initial and date near the correction.

Creating a New Bottle Label

To create a new bottle label instead of editing the label, follow these steps:

1. Destroy the original label by blackening out the SSN and disposing of the label.
2. Create a new label with the correct SSN, BAC and collection date.
3. Include all of the following information on the new label. Remember that all written text must be ½ inch from the edge of the label:
   - Testing date–In the upper left corner
   - Base Area Code–In the upper right corner
   - UPL initials–Written underneath the date when received back from the Soldier
   - Soldier initials–Written underneath the Base Area Code (BAC) to verify that the SSN is accurate
   - Soldier’s SSN–Written underneath the UPL initials

**IMPORTANT**
Perform corrections to the BAC, UIC or date in the same manner.

**FYI**
The ASAP Web site and the UPL CD-ROM contain a tool to print blank bottle labels.
**Editing Handwritten Bottle Labels**

When working with a handwritten Bottle Label, edits are easy to make. Follow these three steps:

1. Line through the incorrect SSN.
2. Enter the correct SSN.
3. Initial and date near the correction.
Urine Collection

Male Urine Collection Process

The urine specimen collection process for all Soldiers begins when they enter the latrine.

The first step of the collection process is to have the donor wash hands with water only. The Soldier must not use soap or hand sanitizer.

The purpose of hand washing prior to collection is to eliminate any possible adulterants on the hands.

Collection Steps

To provide a urine sample, male Soldiers must perform the following steps in full view of the Observer, in accordance with AR 600-85:

1. Stand at a urinal (preferred) or toilet.
2. Uncap the specimen bottle and keep the cap in full view of the Observer.

The Observer must directly observe urine leaving the Soldier’s body and entering the specimen bottle.

The specimen bottle must contain at least 30 milliliters (ml) of urine.

3. Provide a urine sample in the specimen bottle in full view of the Observer.

The Observer must maintain line of sight with the specimen bottle at all times.

FYI

The Soldier may hold the bottle cap in one hand or place it face up on a clean surface.
4. Place the cap back on the specimen bottle.

5. Move to the sink and wash their hands with soap and water. If using hand sanitizer instead of soap, it is acceptable not to use water.

   The Observer must maintain “line of sight” with the specimen bottle at all times.
   The Observer must NOT touch the specimen bottle or cap at any point.

6. Exit the latrine and return to the testing station.

   The Soldier must hold the specimen bottle above his/her shoulder while walking back to the testing station so that the Observer can maintain eye contact with the bottle at all times.

**Female Urine Collection Process**

The first step of the collection process is to have the donor **wash hands with water only**. The Soldier must not use soap or hand sanitizer.

**Collection Steps Using the Optional Urine Female Collection Cup**

Female Soldiers may elect to use the optional urine female collection cup when they provide a urine sample. Female Soldiers are not required to use the urine female collection cup, and may instead choose to provide their sample directly into the specimen bottle.

To provide a urine sample using the optional urine female collection cup, female Soldiers must perform the following steps in full view of the Observer:

1. Squat over a commode.
2. Uncap the specimen bottle and keep the cap in full view of the Observer.
3. Provide a urine sample in the urine female collection cup in full view of the Observer.

The Observer must directly observe urine leaving the Soldier’s body and entering the urine female collection cup.

4. Pour the urine sample from the cup into the specimen bottle above the toilet.

The specimen bottle must contain at least 30 ml of urine.

5. Dispose the remaining urine into the toilet.

6. Place the cap back on the specimen bottle.
7. Rinse and dispose of the urine female collection cup in the latrine trash receptacle.

8. Move to the sink and wash hands with soap and water. If using hand sanitizer instead of soap, it is acceptable not to use water.

   Observer must maintain “line of sight” with the specimen bottle at all times.
   The Observer must not touch the specimen bottle or cap at any point, even if the Soldier asks the Observer to hold the specimen bottle or cap.

9. Exit the latrine and return to the testing station.

   The Soldier must hold the specimen bottle above his/her shoulder while walking back to the testing station so that the Observer can maintain eye contact with the bottle at all times.

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**Collection Steps Using Only the Specimen Bottle**

Female Soldiers may elect to provide a urine sample directly into the specimen bottle and not use the optional urine female collection cup.

To provide a urine sample using only the specimen bottle, female Soldiers must perform the following steps while standing at a toilet in full view of the Observer:

1. Squat over a commode.
2. Uncap the specimen bottle and keep the cap in full view of the Observer.
3. Provide a urine sample in the specimen bottle in full view of the Observer.

   The Observer must directly observe urine leaving the Soldier’s body and entering the specimen bottle.
   The specimen bottle must contain at least 30 ml of urine.

4. Place the cap back on the specimen bottle.
5. Move to the sink and wash their hands with soap and water. If using hand sanitizer instead of soap, it is acceptable not to use water.

   Both the Soldier and Observer must maintain line of sight with the specimen bottle at all times.
   The Observer must not touch the specimen bottle or cap at any point, even if the Soldier asks the Observer to hold the specimen bottle or cap.

6. Exit the latrine and return to the testing station.

   The Soldier must hold the specimen bottle above his/her shoulder while walking back to the testing station so that the Observer can maintain eye contact with the bottle at all times.
**Latrine Types**

**Portable toilet**
A portable toilet is common in deployed areas. To properly observe urinalysis collection in a portable toilet the Observer must hold the door open during the entire collection process. An improvised screen may be necessary to provide adequate room for observation and privacy to Soldiers.

**Trailer toilet**
A trailer toilet is typically employed in a Forward Operating Base (FOB) environment. To properly observe urinalysis collection in a trailer toilet, the Observer must hold the door open during the entire collection process.

**Hardstand**
A hardstand is typically employed on an installation. To properly observe urinalysis collection in a hardstand, the Observer must hold the door open during the entire collection readiness and completion process.

**Adulteration**
The definition of adulteration is to alter a urine specimen, usually in an attempt to prevent a positive drug test result. An example of adulteration includes a substituted specimen or a specimen that contains an additive. Interfering with the testing methodology and/or instrument function in order to render a specimen non-testable or to cause a negative drug test result is also adulteration.

**Letter of the Law - Adulteration**
Soldiers who adulterate their specimen or who assist any Soldier in doing so are subject to the full range of statutory and regulatory sanctions, both criminal (UCMJ) and administrative.

**The “Whizzinator”**
The Whizzinator is a name brand device that male or female Soldiers may try to use to supplant having to provide their own urine specimen for fear of testing positive for drugs. This is one reason why it is imperative that Observers maintain the integrity of the collection process by maintaining standards such as direct and constant line of sight of urine leaving the Soldier’s body to ensure that the specimen is actually from the individual being tested.

The male version of the Whizzinator is a prosthetic penis worn to fool the Observer and provide what appears to be a sample of urine coming from the Soldier’s body.
The male Whizzinator kit consists of:

- A syringe
- Heater packs (to keep the urine at body temperature)
- A prosthetic penis (available in several skin tones including white, tan, brown, and black)
- An instruction manual

The female version of the Whizzinator—also known as the “Number One”—includes a pouch and a rubber tube that the user wears in an attempt to fool the Observer and provide what appears to be a sample of urine coming from the Soldier’s body.

The female Whizzinator kit consists of:

- A syringe
- Heater packs (to keep the urine at body temperature)
- A pouch with a connected rubber tube.
- An instruction manual

**Adulterants**

Adulterants are substances used to alter the biochemistry of the urine specimen so that the specimen will not test positive for drugs. There are internal and external adulterants. Internal adulterants are substances that one ingests prior to donating a urine sample. External adulterants are substances that one mixes into the urine specimen during the collection process.

**Internal adulterants**

Implementing random testing times is one effective way the UPL can collect urine samples before the Soldiers chosen for testing have an opportunity to take internal adulterants. If Soldiers are surprised by an unexpected order to participate in testing, there will not be enough time to ingest an adulterant before providing a specimen.

Internal adulterants require the user to drink a lot of water to flush their system. This is known as “adulteration by dilution.” Common internal adulterants are Golden Seal, Urine Aid, vinegar, and diuretics (substances and medications that cause frequent urination).
External adulterants

Direct observation during urine sample collection is one effective way to deter Soldiers from using external adulterants. It is imperative that Observers maintain line of sight with the specimen bottle at all times so that Soldiers have no opportunity to add an adulterant to their specimen.

Examples of external adulterants include water, fruit juice, baking soda, soap, perfume, cleaning solvents, nitrates (i.e. bleach, detergent, Drano). Soldiers may try to use any of these as substitutes for urine. A few of these adulterants mask the presence of certain drugs, but the laboratory can still screen the specimen to detect a positive drug test result.

Some Soldiers will try to substitute their specimen with purchased “clean urine” or urine from a buddy, with or without using a Whizzinator.

If the Observer believes that a Soldier has used an adulterant or a Whizzinator, they must notify the UPL immediately after escorting the Soldier back to the urinalysis testing table.

Letter of the Law–Retesting Due to Adulteration

If the Forensic Toxicology Drug Testing Laboratory (FTDTL) rejects a specimen without testing it due to suspected adulteration, the Commander must order a retest for the Soldier who provided the rejected specimen. Contact your BAC manager if deployed, or DTC (or equivalent) if in garrison, for further guidance on retesting rejected specimens.
Check-Out

The check-out process begins when the Soldier returns to the testing station from the latrine.

Check-Out Instructions

1. The Soldier hands the specimen to the UPL.
2. The UPL verifies that the cap is secure.
3. The UPL looks at the specimen to check for:
   - The correct amount
     The specimen bottle must contain at least 30ml of urine to comply with the AR 600-85 and for the laboratory to test the specimen.
   - Evidence of adulteration
     If the UPL suspects the sample is adulterated, he/she needs to alert the Commander of the situation after processing the sample.
   - Secure cap
     The cap must be closed tight to prevent leaks.
4. The UPL seals the specimen bottle with tamper-evident tape if the bottle contains the correct amount and no adulteration. The tape must extend over the lid from one end to the other end in a straight line and touch the label on both sides of the bottle.
5. The UPL initials the bottle label.
6. The UPL removes the Soldier’s ID card from the slotted collection box and places the specimen bottle in the same collection box slot.
7. The UPL instructs the Observer to print name and sign the Testing Register in front of the UPL and the Soldier.
8. The UPL instructs the Soldier to sign the Testing Register in front of both the Observer and the UPL.
9. The UPL returns the ID card to the Soldier.
10. The UPL instructs the Soldier to return to duty.

Initials and Signatures at Check-Out

The UPL's initials on the bottle label signify that he/she:

- Received the specimen from the Soldier.
- Checked the specimen for possible adulteration and sufficient volume.
- Ensured the cap was secure.
- Placed tamper-evident tape across the cap.

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

- Complied with the collection process by directly observing the Soldier provide the specimen.
- Maintained eye contact with the specimen bottle from the time it was handed to the tested Soldier until it was placed in the collection box.

The Soldier's signature on the Testing Register verifies that he/she:

- Provided the urine in the specimen bottle
- Observed the specimen being sealed with tamper evident tape and placed into the collection box.
**Adulteration Responses**

Both Observers and UPLs may observe and report suspected adulteration. If the Observer reports adulteration, the following responses must happen in order:

1. The Observer tells the UPL that he/she believes the specimen is adulterated.
2. The UPL finishes processing the specimen, and instructs the Soldier to stand fast.
3. The UPL sends someone to notify the Commander.
4. The Commander verifies the evidence of possible adulteration and, if possible, consults the legal advisor.
5. The Commander may order the Soldier to provide a second sample.
6. The Soldier provides a valid specimen according to the standard collection procedure; however, the test basis for the second sample may be Probable Cause.
7. The UPL uses a separate DD Form 2624 to process the second specimen on the Soldier. The UPL sends both specimens to the Forensic Toxicology Drug Testing Laboratory (FTDTL) for processing.
8. The UPL annotates the Testing Register with the event and the way he or she resolved it.

If the UPL notices adulteration (for example, the sample is bubbling), the following responses must happen in order:

1. The UPL finishes processing the specimen through the signature portion of the collection process.
2. The UPL instructs the Soldier and Observer to stand fast.
3. The UPL sends someone to notify the Commander.
4. The Commander verifies the evidence of possible adulteration and, if possible, consults the legal advisor.
5. The Commander may order the Soldier to provide another sample and appoint a different Observer.
6. The Soldier provides a valid specimen according to the standard collection procedure; however, the test basis for the second sample may be Probable Cause.
7. The UPL uses a separate DD Form 2624 to process the second specimen on the Soldier. The UPL sends both specimens to the FTDTL for processing.
8. The UPL annotates the Testing Register with the event and the way he or she resolved it.

**FYI**

The Commander must not touch the specimen bottle. This would break the Chain of Custody.
Unusual Circumstances

Unusual circumstances are any events that force the UPL to deviate from normal procedures. Examples of unusual circumstances include:

- Soldier with no ID card
- Insufficient specimen amount
- Possible adulteration (whether UPL-reported or Observer-reported)
- Broken tamper-evident tape
- Refusal to provide a specimen

The unusual circumstances listed here are only a few of the most common ones that occur. The more collections you perform, the greater the chances that something unusual will occur. The common rule for all unusual circumstances is that you must annotate the Remarks section of the Testing Register or create an MFR and attach it to the ledger. Be sure to describe in the annotation the circumstance and the actions you took to resolve it.

Specimen Amount Requirements

All Tests Except Steroid Tests

Specimen bottles must contain at least 30 ml of urine to qualify as a valid specimen for urinalysis testing. Good specimens exceed 30 ml. This applies to all urinalysis testing except steroid testing.

If a Soldier provides a specimen of less than 30 ml—including no specimen amount at all (“dry fire”)—the UPL must:

1. Remove the Bottle Label from the specimen bottle.
2. Obliterate the SSN on the Bottle Label and destroy the label.
3. Instruct the Observer to escort the Soldier back to the latrine and dump the specimen into the latrine.
4. Instruct the Soldier to rinse the specimen bottle with water, crush and dispose of it in the latrine waste receptacle, and return to the testing station.
5. Instruct the Soldier to return to the holding area and drink 8 ounces of water every ½ hour but not to exceed 40 ounces in 3 hours.
6. Start the collection process from the beginning with that Soldier
7. Create a hand-written bottle label to place on a new specimen bottle.
8. Annotate the Remarks section of the Testing Register: “1st attempt-short sample; 2nd attempt sufficient value”.
9. Use original entries on the DD Form 2624 and Testing Register.

Steroid Tests

Specimen bottles for steroid urinalysis testing must contain at least 60 ml of urine to qualify as a valid specimen. Good steroid specimens exceed 60 ml.
Annotating Documents

The UPL may need to annotate urinalysis documentation when a Soldier provides an inadequate specimen or the UPL breaks the tamper-evident tape on the specimen bottle.

To note inadequate specimen size, follow the step 8 above under Required Specimen Amount.

To document breakage in the tamper-evident tape:

1. Apply a second piece of tamper-evident tape offset from the first, but touching the label on both sides.
2. Annotate on the Testing Register Remarks section. Indicate that you applied a second piece of tamper-evident tape and that the Soldier observed this process. (AR 600-85)
3. If a second piece of tamper-evident tape is applied, then you must complete a Certificate of Correction. Attach the Certificate of Correction to the original DD Form 2624 to explain any specimen bottle that has two pieces of tamper-evident tape.

These are a few of the most common unusual circumstances. The more collections you perform, the greater the chances that something unusual will occur. The UPL must annotate all unusual circumstances and responses to them in the “Remarks” section of the Testing Register and in a Certificate of Correction that is attached to the DD Form 2624.
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Section 4

Post-Collection
Section 4: Post-Collection

Quality Control

Quality Control Check Instructions

Step 1–Ensure Social Security Numbers (SSNs) match

- Verify that the Social Security Number entries are exactly the same on the DD Forms 2624, Testing Register, and Bottle Labels for each Soldier.

Testing Ramifications of Social Security Number Matching Errors
If the Social Security Number on the bottle label does not match the Social Security Number for the same Soldier on the DD Form 2624, it is a fatal discrepancy. The FTDTL will reject the specimen without testing it. The mistake creates a significant flaw in Unit readiness. The potential for one Soldier's drug use to continue undetected places the entire Unit at greater risk.

Garrison Comparison–Quality Control

Deployed UPLs and UPLs not on an Army installation (Reserve components, recruiters, etc.) act as a DTC and perform all quality control, packaging and shipment procedures.

UPLs in garrison deliver specimens to the DTC as soon as possible (normally the same duty day.) The DTC performs a quality control inspection, corrects discrepancies, and ensures specimens are packaged and shipped to the appropriate FTDTL. The UPL may be required to assist in the packaging and shipping process. The UPL must bring the Testing Register with the DD Form 2624 when delivering specimens to the DTC for the quality control check. Afterward, the UPL retains the Testing Register and files it in the proper location at the Unit.

Step 2–Check Bottle Labels for Accuracy

- Ensure that only one label is attached to each specimen bottle, rather than one label covering another.

- Ensure that all required information appears on all bottle labels. This includes checking that any edits have been performed according to the proper method. Bottle labels must show the following information:
  - Collection Date of the sample in the specimen bottle to which the label is attached
  - Base Area Code (BAC) of the location at which the sample was collected
  - Unit Identification Code (UIC).
  - UPL initials
  - Donor Social Security Number
  - Donor Initials

Donor initials must be no more than three letters and cannot spell a name or word. For example: if a Soldier's name is Carl Allen Taggard then his initials would be “CAT.” Since “CAT” is a word, the UPL must complete a Certificate of Correction to explain that these are initials and not a name.

IMPORTANT
Bar coded bottle labels must have the UIC. If the UIC is not on the bottle label then it is not on the DD Form 2624.
Complete a Certificate of Correction if you make any changes to forms after the Soldier returns to duty. If the Soldier is witness to any changes, there is no need for the Certificate of Correction. Submit the Certificate of Correction with the specimens.

Ensure the bottle label is not covering a second label underneath. There must be only one label attached to each specimen bottle.

**Testing Ramifications of Bottle Label Errors**

If the SSN on the bottle label is incomplete, missing, or illegible, it is a *fatal discrepancy*. The FTDTL will reject the specimen without testing it.

If one bottle label covers a second label underneath, it is a *fatal discrepancy*. The FTDTL will reject the specimen without testing it.

---

**Step 3–Check the Testing Register**

- Ensure that all required information and signatures appear on the Testing Register. This includes checking that edits and annotations for unusual circumstances have been made according to the proper method.

- Ensure that the Testing Register reflects any changes that appear on the DD Form 2624 and bottle label for each Soldier. Information on the Testing Register must be correct, must match information on the other documents, and must include:
  - Name of Unit that conducted testing (block 1 on DD Form 2624)
  - Unit Identification Code (UIC)
  - Date Specimens Collected
  - Batch and specimen numbers
  - Rank, Name, SSN, and signatures of the Soldiers
  - Test Basis
  - Names and signatures of the Observers
  - Comments and disposition (unusual circumstances and/or testing status of a Soldier or specimen)

- If you discover any errors with the Testing Register during the quality control check, correct the error directly on the Testing Register. It is not necessary to complete a Certificate of Correction.

**Step 4–Check DD Forms 2624**

- Ensure that all required information appears on the DD Forms 2624. This includes checking to be sure that you made edits during the check-in or checkout process according to the proper method. All specimens that were not tested must be removed from the DD Form 2624.

- Ensure that you have removed all specimens that were not tested from the DD Form 2624. To remove an entry on the DD Form 2624 for which there is no corresponding specimen, follow these steps:
  1. Blacken out the first ½ inch of the barcode.
  2. Draw a line extending through the SSN into Block F Accession Number.
  3. Write “Not Tested” next to the drawn line.
  4. Initial and date next to the “Not Tested” entry.
Check that chain of custody information was entered properly. The back of the DD Form 2624 documents all Chain of Custody actions.

Ensure that the DD Forms 2624 reflect any changes that appear on the other documents. Remember, information on the DD Forms 2624 must match information on the Testing Register and bottle label for each Soldier.

If you discover any errors with the DD Forms 2624 during the quality control check, correct the error and complete a Certificate of Correction to submit with the specimens if the Soldier is no longer present.

**Testing Ramifications of DD Forms 2624 Errors**

If any DD Form 2624 chain of custody entries are not original, it is a fatal discrepancy. The FTDTL will reject the specimen without testing it.

If the DD Form 2624 does not contain chain of custody entries, it is a fatal discrepancy. The FTDTL will reject the specimen without testing it.

If a DD Form 2624 entry does not have a corresponding bottle, the FTDTL will document this non-fatal discrepancy.

If a bottle does not have a corresponding entry on the DD Form 2624, the FTDTL will document this non-fatal discrepancy.

If the specimen SSN on the DD Form 2624 is not correct, it is a fatal discrepancy. The FTDTL will reject the specimen without testing it.

**Letter of the Law–Specimen Bottle Chain of Custody**

A primary UPL duty is to ensure the integrity of the urine specimens from collection to shipment. Maintaining Chain of Custody minimizes opportunities to compromise the samples in any fashion while in UPL control.

The Chain of Custody begins when the UPL receives the specimen bottle from the Soldier. It must remain continuously and forensically intact until testing is complete at the Forensic Toxicology Drug Testing Laboratory (FTDTL). The back of the DD Form 2624 documents all Chain of Custody actions.

The UPL must never touch or take custody of his/her own specimen. An alternate UPL or personnel from the local ASAP must collect and handle the UPL's specimen.
Step 5–Check Tamper-Evident Tape

- Ensure that each specimen bottle is sealed with tamper-evident tape. Make sure the tamper-evident tape is placed across the entire lid and touches the label on both sides.
- If the tape is broken or not touching the bottle label on both sides, apply a second piece at an angle slightly offset from the first. Complete a Certificate of Correction to note the discrepancy.

**Testing Ramifications of Tamper-Evident Tape Errors**

If the tamper-evident tape is missing or the seal is compromised in any fashion, it is a fatal discrepancy. The FTDTL will reject the specimen without testing it.

Step 6–Check Specimen Bottle Placement in the Collection Box

- Ensure that each specimen bottle is in the correct position in the collection box according to the position in which each bottle appears on the DD Form 2624.
- If the order of specimen bottles in the collection box does not match the order listed on the DD Form 2624, move the specimen bottles into the correct order. It is not necessary to create a Certificate of Correction in this case.

**Testing Ramifications of Specimen Bottle Position Errors**

Checking bottle position is important for ensuring that all specimen bottles are accounted for in the collection box. Remember to place the specimens in their correct location, ensure empty bottles are in slots with no specimen, and to void entries on the DD Form 2624 for specimens that were not collected.

Managing Documents

After completing the quality control check, perform the following steps with the testing documents:

- Make a copy of the DD Form 2624.
- File the copy of the DD Form 2624 with the Testing Register in a secure location at the Unit.
- Submit the original DD Form 2624 in the collection box with the specimen bottles.
Testing Ramifications of Document Management Errors

Do not submit the Testing Register to the FTDTL! Testing Registers contain the names of the Soldiers who participated in the urinalysis testing. If the FTDTL receives the Testing Register with the specimens, it is a fatal discrepancy. The FTDTL will reject all specimens in the box without testing them.

Letter of the Law—Retesting Due to Fatal Discrepancies in Documentation

If the Forensic Toxicology Drug Testing Laboratory (FTDTL) rejects a specimen without testing it because the accompanying forms are not forensically correct, the Commander must order a retest for the Soldier who provided the rejected specimen.

For further guidance on retesting rejected specimens, deployed UPLs should contact the Base Area Code (BAC) Manager. UPLs in garrison should contact the Drug Testing Coordinator (DTC), the Forensic Toxicology Drug Testing Laboratory (FTDTL). The back of the DD Form 2624 documents all chain of custody actions.

Destroying/Discarding Specimens

If the DTC (or the DTC’s designated representative) finds an error during the quality control check that would result in a fatal discrepancy, then he or she must destroy the specimen.

Follow these steps when dumping a specimen or when receiving notice that the DTC dumped a specimen:

1. Inform the Commander about the occurrence and the reason for a destroyed/discarded specimen.
2. Follow the Commander’s written policy on retesting Soldiers.

The DTC or UPL may dispose of a specimen only in the following cases:

- The DTC or UPL cannot verify that the specimen is a unique specimen according to the SSN (for example, the SSNs on the bottle and DD Form 2624 do not match, and the DTC or UPL is unable to verify them).
- The specimen bottle has two labels on it or does not have the Soldier’s initials on the label.
- The specimen is from the same UPL who is turning in the specimen.
- The Testing Register is missing the Soldier’s or Observer’s signatures.
- Authorization for disposal was received from one of the following:
  - Garrison, Region, or IMCOM ADCO
  - NGB JSAPO/JSAPC
  - USAR ADCO
  - FTDTL
  - ACSAP
  - SJA

IMPORTANT

A deployed UPL or a UPL without a local ASAP may have to perform this quality control check.
Breaking Down the Testing Station

Break Down Instructions

The Urinalysis Testing Station, holding area, and latrine are public spaces and not a dedicated resource. The UPL must return all areas to their original state before leaving at the conclusion of testing operations. The UPL may delegate this task.

To break down the Urinalysis Testing Station:

- Maintain a direct line of sight with the collection box at all times.
- Discard used items such as paper towels and gloves in a trash container, if available. It is also acceptable to use the trash bag in the holding area.
- Remove the “Urinalysis Testing in Progress” sign.
- Remove the binder and all testing documentation.
- Return supplies in accordance with your Unit’s SOP.

The Disinfection Procedure (Biosafety)

Although normal urine is sterile in a healthy person, it provides an attractive environment for bacteria and other pathogens to live and reproduce. This is why the disinfection procedure is critical during the testing station breakdown process. Follow these steps to disinfect the testing station:

- Check the time to see if you need to change to a fresh pair of gloves.

  You should change your gloves every two hours.

- Disinfect all work areas, surfaces, and reusable equipment used for processing specimens.
- Disinfect the table and any pens that were used during the urinalysis testing.
- Wipe each disinfected item clean with paper towels.
- Discard any used paper towels in the trash can.

Only the following disinfectants are approved. You must use at least one of these for disinfection:

- A 10% bleach-water solution. Use within eight hours of mixing. To create this solution, mix 9 parts water and 1 part bleach.
- Lysol or other brand of disinfectant that is clearly marked as a disinfectant.
- A 70% or higher alcohol-water solution. The alcohol solution can contain either methanol or ethanol.

These disinfectants are not approved. Do not use any of these for disinfection:

- 5% bleach-water solution
- 60% alcohol-water solution
- Isopropyl (rubbing) alcohol
**Restoring the Latrine**

To reopen the latrine to the public after urinalysis testing:

- Return cleaning products to the latrine if the UPL removed them during set-up.
- Wipe down the sink area with paper towels.
- Remove the “Latrine Off-Limits” sign from the latrine door.

**Removing Holding Area Items**

To restore the holding area after urinalysis testing:

- Discard all used cups and trash.
- Return beverages and unused cups in accordance with your Unit’s SOP.
- Remove the Holding Area sign to restore the space for public use.

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**FORT GARRISON**

**Garrison Comparison–Urinalysis Testing Supply Return Procedure**

1. Return supplies to the secure storage area.
2. Make a note of any items to reorder (if deployed) or pick up from the DTC (if in garrison).
3. At a minimum, maintain enough supplies to conduct a 100% Unit inspection.
Storing Specimens

If it is not possible to package and ship specimens immediately after testing station breakdown, the UPL must place specimens in temporary storage. The UPL must follow specific requirements for using storage containers, documenting specimen Chain of Custody (on the DD Form 2624), and documenting storage container access (on the SF-702).

The primary UPL is responsible for removing specimens from temporary storage. The alternate UPL may remove specimens from the storage container only under extreme circumstances (i.e. the primary UPL goes on emergency leave, is hospitalized, etc.). If this occurs, annotate the reason on a Memorandum for Record (MFR) and maintain it in your files.

Maintaining Chain of Custody

You must annotate the DD Form 2624 every time you transfer urinalysis testing specimens into or out of temporary storage in order to maintain Chain of Custody. Annotate each change of custody at the time of occurrence. Do not pre-date or post-date the event, but enter the current date.

To document specimen transfer into or out of temporary storage, you must immediately complete the following sections of DD Form 2624 as noted:

- 12a DATE: Enter the current date.
- 12b RELEASE BY: Print name and sign payroll signature.
- 12c RECEIVED BY: Enter the location of the storage container, including the building and room number if applicable.
- 12d PURPOSE OF CHANGE/REMARKS: Enter purpose of transfer as appropriate: “Placed in temporary storage” or “Removed from temporary storage”.

Storage Container Types and Requirements

There are only three types of containers approved for storing specimens and documentation awaiting packaging and shipment. They are: safes, filing cabinets, and metal wall lockers. The following section summarizes storage container requirements. See AR 600-85 for complete requirements.
Safes:
- Must weigh at least 500 pounds, or be attached to the structure of the building with a chain or heavy duty bolts.
- Must have a 200-series padlock to secure the hasp (no combination locks).
- The padlock must have only two keys (see above for requirements regarding padlock keys).
- Must be in a lockable room or lockable office.

Filing Cabinets
- Must weigh at least 500 pounds, or be attached to the structure of the building with a chain or heavy duty bolts.
- Must have a metal bar hasp welded to the cabinet body. A metal bar may run the entire height of the cabinet in front of the drawers. If the hasp is welded only to the top drawer and there is no metal bar, then use only the top drawer for storage.
- Must have a 200-series padlock to secure the hasp (no combination locks).
- The padlock must have only two keys (see above for requirements regarding padlock keys).
- Must be in a lockable room or lockable office.

Metal Wall Lockers
- Must weigh at least 500 pounds, or be attached to the structure of the building with a chain or heavy duty bolts.
- Must have a 200-series padlock to secure the hasp (no combination locks).
- The padlock must have only two keys (see above for requirements regarding padlock keys).
- Must be in a lockable room or lockable office.

Temporary Storage Requirements
The primary UPL must follow these specific requirements for specimen storage:
- Maintain possession of one of two keys to the storage container padlock. The UPL secures the second key in a sealed envelope, signs across the seal, and places the envelope in the Commander’s safe.
- Annotate an SF-702 every time he or she opens or closes the storage container. The UPL must maintain possession of this SF-702 for three years.
- Annotate the Chain of Custody (back of DD Form 2624) every time he or she transfers specimens into or out of temporary storage.

See AR 600-85 for complete storage requirements.

Specimen Storage in Deployed Areas
Commanders in deployed areas where facilities are not available to fully comply with the preceding temporary storage guidelines should make every attempt to properly secure specimens requiring temporary storage to avoid any tampering or perception thereof. This may include locking specimens in a foot locker or similar container using a padlock- to which the primary UPL has the only key- and storing that foot locker in the Tactical Operations Center (TOC) or other area under constant surveillance.
**Specimen Packaging**

**Materials**

Use the following materials for packaging specimen collection boxes:

- Absorbent pads—To absorb any leakage from the specimen bottles.

- Mailing tape—To seal the collection box.

- A white letter-size business envelope—To hold the DD Form 2624 and any Certificate of Correction forms.

- A black marker or black ink pen—To sign your payroll signature (not initials) across the tape on the top and across the bottom of the collection box.

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_Garrison Comparison—Specimen Packaging_

Deployed UPLs and those not located on an installation (NGB, USAR, Recruiters, etc.), must package specimens for shipment.

UPLs in garrison may assist the DTC in packaging specimens if the DTC requests assistance.
**Packing Instructions**

After the final quality control check, complete the following steps to package specimen collection boxes for shipment:

1. Maintain direct line of sight with the specimen collection box at all times.
2. Complete chain of custody documentation as required if you remove specimens from temporary storage.
3. Place one absorbent pad in the collection box on top of the specimen bottles.

Allow an official postal clerk to perform a visual inspection, if required. Do not allow the postal clerk to touch the collection box or specimens during an inspection. An open parcel inspection waiver may be applicable in certain operational areas.

4. Seal all open sides, edges and flaps of the collection box with mailing tape. Do not use scotch tape or duct tape.

5. Sign your payroll signature across the tape on the top and bottom of the collection box. Don’t take short cuts—initials are not allowed!

6. Write your Base Area Code in large letters on the outside of the letter-size business envelope that contains the DD Form 2624 and any Certificate of Correction forms.

7. Leave the business envelope unsealed to allow chain of custody updates to the DD Form 2624.

**FYI**

Scotch tape does not seal the box sufficiently, and duct tape makes the box more difficult to open at the lab (and dulls the box cutters sooner).
8. Secure the business envelope to the outside of the collection box with mailing tape.

9. Continue immediately with the specimen shipment steps in the next section. If immediate shipment is not possible, maintain direct line of sight with the specimen collection box and/or use temporary storage according to proper procedure until you can complete shipment.

You must send the original DD Form 2624 (specimen chain of custody document) with each collection box. Do not send the Testing Register.
## Specimen Shipment

### Forensic Toxicology Drug Testing Laboratory (FTDTL) Regions

Each FTDTL performs drug testing only on specimens from specific regions of the world. The lists of regional FTDTL assignments below are current as of June 2009, but are subject to change. Please note exceptions for some locations and types of tests.

### Army

<table>
<thead>
<tr>
<th>If you collected a specimen in</th>
<th>Ship the specimen to this FTDTL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Middle East (Iraq, Kuwait, Afghanistan)</td>
<td>Tripler AMC FTDTL 1 Jarrett White Road BLDG 40 Attn: MCHK-FT Tripler AMC, HI 96859-5000</td>
</tr>
<tr>
<td>US–West of the Mississippi</td>
<td>Commander Attn: Processing Section Forensic Toxicology Drug Testing Laboratory 2490 Wilson Street Fort Meade, MD 20755-5235</td>
</tr>
<tr>
<td>Fort Bragg</td>
<td></td>
</tr>
<tr>
<td>Pacific</td>
<td></td>
</tr>
<tr>
<td>US–East of the Mississippi (EXCEPT Fort Bragg, Fort Benning, and Redstone Arsenal)</td>
<td></td>
</tr>
<tr>
<td>Europe</td>
<td></td>
</tr>
<tr>
<td>Any location, for steroid testing</td>
<td></td>
</tr>
<tr>
<td>Fort Benning and Redstone Arsenal</td>
<td>Jacksonville Navy Drug Screening Laboratory</td>
</tr>
<tr>
<td>Regular Mail</td>
<td>Other Carriers</td>
</tr>
<tr>
<td>PO Box 113, Jacksonville, FL 33212-0113</td>
<td>Building H2033 Adams Avenue Naval Air Station, Jacksonville, FL 33212-0113</td>
</tr>
<tr>
<td>Any location, for special tests (consult with the ASAP before collecting)</td>
<td>Armed Forces Institute Of Pathology Armed Forces Medical Examiner Services Attn: Division Of Forensic Toxicology Building 54 6825 16th Street, NW Washington, DC 20306-6000</td>
</tr>
</tbody>
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### Army Reserve

<table>
<thead>
<tr>
<th>If you collected a specimen while</th>
<th>Ship specimens to this FTDTL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not Deployed (EXCEPT Hawaii)</td>
<td>Commander</td>
</tr>
<tr>
<td>Any location, for steroid testing</td>
<td>Attn: Processing Section</td>
</tr>
<tr>
<td></td>
<td>Forensic Toxicology Drug Testing Laboratory</td>
</tr>
<tr>
<td></td>
<td>2490 Wilson Street</td>
</tr>
<tr>
<td></td>
<td>Fort Meade, MD 20755-5235</td>
</tr>
<tr>
<td>Deployed or located in Hawaii</td>
<td>Tripler AMC FTDTL</td>
</tr>
<tr>
<td></td>
<td>1 Jarrett White Road BLDG 40</td>
</tr>
<tr>
<td></td>
<td>Attn: MCHK-FT</td>
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<td></td>
<td>Tripler AMC, HI 96859-5000</td>
</tr>
<tr>
<td>Any location, for special tests</td>
<td>Armed Forces Institute Of Pathology</td>
</tr>
<tr>
<td></td>
<td>Armed Forces Medical Examiner Services</td>
</tr>
<tr>
<td></td>
<td>Attn: Division Of Forensic Toxicology</td>
</tr>
<tr>
<td></td>
<td>Building 54</td>
</tr>
<tr>
<td></td>
<td>6825 16th Street, NW</td>
</tr>
<tr>
<td></td>
<td>Washington, DC 20306-6000</td>
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</table>

### National Guard

<table>
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<tr>
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<th>Ship specimens to this FTDTL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not Deployed (EXCEPT Hawaii)</td>
<td>Brooks Laboratory</td>
</tr>
<tr>
<td></td>
<td>2730 Louis Bauer Drive</td>
</tr>
<tr>
<td></td>
<td>Building 930</td>
</tr>
<tr>
<td></td>
<td>Brooks City, TX 78235</td>
</tr>
<tr>
<td>Deployed or located in Hawaii</td>
<td>Tripler AMC FTDTL</td>
</tr>
<tr>
<td></td>
<td>1 Jarrett White Road BLDG 40</td>
</tr>
<tr>
<td></td>
<td>Attn: MCHK-FT</td>
</tr>
<tr>
<td></td>
<td>Tripler AMC, HI 96859-5000</td>
</tr>
<tr>
<td>Any location, for steroid testing</td>
<td>Commander</td>
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<tr>
<td></td>
<td>Attn: Processing Section</td>
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<td>Washington, DC 20306-6000</td>
</tr>
</tbody>
</table>
Shipping Carriers

These are the only approved carriers to use for shipping specimens to the FTDTL. Do not attempt to ship specimens by any other method. (AR 600-85)

- Registered mail
- US Postal Service by First Class Mail
- Hand-carried by surface transportation
- Military aircraft transportation system
- US flag commercial air freight air express and air freight provider
- As a last resort, if none of the above is available, ship by foreign flag air carrier.

Completing Chain of Custody

The person who ships specimens to the FTDTL makes the final entry on the back of the DD Form 2624 to complete chain of custody immediately before shipment.

Garrison Comparison—Specimen Shipment

Deployed UPLs and those who are away from an installation (NGB, USAR, Recruiters, etc.) must ship the specimens to the FTDTL.

UPLs in garrison deliver specimens to the DTC for a final quality control check, packaging, and shipment.

To complete chain of custody and release each specimen collection box immediately before shipment, you must complete the following sections of DD Form 2624 as noted:

- 12a DATE: Enter the current date.
- 12b RELEASE BY: Print name and sign payroll signature.
- 12c RECEIVED BY: Print method of mail transport (i.e., United States Postal Service (USPS), UPS, FedEx, etc.).
- 12d PURPOSE OF CHANGE/REMARKS: Enter “Specimens mailed to FTDTL by [mail method].”

If you do not complete chain of custody indicating shipment to the laboratory, then the laboratory will destroy all the specimens you collected without testing them.
Shipping Materials

Use the following materials for shipping collection boxes to the FTDTL:

- Leak-proof bag
- Outer shipping box
- Label
- Mailing tape
- Black marker
- Other materials as mandated by local carrier requirements, such as brown paper
- A copier–To photocopy the DD Form 2624 and any Certificates of Correction before specimen shipment

Shipping Instructions

1. Complete Chain of Custody documentation as required, photocopy the DD Form 2624, and return it to the white business envelope attached to the outside of the specimen box.
2. Place the collection box inside the leak-proof bag.
3. Place the bagged specimen collection box in an outer shipping box according to carrier requirements and local policy. There are no specific taping instructions for the larger box.
4. Write the appropriate FTDTL mailing address on the shipping box (see chart below for addresses).
5. Handwrite and affix a label that says “Diagnostic Specimens” near the mailing address.
6. Hand the shipping box directly to a staff member of the carrier at the point of shipment.

Note: Special mailing procedures may be applicable free of charge for Units in specific operational areas.

Chain of Custody Review

The chain of custody begins the moment that you receive the first urinalysis specimen. This chain of custody must remain continuously and forensically intact until the specimen’s testing is complete at the forensic toxicology drug testing laboratory (FTDTL). Annotate each change of custody at the time it occurs. Do not pre-date or post-date the event.

When the UPL transfers specimen custody to another UPL, into and out of temporary storage, or to a shipping agency, they must annotate correct and complete information in the appropriate sections on the back side of DD Form 2624.

Complete the sections of the DD Form 2624 as follows to properly document chain of custody:

- Block 12a – Current date.
- Block 12b – Person or facility releasing custody.
- Block 12c – Person or facility accepting custody.
- Block 12d – Purpose of change.

If you do not complete the Chain of Custody form indicating shipment, then the laboratory will declare a fatal discrepancy and destroy all of the specimens you collected without testing them.
Laboratory Procedures

Discrepancies
When the FTDTL receives specimens, the lab technicians perform quality control to ensure that all specimens meet the processing guidelines in the AR 600-85 and laboratory SOPs. If specimens fail the quality control check for any reason, the technicians declare a discrepancy. There are two types of discrepancies:

- **Fatal discrepancies** are those that would invalidate the test results, such as an insufficient specimen amount. The FTDTL destroys specimens with fatal discrepancies without performing any testing and returns notification about the discrepancy with test results.
- **Non-fatal discrepancies** are those that would not invalidate the test results but were avoidable if the UPL or DTC had corrected them, such as invalid test codes. The FTDTL tests specimens with non-fatal discrepancies as normal and returns notification about the discrepancy with the test results.

If the FTDTL notifies you of a fatal discrepancy, follow this procedure:

1. Inform your Commander which specimen(s) the lab did not test and why.
2. Annotate the Testing Register that the lab did not test this specimen and include the reason.
3. Retest the Soldier who provided the specimen that received a fatal discrepancy.
4. Review what led to the discrepancy and take corrective action.

Keep these points in mind regarding discrepancies:

- Although the FTDTL tests specimens that have non-fatal discrepancies, the UPL should do his or her best to prevent the error in the future.
- Positive test results with a non-fatal discrepancy give courts a reason to attack the UPL’s qualifications, work ethic, and the credibility of the test.
- An excessive rate of discrepancies in drug testing collection procedures, urinalysis specimens, or on associated forms may cause the Commander to revoke the UPL’s certification. (AR 600-85)

Discrepancy Codes
There are 44 DOD-approved discrepancy codes. These discrepancy codes are divided into six categories: Bottle, Specimen, Custody Form, Package, Label and Other. If the FTDTL found a discrepancy, the lab includes the appropriate code when returning test results. (AR 600-85)

For FY 2008, the most frequently occurring discrepancies were:

- *(FN)*–DD Form 2624 did not have the chain of custody entries. The specimen was not tested.
- *(GG)*–DD Form 2624 listed specimen, but no bottle was received.
- *(BC)*–Specimen leaked in shipment, not enough sample to test.
- *(GY)*–Form discrepancy. The specimen was not tested.

See the Appendixes in this handbook for a complete list of discrepancy codes.
Laboratory Testing Procedure

When specimens pass the quality control check, technicians move on to the testing procedure and may perform as many as three tests before determining a result.

The first test is an initial screening to determine whether any drugs or drug metabolites are in the sample. An aliquot (a portion of the sample) is poured into a test tube and tested for THC, cocaine, amphetamines, heroin, and any other rotational drugs (such as opiates, oxycodone/oxymorphone, PCP). Testing ends here for specimens with a negative result.

For specimens that initially test positive, the lab performs a second test to verify the presence of any drug or drug metabolite. A new aliquot is poured and tested only for the drugs that tested positive initially. Testing ends here for specimens with a negative result.

If the specimen still tests positive, the lab performs a third test with a new aliquot using the forensic gold standard of gas chromatography/mass spectrometry (GC/MS) to confirm the presence of specific drugs. If the amount of a drug or drug metabolite meets or exceeds the established Department of Defense (DOD) cutoff level in nanograms per milliliter (ng/mL), the lab enters a positive drug test result on that specimen.

If the amount of drug or drug metabolite is below the cutoff level by any amount, the lab reports a negative result. For example, if a specimen contains 14 ng/ml of THC, the specimen is reported as negative because it is below the cutoff level of 15 ng/ml.

Nanogram Levels

Nanogram levels reflect the concentration of a drug or drug metabolite in a Soldier’s urine.

Commanders should **not** use nanogram levels to determine how much drug the Soldier consumed, or the degree to which the drug affected the Soldier. Nanogram levels vary depending on a Soldier’s metabolism, level of hydration, amount of drug used, frequency of use, and the time that has elapsed since using a drug (AR 600-85).

The table on the following page shows the Department of Defense (DOD) cutoff levels. The FTDTL refers to these levels when analyzing urine specimens and determining a positive or negative drug test result. If the amount of a drug or drug metabolite meets or exceeds the indicated level in nanograms per milliliter (ng/mL), the lab enters a positive drug test result on that specimen.
<table>
<thead>
<tr>
<th>Report Abbreviation</th>
<th>Drug</th>
<th>Cutoff Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>THC</td>
<td>THC</td>
<td>15 ng/ml</td>
</tr>
<tr>
<td>COC</td>
<td>Cocaine</td>
<td>100 ng/ml</td>
</tr>
<tr>
<td>AMP</td>
<td>Amphetamine</td>
<td>500 ng/ml</td>
</tr>
<tr>
<td>MET</td>
<td>Methamphetamine</td>
<td>500 ng/ml</td>
</tr>
<tr>
<td>PCP</td>
<td>PCP</td>
<td>25 ng/ml</td>
</tr>
<tr>
<td>COD</td>
<td>Codeine</td>
<td>2000 ng/ml</td>
</tr>
<tr>
<td>MOR</td>
<td>Morphine</td>
<td>4000 ng/ml</td>
</tr>
<tr>
<td>6AM</td>
<td>Heroin</td>
<td>10 ng/ml</td>
</tr>
<tr>
<td>MDMA</td>
<td>MDMA</td>
<td>500 ng/ml</td>
</tr>
<tr>
<td>MDA</td>
<td>MDA</td>
<td>500 ng/ml</td>
</tr>
<tr>
<td>MDEA</td>
<td>MDEA</td>
<td>500 ng/ml</td>
</tr>
<tr>
<td>OXYCOD</td>
<td>Oxycodone</td>
<td>100 ng/ml</td>
</tr>
<tr>
<td>OXYMOR</td>
<td>Oxymorphone</td>
<td>100 ng/ml</td>
</tr>
<tr>
<td>DAMP</td>
<td>D-Amphetamine</td>
<td>100 ng/ml</td>
</tr>
</tbody>
</table>
Record Management

The UPL performs a vital function in managing testing records after the testing process is complete. This part of the role includes receiving, reporting, and recording test results. It also includes filing the records properly according to Army regulation.

Receiving Testing Results

FTDTLs post urinalysis testing results online. DTCs (or command equivalents) and BAC Managers use a Web portal to retrieve the results. Units then receive results from the appropriate points of contact (POCs):

- BAC Managers forward drug testing results to deployed Units.
- DTCs or command equivalents (NGB JSAPC, USAR ADCO) forward drug testing results to non-deployed Units.
- The ASAP POC at the higher command who required this training forwards drug testing results to other non-deployed geographically separated UPLs (recruiters, ROTC instructors, etc.).

Garrison Comparison—Receiving Testing Results

In deployed units, BAC managers notify the Commander or UPL of drug testing results. It takes 30 to 45 days from the specimen shipment date to receive a result.

In garrison, the DTC or command equivalent notifies the Commander or UPL of drug testing results. Results for garrison Units are usually available one week after testing. (AR 600-85)

Results Checker Tool

The ASAP Web site provides a “Results Checker” tool available to deployed UPLs only. UPLs using BACs beginning with a “CT” may use the tool, which provides:

- The testing date
- Any discrepancies
- The number of specimens tested
- Whether results are available

The BACM accesses the actual results via the FTDTL Web portal and forwards them to the Unit. (AR 600-85)
Testing Result Report

This is a copy of a testing report that the DTC or BAC Manager receives from the testing laboratory. Notice that there is a fatal discrepancy for specimen number six and a positive test result for specimen number 12.

<table>
<thead>
<tr>
<th>ID</th>
<th>SSN</th>
<th>LAN</th>
<th>BASIS</th>
<th>INFO</th>
<th>DISC</th>
<th>DRUGS TESTED</th>
<th>RESULTS</th>
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</thead>
<tbody>
<tr>
<td>001</td>
<td>829600001</td>
<td>IR</td>
<td>A</td>
<td>ACEH</td>
<td>T</td>
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<td></td>
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<td>ACEH</td>
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<td>006</td>
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<td>BD</td>
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<td>UNTESTABLE</td>
<td></td>
</tr>
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<td>829600007</td>
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<td>B</td>
<td>ACEH</td>
<td>T</td>
<td>NEGATIVE</td>
<td></td>
</tr>
<tr>
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<td>B</td>
<td>ACEH</td>
<td>T</td>
<td>NEGATIVE</td>
<td></td>
</tr>
<tr>
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<td>829600009</td>
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<td>A</td>
<td>ACEH</td>
<td>T</td>
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<tr>
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<td>829600010</td>
<td>IR</td>
<td>B</td>
<td>ACEH</td>
<td>T</td>
<td>NEGATIVE</td>
<td></td>
</tr>
<tr>
<td>011</td>
<td>829600011</td>
<td>IR</td>
<td>A</td>
<td>ACEH</td>
<td>T</td>
<td>NEGATIVE</td>
<td></td>
</tr>
<tr>
<td>012</td>
<td>829600012</td>
<td>IR</td>
<td>A</td>
<td>ACEH</td>
<td>T</td>
<td>POSITIVE DAPM 1268</td>
<td></td>
</tr>
</tbody>
</table>

Retesting After a Positive Result

Positive urine specimens may be retested if a sufficient quantity of the specimen is available and a written request for retesting is submitted by one of these methods:

- The Unit Commander, the MRO, or an attorney representing the Soldier.
- The Soldier whose specimen tested positive, but only through the Soldier’s Commander or attorney.
- Request by the President or Recorder of an administrative board.
- An order of a court-martial or request made pursuant to the rules for court-martial.

Any DOD lab performs retests free of charge. National Institute on Drug Abuse (NIDA) Certified Civilian labs perform retests at the Soldier’s expense. When the lab retests a specimen that originally had a positive drug test result, the subsequent results will show only the presence of the tested substance and will not show a “cut-off” value.

Medical Review Officer (MRO) Reviews

Positive drug test results may trigger a Medical Review Officer’s (MRO’s) review, depending on the type of drug found in testing. If an MRO review is required, the BACM ensures that the review occurs, after which the Commander receives the test and MRO-review results. (AR 600-85)

When MRO decisions are received that show the drug use is legitimate, the UPL:

1. Annotates “MRO evaluation results in legitimate use” on the copy of the DD Form 2624 and on the Testing Register.
2. Files results for three years plus the current year.
Commander Actions

The Commander must follow a specific series of actions in response to positive drug test results. Commanders must consult with law enforcement and then must initiate discharge against the offending Soldier in accordance with AR 600-85.

Commander Actions Process

Prohibited Substances

Article 112a, Uniform Code of Military Justice; specifically prohibits the unlawful use of the following substances: Cannabinoids, cocaine, amphetamine, methamphetamine, morphine, codeine, heroin, phencyclidine, barbituric acid, lysergic acid diethylamide (LSD), anabolic steroids, and any compound, derivative, or isomer of any such substance.

Soldiers may also face disciplinary action under the Uniform Code of Military Justice (UCMJ) and/or administrative action for using the following substances illegally or illicitly if doing so for the purpose of inducing excitement, intoxication, or stupefaction of the central nervous system:

- Hemp or products containing hemp oil
- Controlled substance analogues (designer drugs)
- Chemicals, propellants, or inhalants (huffing)
- Dietary supplements that are banned by the United States Food and Drug Administration
- Prescription or over-the-counter drugs and medications (if illicit or excessive use beyond what is normal, sufficient, or prescribed)
- Naturally occurring substances (to include but not limited to Salvia Divinorium, Jimson Weed, etc.)

Commanders should consult the SJA before initiating any adverse action to determine whether or not a substance or its use is prohibited. (AR 600-85)
Record Maintenance

The Army’s system for record maintenance is known as the Army Records Information Management System (ARIMS). Within this system, records are identified and filed by the number of the primary directive, which is usually an Army Regulation (AR). The Army Regulation AR 25-400-2 governs ARIMS.

File Guides

The UPL must use file guides to separate files and to identify subdivisions in the filing system. A file guide is a blank folder with ARIMS information but it contains no records. Using file guides makes filing and retrieving a particular file easier. ARIMS stipulates file guides must include the following pieces of information:

- Creation
- Disposition
- Maintenance
- Use

Record Labels

Record labels must include the following information:

- File Number
- File Title
- Year of Accumulation
- Privacy Act System Notice Number (if applicable)
- Disposition Instructions (which are marked with a “K” or “T”)

![File Label Example]

Alcohol and Drug Abuse Urinalysis Testing Files - Positive Results

PA SYS: A0600-85DAPE

Disposition: "T3" COFF 30 Sep 09, DEST after 3 years
Filing Instructions

File Number: 600-85a2

Title: Alcohol and Drug Abuse Management Files

Privacy Act: Not applicable

Description: Information reflecting implementation and status of the Alcohol and Drug Abuse Program. Included are reports, lessons learned, and other information relating to prevention, identification, treatment, rehabilitation, evaluation, and research and development.

Disposition: “K6”—Destroy after 2 years

File the following under AR 600-85a2:

- Unit SOPs
- Memoranda titled “Certificate of Correction”
- Special test request memoranda
- Copies of inspection reports
- Appointment orders

File Number: 600-85b3

Title: Alcohol and Drug Abuse Statistics

Privacy Act: Not applicable

Description: Information reflecting statistics related to the Alcohol and Drug Abuse Program. Included are compilations and related information.

Disposition: “K6”—Destroy after 5 years

File the following under AR 600-85b3:

- Any statistics maintained or provided to the command from the ASAP.
- Risk Reduction Statistics, if the Risk Reduction Program is utilized at your installation.

File Number: 600-85e1

Title: Alcohol and Drug Abuse Testing Report Files—Positive Results

Privacy Act: A0600-85DAPE

Description: Copies of DD Form 2624 Specimen Custody Document - Drug Testing, and related documents pertaining to urinalysis testing.

Disposition: “T3”—Destroy after 3 years

File the following under AR 600-85e1:

- Copies of DD Form 2624 with positive results
- Testing Registers with positive results
- Results of alcohol testing (positive)
- Memoranda titled “Certificate of Correction” on specimens with a positive result
File Number: 600-85e2

Title: Alcohol and Drug Abuse Testing Report Files—Negative Results

Privacy Act: A0600-85DAPE

Description: Copies of DD Form 2624, Specimen Custody Document - Drug Testing, and related documents pertaining to urinalysis testing.

Disposition: “T1”—Destroy after 1 year

File the following under AR 600-85e2:
- Copies of DD Form 2624 with negative results
- Testing Registers with negative results
- Results of alcohol testing (negative)
- Memoranda titled “Certificate of Correction” on specimens with a negative result

Annotating Documents for Positive Drug Testing Results

When positive drug testing results are received, the UPL:

1. Annotates the Testing Register and/or DD Form 2624 (if maintained), or
2. Attaches a copy of the drug testing results to the Testing Register and/or DD Form 2624 (if maintained), and
3. Files drug testing results for three years plus the current year. You should also retain for 3 years the policy and SOP covering the period of the positive result. File the Testing Register in a secure location at the Unit level.

Reporting Positive Specimens
Annotating Documents for Negative Drug Testing Results

When negative drug testing results are received, the UPL:

1. Annotates the Testing Register and/or DD Form 2624 (if maintained), or
2. Attaches a copy of the drug testing results to the Testing Register and/or DD Form 2624 (if maintained), and
3. Files drug testing results for one year plus the current year. File the Testing Register in a secure location at the Unit level.

Reporting Negative Specimens

DTCs must report to the Commander negative results on specimens with a Probable Cause (PO), Competence/Fitness for Duty/Command Direct (CO), or Rehabilitation (RO) test basis.

DTCs must also report to the counseling center results on specimens with a Rehabilitation (RO) test basis.
Section 5

Appendixes
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Appendix A

Appointment Orders
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MEMORANDUM FOR RECORD

SUBJECT: Appointment of Unit Prevention Leader

1. Effective <30 Sept 09, SSG John Doe, ***-**-6789>, is assigned the duty as Primary Unit Prevention Leader (UPL). <SGT Jane Doe, ***-**-7891>, is assigned as Alternate Unit Prevention Leader (UPL).

2. Authority: AR 600-85.

3. Purpose: The Unit Prevention Leader is expected to be the Commander’s subject matter expert on all areas within the Army Substance Abuse Program (ASAP), conduct flawless urinalysis collections, provide alcohol and other illicit drug training to the Unit, and assist the Commander in running Unit drug testing and prevention programs.

4. Period: Until officially relieved or released from appointment.

5. Special Instructions: Primary and Alternate UPLs must be certified on an annual basis through the Army Center for Substance Abuse Programs approved Unit Prevention Leader Certification Training Program.

<John D. Commander
CPT, MS
Commanding>

DISTRIBUTION:
1 – File
1 – Individual
1 – ASAP
1 – Unit SAP SOP
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Appendix B

Unit Substance Abuse Program
Standing Operating Procedures
(USAP SOP)
UNIT SUBSTANCE ABUSE PROGRAM STANDING OPERATING PROCEDURES (USAP SOP)

PRACTICAL EXERCISE

<THE OLD GUARD FIFE AND DRUM CORPS
3D US INFANTRY (THE OLD GUARD)
204 LEE AVENUE
FORT MYER, VIRGINIA 22211-1199>

Purpose

This Standing Operating Procedure (SOP) is a Unit specific substance abuse program for the <Fife and Drum Corps, 3d U.S. Infantry>. Drug and alcohol abuse are not compatible with military service and every effort should be made to eliminate the abuse of alcohol and other drugs within this Command through prevention and treatment. This SOP and the references listed below will be used when conducting all urinalysis collections, drug and alcohol training, and prevention programs.

Applicability

All assigned and attached Company personnel.

References

A. AR 600-85, Army Substance Abuse Program (ASAP), dated 2 February 2009.

B. Unit Prevention Leader (UPL) Handbook, Army Center for Substance Abuse Programs (ACSAP), dated 30 September 2009.

C. <Local installation SOP>
SUBJECT: Unit Substance Abuse Program SOP (USAP SOP)

Drug Use/Abuse

A. Using a controlled drug without prescription, or using the prescription of someone else, is drug abuse and is against the law. Using your own prescription, but not in accordance with (IAW) the prescription, is drug abuse.

B. Abusers will be subject to punishment under the provisions of the Uniform Code of Military Justice (UCMJ) and will also be subject to administrative action IAW existing regulations.

C. Urinalysis testing is an accurate identifier of offenders and serves as an effective deterrent against experimentation. Toward the goal of eliminating drug use and abuse, the Commander will randomly collect (Testing Code IR) a minimum number of specimens that equals or exceeds the number of Soldiers assigned to the Unit each year. <In addition, the Commander may collect specimens under other test codes such as probable cause, fitness for duty, unit sweep, etc. However, the Commander should ensure that the annual number of specimens collected in Unit Sweeps (Testing Code IU) is no more than 75 percent of the annual number of specimens collected in random testing.>

Responsibilities

Commander

1. Appoint a Primary Unit Prevention Leader (UPL) and a minimum of one alternate UPL by means of an appointment memorandum.

2. <Ensure that the policies and procedures contained in the references cited above are followed by the UPLs.>

3. <Review and sign the USAP SOP annually.>

4. <Select Observers for all urinalysis collections (see UPL Handbook for Observer minimum requirements).>

5. <Select an NCO/Officer to be in charge of the holding area during collection procedures.>

6. <Ensure each week, as a minimum, 4% of the Unit’s Soldiers provide a urine specimen under testing code IR. Random Selection is a key component of Smart Testing, because it ensures the unpredictability of testing.

7. Immediately report all offenses involving illegal possession, use, sale, or trafficking in drugs or drug paraphernalia to the Provost Marshall (PM) for investigation or referral to the Army Criminal Investigation Command (USACIDC).

- AR 600-85 prohibits Soldiers from illegal or illicit use of the following substances if used for the purpose of inducing excitement, intoxication, or stupefaction of the central nervous system:
Hemp or products containing hemp oil
- Controlled substance analogues (designer drugs)
- Illicit use of chemicals, propellants, or inhalants (huffing)
- Dietary supplements that are banned by the United States Food and Drug Administration
- Illicit or excessive use (beyond what is normal, sufficient, or prescribed) of prescription or over-the-counter drugs and medications
- Illicit use of naturally occurring substances (to include but not limited to Salvia Divinorium, Jimson Weed, etc.)

- This provision is not intended to prohibit the otherwise lawful use of alcoholic beverages.

- If a Commander has any question regarding whether a substance or its use is prohibited, they should contact the Staff Judge Advocate (SJA) before initiating any adverse action.

- Report positives within 48 hours of receiving notification from the <Fort Myer Military Community’s (FMMC) Army Substance Abuse Program (ASAP)> Drug Testing Coordinator (DTC).

8. Schedule Medical Review Officer (MRO) appointments for Soldiers positive for drugs which have a possible legitimate medical use. Currently those drugs are: codeine, morphine, amphetamines, methamphetamines, steroids (from a special test request) and oxycodone/oxymorphone. Appointments should be scheduled when needed for Soldiers following notification from the <Fort Myer Military Community’s (FMMC) Army Substance Abuse Program (ASAP)> Drug Testing Coordinator (DTC). If the MRO review indicates non-legal use, report the positive result to CID within 48 hours of the MRO notification.

- Ensure Soldiers promptly provide medical evidence for legitimate use of a prescribed drug to the MRO when requested.

9. Refer any Soldier to the ASAP for evaluation (complete a DA Form 8003) within five duty days of notification that the Soldier received a positive urinalysis for illicit drug use or was involved in alcohol-related misconduct. All Soldiers who test positive for illicit drug use must meet with an ASAP counselor to determine appropriate treatment or education.

10. Initiate administrative separation in accordance with Army regulations.

11. Implement ASAP prevention and education initiatives addressed in AR 600-85. Ensure all active duty Soldiers receive a minimum of 4 hours of alcohol and other drug awareness training per year. Note: The minimum for non-activated USAR and NGB Soldiers is 2 hours.
12. Ensure all newly assigned Soldiers are briefed on ASAP policies and services.

13. Ensure that the Unit Risk Inventory (URI) is administered to all Soldiers at least 90 days before an operational deployment and the Reintegration Unit Risk Inventory (R-URI) is administered to all soldiers between 90 and 180 days after returning from an operational deployment.

14. Establish a working relationship with the non-clinical ASAP staff, to include the UPL, to support prevention efforts within the Unit and on the installation.

15. Establish a working relationship with the clinical ASAP staff to monitor the progress and assist in the rehabilitation efforts of Soldiers enrolled in ASAP.

16. Consult with the servicing legal office for all drug and alcohol related offenses.

17. Foster a positive Command climate that discourages alcohol and drug abuse and is supportive of those who need assistance from the ASAP for problems related to alcohol and other drug abuse.

Primary and Alternate UPL

1. Successfully complete the <FMMC ASAP’s> UPL Certification Training Program. The requirements for certification are as follows:

   • Complete the Department of the Army (DA) UPL Certification Training Program (CTP). No other UPL certification course is authorized without the written approval of the Director, ASAP. If a UPL candidate is deployed, he or she may be certified using the distance learning and certification procedures explained on the ACSAP Web site. A UPL that is reassigned to another Command may be appointed as a UPL in the new Command with proof of a previous certification until recertification is required at the 18-month point.

   • Recertify every 18 months by attending any locally-required update training and successfully completing the UPL CTP exam. If a UPL’s certification expires while he or she is deployed, the UPL may recertify using the distance learning and certification procedures outlined on the ACSAP Web site. Certification obtained through the distance learning method is valid for 12 months. If a UPL fails the re-certification exam, he or she must retake the entire UPL CTP before retaking the exam.

   • If a UPL’s certification expires, contact the ASAP within 60 days. The UPL then attends any locally-required update training and successfully completes the recertification exam to be recertified for another 18 months from the date of examination. During the time between the expiration date and the exam the UPL is not authorized to collect drug testing specimens. If a UPL’s certification has been expired for more than 60 days, then the UPL must retake the entire UPL certification course.
The ADCO may revoke the ASAP certification of any UPL for an excessive number of discrepancies in drug testing collection procedures, urinalysis specimens, or on associated forms. However, the ADCO must immediately notify the UPL’s Commander in writing of such revocation and the purpose for it.

UPLs are encouraged to attend an instructor certification course to enhance their ability to conduct drug and alcohol awareness training at the Unit.

2. Conduct unannounced Unit urinalysis, as directed by the Commander, or the designated representative.

3. Coordinate the required Unit drug and alcohol education classes.

4. Maintain liaison with the servicing ASAP counseling center when in garrison and the servicing behavioral health unit when deployed.

5. In coordination with the company commander, design and implement the Company Substance Abuse Program SOP and UPP.

6. Commanders will use DTP or DTP Lite software as the tool for random selection unless the software is unavailable.

7. <Twice a month>, one UPL will report to the <FMMC local ASAP> to:
   a. Pick up the Unit’s distribution.
   b. Speak with the Drug Testing Coordinator (DTC) about any updates in the urinalysis program, schedule future urinalysis, and/or pick up supplies.
   c. Speak with the Prevention Coordinator (PC) and/or Alcohol and Drug Control Officer (ADCO) about future prevention efforts, marketing campaigns or training that can be utilized at the Unit and/or supported by the Commander.

8. Maintain an Alcohol and Drug Abuse bulletin board that contains information received from the ASAP on current drug trends, marketing, or prevention materials.

9. Maintain the Unit’s urinalysis functional files IAW with AR 25-400-2 – Army Records Information Management System (ARIMS).

10. Train and supervise urinalysis Observers.

11. Ensure that Soldiers who are enrolled in the ASAP are tested under code RO at a frequency determined by the Commander and ASAP counselor. The substitution of RO for IR, IU, CO, or PO testing or vice versa is not permitted.
Observer

1. Sign the Memorandum for Observers that explains duties and legal implications. Observers are subject to UCMJ actions under articles 92, 107, and 134 if they fail to perform their duties properly.

2. Maintain line of sight with the specimen bottle at all times during the entire collection process.

3. NOT touch the bottle nor hold the bottle cap at any time.

4. Directly observe urine leaving the body and entering the specimen bottle or urine female collection cup.

5. Notify the UPL of any unusual circumstances, such as suspicion that the specimen did not come from the Soldier’s body or is modified.

6. Observe that each bottle is sealed and placed in the collection box, and then sign the Testing Register each time.

Urinalysis Testing

Authority to Order or Cancel a Urinalysis

The Unit Commander is the only person authorized to order or cancel urinalysis testing. The Commander may delegate this authority to the Acting Commander in writing.

There are two primary urinalysis test types.

A. Random Tests

The Commander may direct Soldiers selected at random to submit to a urinalysis. Additionally, the Commander may direct a test of the entire Unit. The test basis code for a random test is IR. The test basis code for a 100% test (Unit sweep) is IU.

B. Individual Tests

The Commander may direct an individual Soldier to submit to a urinalysis under the following circumstances:

1. Probable Cause

If a member of a Soldier's chain of Command suspects or has proof that a Soldier is abusing drugs, that member may request that I order a urinalysis specimen be collected from that Soldier. After consideration about whether probable cause has been established, the Commander, in consultation with SJA, will make the decision to approve or disapprove the request for urinalysis (Test basis: PO).
2. Competence/Fitness for Duty (also referred to as Command Direct)

The Commander can order this test on a Soldier when there is no probable cause, but the Commander believes that there is something causing the Soldier to have a bizarre or unusual behavior, and feels that the Soldier could be safety hazard to self or others. This test falls under the Limited Use Policy and cannot be used for characterization of service or in courts martial (Test basis: CO).

3. <Rehabilitation Tests (Coded: RO)>

Soldiers who are enrolled in the FMMC ASAP will be "RO" tested a minimum of once a month while they are enrolled in the program.

Once monthly, a UPL will contact the FMMC ASAP to obtain the name(s) of the Soldier(s) enrolled in the program.

Rehabilitation urinalysis cannot be substituted for specimens coded "IR", "IU", "CO", or "PO" or vice versa.

During notification, before testing, and during testing, the UPL will take proper precautions to protect each Soldier's right to privacy and the confidentiality of their ASAP enrollment.>

4. Inspection Other

The Commander can set policies that dictate certain circumstances when someone will be tested. Personnel who fall into one of the categories below will be tested regardless of rank or position (Test Basis: IO).

- <Newly Assigned Soldiers>

As part of the Unit in-processing procedure, all newly assigned Soldiers will be required to provide a urinalysis specimen. The specimen will be obtained within the first month of their assignment to the Unit (Test basis: IO).

- <Soldiers that return from AWOL>

All Soldiers who return to the Unit from an AWOL status will be required to provide a specimen within three duty days of their return (Coded: IO).>
C. Unavailable Soldiers and Retests of Fatal Discrepancies

Soldiers selected but unavailable for testing because of leave, school, TDY etc. will be tested on the first available test after their return to duty; these Soldiers will tested under the same test basis as they were selected under (IU or IR).

If the laboratory rejects a specimen untested because of a fatal discrepancy, the Soldier must provide another specimen that is valid to replace the flawed specimen.

The Commander and UPL should make a plan for how to handle these cases and decide whether to:

- Conduct the later test or retest during a specific time period (e.g., within three days of return), OR
- Conduct the later test or retest during a specific event, such as the next Unit test.

Selection of the Day of the Test

The Commander, or his/her designated representative, will select the day of the test. To lessen predictability, every effort will be made to ensure that the date selected does not favor any particular day of the week. Nor should it favor a week of the month, or a month of the quarter (as in 100% testing).

Random Selection Methods for Testing, Coded: IR

Following are the primary and alternate methods of randomly selecting personnel who will be tested:

A. The UPL will use the DTP software as the primary means of selecting personnel to be tested. The DOD Drug Testing Program will select personnel to be tested based upon the percentage or number of personnel requested. The program will then print the DD Forms 2624, Unit Urinalysis Ledger and Bottle Labels. The UPL will select personnel using the “number of personnel” selection method. The number of personnel selected will be based on guidelines in AR 600-85.

B. The alternate selection method, to be used when the DTP software is unavailable or the computer system is down, is to select Soldiers for testing by the last digit of their social security number.

1. Selection of the “numbers” should be done as close to the test date as possible. Ideally, this would be the same day as the urinalysis.

2. Ten pieces of paper with the numbers one through nine and zero printed on them will be folded and placed in a container. After the folded pieces of paper are mixed, one or more of the pieces of paper will be withdrawn from the container, one at a time. Normally at least two numbers must be selected. A UPL and either the 1SG or the Commander will perform this procedure.
3. The number(s) selected will be matched against the last digit of each Soldier’s social security number as referenced against the most current company roster. The daily status report will be reviewed to identify the duty status of each selected Soldier.

4. Only “present for duty” Soldiers will be required to test on the actual urinalysis test day, all others selected personnel will test on the next test day.

5. All of the numbers (one through nine and zero) must be used during subsequent urinalysis testing selection. For example, if the number “two” is drawn for a random urinalysis in June, it must be included in the drawing for July. If “two” is drawn again in July, it would not be proper to select a substitute or alternate number.

**Personnel Briefings**

There are three personnel briefings that must occur prior to the start of urinalysis testing: the Observer briefing, the Commander briefing, and the UPL Unit briefing. The Observer briefing occurs first. The Commander briefing is next and serves as the order to Soldiers to provide a specimen for testing. The UPL briefing occurs last and informs Soldiers about the specific procedures they must follow to provide a urine sample.

*If a Soldier arrives after the personnel briefings have been presented, the holding area NCO/officer, the Commander or the 1SG must read the UPL Unit brief to the Soldier.*

**Verifying a Soldier’s Identity**

If a Soldier reports for testing without a military identification card, verify the Soldier’s identity <using one of the following methods:>

- <The First Sergeant or Commander verifies identity, OR>
- The UPL uses a different picture ID to verify identity (such as a driver’s license).>
- <The UPL refers to AAA 162>

**Failure to Produce a Complete Specimen**

The following procedures will be followed for Soldiers who fail to produce a complete specimen on their first or subsequent attempts (this include providing no urine at all).

1. Each Soldier will be directed to the Holding Area until able to produce a complete specimen. They will be kept under the supervision of a NCO/ Officer who has been stationed in the Holding Area for that purpose.

2. They will be directed to drink a minimum of eight ounces of water every 30 minutes not to exceed 40 ounces.

3. When Soldiers feel able to provide a complete specimen, they will return to their original urinalysis station.
Adulterated or Suspected Adulterated Specimens

Following are the actions to be taken, if the observer or the UPL suspects a “questionable specimen”. A questionable specimen is one that is suspected of being adulterated or substituted.

A. The UPL will immediately contact the Commander or First Sergeant to explain the circumstances that caused the specimen to be questioned. The UPL will request permission from the Commander to obtain a second specimen from the Soldier as PO.

If permission is not granted to collect a second specimen, a brief explanation and the name of the person consulted will be placed in the “Remarks” column of the Urinalysis Ledger.

If the Commander orders a second specimen, the UPL will do the following:

1. Follow the steps in the AR 600-85 and UPL Handbook for collecting a second specimen.
   - The second specimen should be obtained before station closure.

2. Submit the original specimen according to the normal procedure, as though there is no adulteration or suspected adulteration.
   - The test basis code of the specimen (item 9 of the DD Form 2624) should remain IR or the code that was originally requested.

3. In the “Remarks” column of the Ledger, the UPL should briefly explain the circumstances that caused the specimen to be questioned and should include the name of the person who ordered the collection of the second specimen.

4. Place the Second specimen on a separate DD Form 2624 with the Probable Cause test basis code (PO).

B. The first specimen, and any additional specimens, will be released to the DTC under normal chain of custody procedures.

Failure to Appear for Testing

The Commander will be notified by the UPL of the name of any Soldier who fails to appear for testing. Failure to test is disobedience of a lawful order.

Closure of the Urinalysis Station

The Commander is the only person with the authority to close a urinalysis station. Closure will be accomplished based upon the following:
SUBJECT: Unit Substance Abuse Program SOP (USAP SOP)

A. Successful testing of all Soldiers required to test.

B. Duty status of the Soldiers remaining to be tested. Example: Because of a mission, a Soldier is not expected to return to the site of the urinalysis within a reasonable time frame.

If there are Soldiers remaining to be tested, and the UPL is directed to close, the UPL will ensure that the person ordering closure is given the names of the untested Soldiers. The UPL will obtain permission from the Commander or his or her designated representative to obtain a specimen from these Soldiers at a later date. The date of the recollection will be unknown to the selected Soldiers.

Disinfecting and Sanitation Instructions

A. Disinfectants:

1. Any household liquid or spray disinfectant (e.g., Lysol) can be used. The disinfecting method will depend upon the instructions on the container’s label. The disinfectant must contain a germicide.

2. A mixture of 10% bleach and 90% water, which is prepared the same day of use, is an effective disinfectant. Gloves must be worn when applying the mixture. After application, it should be allowed to air-dry. (Do Not get the mixture on clothing, and immediately wash it off bare skin.)

B. Sanitation:

1. Urine spills must be wiped up and disinfected as described below.

   a. Paper toweling should be placed over the site of the spill.

   b. A “liberal” amount of the disinfectant should be sprayed or poured over the paper toweling and allowed to sit for approximately five minutes.

   c. The used paper toweling should be put in a plastic bag-lined trash container.

2. After closure of the urinalysis station, the UPL must disinfect the table and all reusable objects touched during the collection procedure. Following disposal of all used gloves and disinfecting materials in the trash container, the UPL should remove the plastic bag from the trash container, tie the top closed, and put it in a dumpster.

Temporary Storage Area

All specimens will be delivered to the DTC as soon as possible. If specimens must be placed into temporary storage, then the storage requirements listed in the installation SOP will be followed. Specimens will be stored <List temporary storage area here>.
Urinalysis Testing When Deployed

The Commander will maintain substance abuse programs to the maximum extent practical while deployed.

The UPL will coordinate with the Base Area Code (BAC) Manager on drug testing information to include policy, Base Area Codes, FTDTL addresses, the local supply system, and testing results. If the BAC Manager cannot be identified, the UPL will contact the Drug Testing Branch at biochem@acsap.army.mil or Dang Tran at dang.p.tran@us.army.mil for assistance.

Authority to Order or Cancel a Urinalysis

The Commander will not endanger Soldiers' safety and security in hostile fire areas solely to conduct drug testing. The UPL will consult with the chain of Command to ensure the Unit is following this guidance. In areas where Soldiers receive hostile fire pay, O-6 level or higher Commanders can authorize temporary suspension or reduction of random drug testing for specific subordinate elements based on Mission, Enemy, Terrain, Troops available, Time, and Civilian considerations (METT-TC) and/or safety and security issues.

Testing Rate

Units should conduct testing to the maximum extent possible based on METT-TC. Be sure to check with theater authorities for guidance.

UPL Certification

The Unit will mobilize and deploy with at least two trained UPLs. Mobilization stations will train UPLs as necessary before deployment.

The online CTP for certification and recertification of deployed Soldiers is only valid for 12 months. Upon redeployment, the UPL must contact the home station ASAP before conducting any collections.

Testing Supplies

Units should maintain enough drug testing supplies on hand to test 100% of the Unit strength. Deployed Units are not issued supplies through the DTC and therefore must place orders for supplies. The UPL will coordinate with the in-country BAC Manager to replenish urinalysis testing supplies or reorder through the normal supply system by using National Stock Numbers at the Unit expense. The Commander can also coordinate with the Rear Detachment Commander to get supplies from the installation and have them shipped to the deployment area.

Base Area Codes

From the day of mobilization to the day of deployment, the Unit will use the Base Area Code (BAC) <of their mobilization station>. After deploying, the Unit will use the BAC <of the Unit’s Command>.
SUBJECT: Unit Substance Abuse Program SOP (USAP SOP)

Role of Base Area Code (BAC) Manager

1. Retrieve urinalysis test results for the Command on a regular basis from the designated FTDTL web portal, and forward the results via a secure means to Unit Commanders and MROs as appropriate.

2. Coordinate with the Command’s MRO to obtain his/her review of those results that could be the result of a legitimate prescription. The BAC Manager will forward the MRO’s decision to the Unit Commander and enter it in DAMIS.

3. Ensure that subordinate Units have sufficient drug testing supplies to conduct testing.


5. Provide reports as requested.


7. Maintain ASAP files in accordance with AR 25-400-2, Army Records Information Management System (ARIMS).

8. Forward test results for redeployed units to the respective home or mobilization station ADCOs.

DTC Duties by UPL

The UPL is responsible for the post-collection processes normally performed by the DTC. These include quality assurance, packaging and shipping. The UPL should refer to the AR 600-85 and the UPL Handbook for details on how to perform each of these processes.

Shipping

Upon arrival to the deployment area, the UPL should determine local region requirements for shipping urinalysis specimens to the servicing FTDTL. The official mail channel should be used first. If there is no official mail system available, determine if there is a U.S. flagged carrier (Federal Express, United Parcel Service, U.S. Postal Service, etc.) and ask your Commander to set up an account with the available carrier.

The UPL must ship specimens only to the FTDTL that services the UPL’s deployed area. If deployed in the Middle East and Pacific, send specimens to the Tripler, HI FTDTL. If deployed in Europe, send specimens to the Fort Meade, MD FTDTL. See the Base Area Code Manager or the UPL Handbook for information on properly addressing urinalysis specimens.

Maintaining Records

The UPL is responsible to properly maintain drug testing records throughout deployment and to make them available to the Commander for appropriate action upon return. The UPL should refer to the Commander Actions flowchart in the AR 600-85 and the UPL Handbook for details on Commander Actions regarding drug testing results.
Unit Prevention Plan

Training

A. The Primary UPL in coordination with the Commander and the training NCO will ensure that a minimum of 4 hours of substance abuse awareness training is scheduled and delivered to all Soldiers. The UPL will discuss training subjects with the Commander and the ASAP prior to training dates.

B. The UPL will assist the Commander in briefing each newly assigned Soldier on the Unit Substance Abuse Program. The briefing should include the Commander’s policies on testing and prevention efforts. The newly assigned Soldier should be afforded the opportunity to read this SOP, and any other SOPs or policy letters related to the ASAP.

C. Additional training may be required as deemed by the Commander to select groups. This training may be based on Unit specific needs, or trends in drug and/or alcohol abuse. Examples may include observer training at NCOPD, information briefing on Club drugs and Raves to all Soldiers under age 28, or how to handle a urinalysis positive briefing at OPD.

D. All Unit substance abuse training whether conducted by the Commander, UPL, the ASAP staff, or a guest speaker will be documented using a sign-in sheet to record who attended, the topic, the date, start time, and end time of the class. A copy of the sign-in sheet will be provided to the ASAP staff within five working days.

De-glamorization of Alcohol

A. Unit activities will NOT center on the use of alcohol. Alcohol free activities such as non-alcohol Super bowl parties will be encouraged. If alcohol is authorized at a Unit activity, then the following must be provided:

1. Various Non-alcoholic beverages for non-drinkers.

2. Designated drivers to ensure all personnel get home safely.

3. Designated senior leadership to monitor the consumption/condition of personnel who are consuming alcohol.

Prevention efforts

A. The UPL will maintain a Unit substance abuse bulletin board in a common area within the Unit. At a minimum the bulletin board will contain:

1. A copy of this SOP.

2. Copies of DA, MACOM, Installation, and Unit policy letters pertaining to the ASAP.


4. Pamphlets and/or information papers on drugs and alcohol.
5. Current prevention campaigns and alcohol/drug free activities.

6. Information of limited use and how to self refer to ASAP with POCs and phone numbers.

B. The UPL will ensure that the Command is notified of upcoming prevention campaigns. This Unit will support the ASAP campaigns with personnel and resources if mission permits.

C. The Commander or UPL will include drug and alcohol in safety briefings prior to long weekends.

D. The Commander and UPL will stay abreast of drug and alcohol trends within the community and the Unit via the non-clinical ASAP and Unit drug testing statistics. The Commander will take appropriate actions to address potential problems within the Command to include potential problems associated with deployment areas.

**Risk Reduction Program**

A. <The Commander should receive information quarterly from the Battalion Commander pertaining to the fourteen high-risk behaviors measured by the Risk Reduction Program.>

B. <The Commander will assist in the development, planning, and delivery of prevention strategies targeting the areas that are at risk within the Battalion.>

C. <The Commander will schedule and have the 53-item Unit Risk Inventory (URI) administered to the Unit on an annual basis. The results of the URI will be used to adjust training and prevention efforts within the Unit to reduce high-risk behaviors.>

<JEANNE Y. PACE
CW4, USA
Commanding>
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Appendix C

DD FORM 2624
(Blank Form and Example)
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### Specimen Custody Document - Drug Testing

<table>
<thead>
<tr>
<th>1. Submitting Unit</th>
<th>2. Additional Service Information (Second Echelon)</th>
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<table>
<thead>
<tr>
<th>H. Certification</th>
<th>I certify that I am a laboratory official, that the laboratory results indicated on this form were correctly determined by proper laboratory procedures, and they are correctly annotated.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Signature</td>
<td></td>
</tr>
<tr>
<td>(2) Date Signed</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Batch Number</th>
<th>C. Report of Results (DOD Serial No)</th>
</tr>
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<tbody>
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</tbody>
</table>

| D. Drugs Tested | |
|-----------------||

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<tr>
<th>(3) Certifying Official (Printed Name and Title)</th>
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<tbody>
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</table>

**SPECIMEN CUSTODY DOCUMENT - DRUG TESTING**

1. **SUBMITTING UNIT**
   - AF HHC 2/16 INF
   - Bldg 9277 Warrior Ave, Fort Swampy LA 12345
   - Comm: (123) 555-1234

2. **ADDITIONAL SERVICE INFORMATION (SECOND ECHELON)**
   - Fort Swampy ASAP
   - Bldg 2146 Swamp Ave.
   - Fort Swampy, LA 12345

3. **BASE/AREA CODE**
   - CT01

4. **UNIT IDENTIFICATION CODE**
   - W 2LAAA

5. **DOCUMENT/BATCH NUMBER**
   - 0001

6. **DATE SPECIMEN COLLECTED**
   - 20091216

7. **SPECIMEN NUMBER**
   - 001
   - 002
   - 003
   - 004
   - 005
   - 006
   - 007
   - 008
   - 009
   - 010

8. **COMPLETE SSN**
   - 460-79-3340
   - 398-27-0608
   - 110-20-7643
   - 606-47-6960
   - 040-42-3855
   - 283-82-0869
   - 704-79-2744
   - 672-13-3719
   - 657-21-4290
   - 622-24-9513

9. **TEST BASIS**
   - IR A
   - IR A
   - IR A
   - IR B
   - IR A
   - IR A
   - IR
   - IR
   - IR
   - IR

10. **TEST INFO**

11. **PRESCREEN**

12. **DISC CODE**

13. **RESULT**

**CERTIFICATION.** I certify that I am a laboratory official, that the laboratory results indicated on this form were correctly determined by proper laboratory procedures, and they are correctly annotated.

1. **SIGNATURE**
2. **DATE SIGNED**

**HHC 2/16 INF**
- Bldg 9277 Warrior Ave, Fort Swampy LA 12345
- Comm: (123) 555-1234

**EXAMPLE**
### Instructions

**Submitting Unit**
Message address of unit submitting urine samples

**ADDITIONAL SERVICE INFORMATION (SECOND ECHELON)**
Message address of second echelon commander to whom submitting unit reports administratively.

**BASE/AREA CODE**
Service code area. Leave blank. For future use.

**UNIT IDENTIFICATION CODE**
Unit identification code (UIC or RUC) of unit. Do not use.

**DOCUMENT/BATCH NUMBER**
Do not use. Enter the locally assigned batch number. Each batch of 12 samples, or portion thereof, shall be assigned a separate number by the submitting unit.

**DATE SPECIMEN COLLECTED**
Enter the four-digit-year, two-digit-month, and two-digit-day that samples were collected by submitting unit.

**SPECIMEN NUMBER**
Use number pre-printed on form. Enter 3-digit sequential specimen number (last 3 characters of full BIDN).

**COMPLETE SSN**
Full SSN of person from whom sample obtained.

**TEST BASIS**
Indicate the testing premise to conduct the collection:

- Military:
  - A = E1 - E4;
  - B = E5 to E10;
  - C = TDP Aviation;
  - D = TDP Guard/Police;
  - F = TD;
  - G = other TDP;
  - N = other nonmilitary
  - Leave Blank

- Civilian only:
  - ADAPCP Staff;
  - A = E1 - E4;
  - B = E5 to E10;
  - C = TDP Aviation;
  - D = TDP Guard/Police;
  - F = TD;
  - G = other TDP;
  - N = other nonmilitary
  - Leave Blank

**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.

**CHAIN OF CUSTODY (LINE 1)**

<table>
<thead>
<tr>
<th>No.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>DATE - Date of collection/shipment.</td>
</tr>
<tr>
<td>2</td>
<td>RELEASED BY - Signature and printed or typewritten name of the urinalysis coordinator having custody of the samples.</td>
</tr>
<tr>
<td>3</td>
<td>RECEIVED BY - Use only if physical change of custody is occurring prior to shipment. Otherwise leave blank.</td>
</tr>
<tr>
<td>4</td>
<td>PURPOSE OF CHANGE/REMARK - Specify the mode of accountable transportation/system utilized to ship specimens to the lab.</td>
</tr>
</tbody>
</table>

Note: If/when custody of specimens changes other than for a shipment (unless hand carried to the lab), each change 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 (a) - (d).
Appendix D

Testing Register
(Blank Form and Example)
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<table>
<thead>
<tr>
<th>Date of Collection T/M/D/Y</th>
<th>Batch And Specimen #</th>
<th>Tested Members Rank, Printed Name, SSN Signature</th>
<th>TPI Observer's Printed Name and Signature</th>
<th>Comments and Disposition</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/16/2009</td>
<td>Batch: Spec: 0001 001</td>
<td>PVT Benson, Joshua 460-79-3340</td>
<td>IR</td>
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<tr>
<td>12/16/2009</td>
<td>Batch: Spec: 0001 003</td>
<td>PVT Hughes, Michael 110-20-7643</td>
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<tr>
<td>12/16/2009</td>
<td>Batch: Spec: 0001 005</td>
<td>PVT Kmick, Michael 040-42-3855</td>
<td>IR</td>
<td></td>
</tr>
<tr>
<td>12/16/2009</td>
<td>Batch: Spec: 0001 006</td>
<td>PVT Lindgren, Josh 283-82-0869</td>
<td>IR</td>
<td></td>
</tr>
<tr>
<td>12/16/2009</td>
<td>Batch: Spec: 0001 007</td>
<td>PVT Lober, Ernesto 704-79-2744</td>
<td>IR</td>
<td></td>
</tr>
<tr>
<td>12/16/2009</td>
<td>Batch: Spec: 0001 008</td>
<td>PVT Morgan, Bruce 672-13-3719</td>
<td>IR</td>
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</tr>
<tr>
<td>12/16/2009</td>
<td>Batch: Spec: 0001 009</td>
<td>PVT Key, Cindy 657-21-4290</td>
<td>IR</td>
<td></td>
</tr>
<tr>
<td>12/16/2009</td>
<td>Batch: Spec: 0001 010</td>
<td>PVT Shah, Pranav 622-24-9513</td>
<td>IR</td>
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Appendix E

Bottle Labels
(Blank Form and Example)
Handwritten Bottle Label

Example

Bar Coded Bottle Label

Example
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Appendix F

How To Make Corrections
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Making Corrections

How to Edit the SSN on a Bar-Coded DD Form 2624

1) Blacken out approximately one-half inch of the individual Soldier’s bar code using a black marker.

2) Line through the incorrect information.

3) Choose one of the following:

Rewrite the SSN in the same field on the DD Form 2624 and initial and date next to the incorrect information

OR

Void out the original entry, initial and date next to the incorrect information, and then enter the correct information onto an empty space on the DD Form 2624

OR

Void out the original entry, initial and date next to the incorrect information on the original DD Form 2624, and then write the correct information on a separate DD Form 2624.
How to Edit the Other Fields on a Bar-Coded DD Form 2624

If you need to correct the UIC (Unit Identification Code), BAC (Base Area Code) or date on the bar-coded DD Form 2624, follow these steps:

1) Blacken out approximately one-half inch of the main bar code at the top using a black marker.

2) Line through the incorrect information.

3) Enter the correct information.

4) Initial and date the correction.

How to Edit a Handwritten DD Form 2624

When editing a handwritten DD Form 2624, be sure to make the edits on the correct part of the document. To correct the UIC (Unit Identification Code), BAC (Base Area Code), date or Social Security Number (SSN), follow these steps:

1) Line through the incorrect information.

2) Enter the correct information.

3) Initial and date the correction.

How to Edit the SSN on a Unit Urinalysis Ledger

1) Line through the incorrect SSN.

2) Enter the correct SSN.

3) Initial and date next to the correction.
How to Edit the SSN, BAC, UIC, or Date on a Bar-Coded Bottle Label

1) Blacken out the first ½ inch of the barcode.
2) Line through the incorrect SSN, BAC, UIC, or date.
3) Enter the correct SSN, BAC, UIC, or date.
4) Initial and date near the correction.

How to Create a New Bottle Label

1) Destroy the original label by blackening out the SSN and disposing of the label.
2) Create a new label with the correct SSN, BAC, and Collection Date.
3) Include all of the following information on the new label. Remember that all written text must be ½ inch from the edge of the label:
   - Testing date – In the upper left corner
   - Base Area Code – In the upper right corner
   - UPL initials – Written underneath the date when received back from the Soldier
   - Soldier initials – Written underneath the Base Area Code to verify that the SSN is accurate
   - Soldier’s SSN – Written underneath the UPL initials
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Appendix G

Certificate of Correction
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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 _______________________

3. Correction Completed:

SIGNATURE: ______________________
DATE: ______________________
TITLE: ______________________

VERIFIED BY: ______________________
DATE: ______________________
TITLE: ______________________
CERTIFICATE OF CORRECTION

MEMORANDUM FOR: Tripler AMC FTDTL
1 Jarrett White Road, Bldg. 40
Attn: MCHK-FT
Tripler AMC, HI 6859-5000

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__________02 SPECIMEN_________05

3. Correction Completed:

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

SIGNATURE: ___________________________ John Smith
DATE: ___________________________ 25 September, 2009
TITLE: ___________________________ SSG

VERIFIED BY: ___________________________ Michael Jones
DATE: ___________________________ 25 September, 2009
TITLE: ___________________________ SFC
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## Urinalysis Collection, Packaging and Shipping Supplies

### UPL STATION SUPPLIES

<table>
<thead>
<tr>
<th>Item</th>
<th>National Stock Number (NSN)</th>
<th>Local Purchase Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Urine specimen bottles (120 per case, with collection boxes)</td>
<td>6640-00-165-5778</td>
<td></td>
</tr>
<tr>
<td>2. Urine female collection cup (300 per case)</td>
<td>6530-01-048-0855</td>
<td>Alphapointe 1-888-433-5848 Item # CUP4050</td>
</tr>
<tr>
<td>3. Tamper-evident tape (60 strips per box)</td>
<td>6640-01-204-2654</td>
<td>Alphapointe 1-888-433-5848 Item # LBL1010</td>
</tr>
<tr>
<td>4. Labels, Avery 5163</td>
<td>7530-01-514-4903</td>
<td></td>
</tr>
<tr>
<td>5. Vinyl exam gloves</td>
<td>6515-00-339-7860</td>
<td>Alphapointe 1-888-433-5848 Item # GLO1010</td>
</tr>
<tr>
<td>6. Retractable ball point pens</td>
<td>7520-00-935-7135</td>
<td></td>
</tr>
<tr>
<td>7. Black markers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Ruler (optional)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Tape</td>
<td>8135-00-598-6097</td>
<td></td>
</tr>
<tr>
<td>10. Trash bags, 10 gallons</td>
<td>8105-01-195-8730</td>
<td></td>
</tr>
<tr>
<td>11. Paper towels</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Tape, tamper-evident (acetate tamper-evident paddle)</td>
<td></td>
<td>Time Med Labeling Company 1-800-382-3371 Order# TRL-2N 1000 strips per box</td>
</tr>
<tr>
<td>13. Collection boxes (25 per case, boxes and dividers only)</td>
<td></td>
<td>Alphapointe 1-888-433-5848 Item # CAI1061</td>
</tr>
<tr>
<td>14. Bluing agent</td>
<td></td>
<td>Lynn Peavey Corp 1-800-255-6499 Product # 01657- Blue Dye Tablets (100 tablets per bottle) Product # 01658 - Blue Dye Powder (approximately 200 applications per 4 oz. bottle)</td>
</tr>
<tr>
<td>15. Disinfectant (in case of a spill and to disinfect when finished testing)</td>
<td></td>
<td>See UPL Handbook for instructions on disinfectants</td>
</tr>
<tr>
<td>16. Biohazard bag with absorbent (60 per case)</td>
<td></td>
<td>Alphapointe 1-888-433-5848 Item # BAG1045</td>
</tr>
<tr>
<td>17. Table and chair</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Testing Station sign</td>
<td></td>
<td>UPL Handbook</td>
</tr>
</tbody>
</table>
## Urinalysis Collection, Packaging and Shipping Supplies

### DOCUMENTATION

<table>
<thead>
<tr>
<th>Item</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Copy of AR 600-85</td>
<td>ACSAP Web site</td>
</tr>
<tr>
<td>2. DD Form 2624 (Specimen Custody Document – Drug Testing)</td>
<td>Pre-printed by DTP software</td>
</tr>
<tr>
<td>3. Unit Urinalysis Ledger (Testing Register)</td>
<td>Pre-printed by DTP software</td>
</tr>
<tr>
<td>4. Observer Briefing</td>
<td>UPL Handbook</td>
</tr>
<tr>
<td>5. Memorandum for Observers</td>
<td>UPL Handbook</td>
</tr>
<tr>
<td>6. Commander Briefing</td>
<td>UPL Handbook</td>
</tr>
<tr>
<td>7. UPL Unit Briefing</td>
<td>UPL Handbook</td>
</tr>
<tr>
<td>8. Unit alpha roster</td>
<td>Unit personnel section</td>
</tr>
<tr>
<td>9. Installation SOP</td>
<td></td>
</tr>
<tr>
<td>10. USAP SOP</td>
<td></td>
</tr>
<tr>
<td>11. Region/MACOM and/or installation policy letters</td>
<td></td>
</tr>
<tr>
<td>12. UPL Appointment Orders</td>
<td></td>
</tr>
</tbody>
</table>

### HOLDING AREA SUPPLIES

<table>
<thead>
<tr>
<th>Item</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Beverages (water, coffee, juice, soda, etc.)</td>
<td></td>
</tr>
<tr>
<td>2. Styrofoam drinking cups</td>
<td></td>
</tr>
<tr>
<td>3. Table for beverages and cups</td>
<td></td>
</tr>
<tr>
<td>4. Chairs</td>
<td></td>
</tr>
<tr>
<td>5. Garbage can(s) with trash bags</td>
<td></td>
</tr>
<tr>
<td>6. Holding area sign</td>
<td>UPL Handbook</td>
</tr>
</tbody>
</table>

### LATRINE SUPPLIES

<table>
<thead>
<tr>
<th>Item</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Hand soap and paper towels</td>
<td></td>
</tr>
<tr>
<td>2. Latrine “Off Limits” sign</td>
<td>UPL Handbook</td>
</tr>
</tbody>
</table>
# Urinalysis Collection, Packaging and Shipping Supplies

## PACKAGING SUPPLIES

<table>
<thead>
<tr>
<th>Item</th>
<th>National Stock Number (NSN)</th>
<th>Local Purchase Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Liquid absorbent pouch</td>
<td>6330-01-304-9754</td>
<td>Alphapointe 1-888-433-5848 Item # ABS1021</td>
</tr>
<tr>
<td>2. Envelopes (plain white – #10 business)</td>
<td>7530-00-286-6970</td>
<td></td>
</tr>
<tr>
<td>3. Tape</td>
<td>8135-00-598-6097</td>
<td></td>
</tr>
<tr>
<td>4. Tape (pressure pack nylon)</td>
<td>7510-00-290-8035</td>
<td></td>
</tr>
<tr>
<td>5. Wrapping paper to wrap large box</td>
<td>0813-00-290-3407</td>
<td></td>
</tr>
<tr>
<td>6. Dry absorb packs</td>
<td></td>
<td>Fitzco, Inc. 1-800-367-8760 Order #01001</td>
</tr>
<tr>
<td>7. International biohazard label</td>
<td></td>
<td>Lady Lodge Systems, Ltd. 1-800-365-0783 Product # 6BB-18766</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Briggs Corporation 1-800-247-2343 Product # L-3032</td>
</tr>
<tr>
<td>8. Black marker</td>
<td></td>
<td></td>
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</table>

## SHIPPING SUPPLIES

<table>
<thead>
<tr>
<th>Item</th>
<th>National Stock Number (NSN)</th>
<th>Local Purchase Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. White shipping bag (100 per case)</td>
<td>6530-01-304-9762</td>
<td>Alphapointe 1-888-433-5848 Item # BAG1519</td>
</tr>
<tr>
<td>2. Mailing pouch</td>
<td></td>
<td>Fitzco, Inc. 1-800-367-8760 Order # 28007 1000 per box</td>
</tr>
<tr>
<td>3. Outer shipping container (includes 6)</td>
<td>8115-00-183-9505</td>
<td></td>
</tr>
<tr>
<td>4. Outer shipping container (includes 4)</td>
<td>8115-00-079-8447</td>
<td></td>
</tr>
</tbody>
</table>
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Appendix I

Urinalysis Testing Signs
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HAVE YOUR ID CARD READY AND BE ABLE TO PROVIDE A SPECIMEN NOW!
URINALYSIS TESTING AREA
OFF LIMITS

TO UNAUTHORIZED PERSONNEL
LATRINE
OFF LIMITS
URINALYSIS

HOLDING

AREA
Appendix J

Observer Briefing and Memorandum
Observer Briefing

Observers should participate in the Observer Briefing before every drug test. During this briefing, you will learn about your specific duties – including risks, hazards, and legal implications – and you must sign the Observer Memorandum.

You are here to perform a critical portion of the procedures for urine collection as part of the Drug Testing Program. This duty is not attractive, but is one that comes with enormous responsibility. The best Observers turn the sensitive, unwanted and humiliating task of providing a urine specimen into a professional procedure that ensures the integrity of the specimen and helps the donor to be at ease with the process.

This brief training covers the specifics of how to properly observe Soldiers providing a urine sample, and includes explicit terminology for male and female anatomy and bodily functions.

You must meet these requirements to serve as an Observer:

- Have a rank of E5 or above
- Be the same gender as Soldiers being observed
- Have sufficient maturity and integrity to preserve the dignity of the Soldier
- Not be enrolled currently within the ASAP Rehab program or under investigation currently for any substance abuse related offense

Your primary responsibilities are to maintain eye contact with the specimen bottle during the ENTIRE collection process, and to report any unusual circumstances to the UPL. You must properly complete all collection steps as listed in the Observer Memorandum and guide each Soldier through all collection steps to ensure the integrity of every urine specimen.

The risks and hazards of urine collection include humiliation, harassment, ethical dilemmas (such as bribing), attempts to alter the specimen (through adulteration or tampering), and possible legal consequences if you don’t perform your duties correctly.

If it is found that a specimen was altered in any way while under your control as an Observer, you may face legal action under UCMJ Article 92, Article 107, and/or Article 134.

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

- Stand next to the Soldier at a urinal or toilet (urinal is preferred).
- Ensure that you can see the end of the donor’s penis (if the Soldier is not circumcised, ensure that he pulls his foreskin back to allow direct view).
- Maintain constant line of sight with the specimen bottle and cap from the moment the UPL hands the bottle to the Soldier until the moment that the Soldier hands the bottle back to the UPL. You must NOT touch the bottle or cap at any time.

You must follow these specific procedures – without exception – when observing urine sample collection from **female** Soldiers:
Observer Briefing (continued)

- Do not allow the Soldier to sit down on the toilet seat – she must squat over the toilet.
- Ensure the Soldier keeps her upper body straight – she cannot bend over to block view with body, hair, or clothing.
- Ensure that the Soldier holds the collection cup or specimen bottle in front of her body and above the toilet rim.
- Position yourself as necessary in front of the Soldier to maintain a direct view of urine leaving the Soldier’s body and entering the collection cup or specimen bottle.
- If the Soldier is using the collection cup, directly observe the Soldier pouring urine from the cup into the specimen bottle.
- Maintain constant line of sight with the specimen bottle and cap from the moment the UPL hands the bottle to the Soldier until the moment that the Soldier hands the bottle back to the UPL. You must NOT touch the bottle or cap at any time.

Do NOT allow any Soldier to provide a sample out of your direct view (such as behind a closed door) for any reason. You may allow the Soldier to have privacy:

- **ONLY AFTER** the Soldier has provided a sample, **AND**
- **ONLY IF** both the Observer and Soldier can maintain eye contact with the filled specimen bottle at all times.

You may face these challenges and special circumstances during the collection process:

- Donor shyness / mental block, or stalling. There are NO valid excuses to avoid providing a sample.
- Insufficient specimen. The UPL determines whether the specimen amount is sufficient. If instructed to do so, you must destroy the specimen bottle according to proper procedure.
- The urine sample is an unusual color or there is a foreign object in the sample. Report this to the UPL when returning to the testing station.
- The Soldier attempts to alter or tamper with the specimen, or to bribe you. Report this to the UPL when returning to the testing station.
- The Soldier has a bowel movement. Follow procedure and then allow the Soldier to have privacy if possible under the closed door exception discussed earlier.
- The Soldier is menstruating or pregnant, is wearing a bodysuit or a thong, or has body piercings. In these cases, collect as normal and refrain from making comments.

**Do you have any questions?**

You must now read, understand, and sign the Memorandum for Observers before we begin the collection process with Soldiers.
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.
MEMORANDUM FOR OBSERVERS

SUBJECT: Responsibilities of Observers During Drug Testing

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
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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 (which includes methamphetamines, MDMA (ecstasy), MDA, and MDEA), heroin and up to three other drugs. The additional drug(s) will be chosen by the lab on a rotational basis from a group that includes Opiates (which includes morphine and codeine), PCP and synthetic opiates (Oxycodone/oxymorphone known commonly as OxyContin).

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.
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Appendix L

UPL Unit Briefing
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UPL's Unit Briefing

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 be 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/BDU jackets and coats or PT jacket.

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.
Appendix M

Post-Collection Checklist
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Post-Collection Checklist

Your ability to correctly complete the quality assurance steps of drug testing will ensure that specimens (1) are maintained in accordance to Chain of Custody procedures, (2) remain forensically intact, and (3) do not incur fatal discrepancies at the FTDTL.

<table>
<thead>
<tr>
<th>Quality Control</th>
<th>Done</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Ensure all SSNs match on all forms.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>a. Check that all SSNs on the DD Form 2624, Unit Urinalysis Ledger, and Bottle Labels are the same as corresponding entries on all forms.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>b. Complete a Certificate of Correction to document corrections during the quality control check.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>2. Ensure that the Unit Urinalysis Ledger is correct and complete.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>a. Check that all required <strong>information</strong> is correct and complete.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>b. Check that all required <strong>signatures</strong> are correct and complete.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>c. Check that all required <strong>initials</strong> are correct and complete.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>d. Check that all corrections on the form meet forensic standards.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>e. Complete a Certificate of Correction to document corrections during the quality control check.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>3. Ensure that <strong>both sides</strong> of the DD Form 2624 are correct and complete.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>a. Check that all required <strong>information</strong> is correct and complete.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>b. Check that all required <strong>signatures</strong> are correct and complete.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>c. Check that all required <strong>initials</strong> are correct and complete.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>d. Check that all corrections on the form meet forensic standards.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>e. Complete a Certificate of Correction to document corrections during the quality control check.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>4. Ensure that ALL bottle labels are correct and complete.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>a. Check that all required <strong>information</strong> is correct and complete.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>b. Check that all required <strong>signatures</strong> are correct and complete.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>c. Check that all required <strong>initials</strong> are correct and complete.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>d. Check that all corrections on the form meet forensic standards.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>e. Complete a Certificate of Correction to document corrections during the quality control check.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>5. Examine each specimen bottle.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>a. Ensure that each specimen bottle is filled with a minimum 30 ml of urine.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>b. Ensure that the tamper-evident tape is NOT broken on any bottle.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>c. Ensure that the tamper-evident tape is correctly placed on each specimen bottle.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>d. If a second piece of tamper-evident tape is applied to any specimen bottle, ensure that it is applied correctly.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
<tr>
<td>e. If a second piece of tamper-evident tape is applied to any specimen bottle, ensure that a Certificate of Correction is completed.</td>
<td>![ ]</td>
<td>![ ]</td>
</tr>
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</table>
### Quality Control (continued)

<table>
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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>6.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Compare collection box to DD Form 2624.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Ensure that every bottle in the box has an entry on the correct line on the DD Form 2624.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. Ensure that every bottle listed on the DD Form 2624 is in the collection box and in the correct slot.</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ensure that specimens are placed in storage in accordance with AR 600-85 if they cannot be shipped immediately after collection station breakdown.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Check that annotations on the SF 702 are proper, complete, and correct.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. Check that Chain of Custody annotations on the DD Form 2624 are proper, complete, and correct.</td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ensure that stored specimens are removed from storage in accordance with AR 600-85.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Check that annotations on the SF 702 are proper, complete, and correct.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. Check that Chain of Custody annotations on the DD Form 2624 are proper, complete, and correct.</td>
<td></td>
</tr>
</tbody>
</table>

### Packaging

<table>
<thead>
<tr>
<th></th>
<th>Done</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ensure that specimens are packaged according to proper procedure.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Ensure that the inside flaps of the collection box show the specimen bottle placement and batch number.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. Ensure that an absorbent pad is in the box on top of the specimen bottles.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c. Ensure that the collection box is sealed and signed according to proper procedure.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d. Ensure that all appropriate photocopies of forms were made.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>e. Ensure the white business envelope contains all required <strong>original</strong> forms.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>f. Ensure the white business envelope is completed and affixed to the collection box according to proper procedure.</td>
<td></td>
</tr>
</tbody>
</table>

### Shipment

<table>
<thead>
<tr>
<th></th>
<th>Done</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ensure that specimens are shipped according to proper procedure.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a. Check that Chain of Custody annotations on the DD Form 2624 are proper, complete, and correct.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. Ensure the collection box is placed in a leak-proof bag and placed securely in the shipping container.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c. Ensure the correct FTDTL address is on the shipping container.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d. Ensure a label that says “Diagnostic Specimens” is affixed near the mailing address.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>e. Ensure the outermost shipping container is prepared according to the carrier’s requirement and local policy.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>f. The UPL handed the shipping container directly to a staff member of the carrier at the point of shipment.</td>
<td></td>
</tr>
</tbody>
</table>
Appendix N

Bottle Placement
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Specimen Placement in Collection Box

Numbering Method for Collection Boxes with Single Batches

The batch number and specimen bottle numbers must be written on the inside of the box flaps on every collection box.

1. Mark the left box flap to reflect the position of each specimen bottle in the box as shown below. Each bottle number 1 to 12 in the box must correspond with the line number on which the bottle appears on the DD Form 2624.

2. Mark the top flap with the appropriate batch number (01, 02, 03, etc.) as shown below. Do not seal the box until the UPL performs the final inspection.
Specimen Placement in Collection Box

Numbering Method for Collection Boxes with Multiple Batches

The batch number and specimen bottle numbers must be written on the inside of the box flaps on every collection box. If a collection box contains bottles from more than one batch, you must label the inside of the box flaps appropriately. You must also include all DD Forms 2624 that correspond with the bottles in the box (see packaging instructions).

1. Mark the left box flap to reflect the position of each specimen bottle in the box as shown below. Each bottle number 1 to 12 in the box must correspond with the line number on which the bottle appears on the DD Form 2624.

2. Mark the top flap with the appropriate batch number (01, 02, 03, etc.) as shown below. Do not seal the box until the UPL performs the final inspection.
Appendix 0

ALARACT Messages
The UPL may want to file ALARACT messages here for future reference.
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Appendix P

UPL Certification Memoranda
MEMORANDUM FOR Director, Army Center for Substance Abuse Programs, Attn: Unit Prevention Leader Certification, 4501 Ford Ave, Suite 320, Alexandria, VA 22302

Subject: Commander’s Unit Prevention Leader Verification letter

1. I, <Commander's Rank and Full Name> hereby certify that:
   a. <Rank and Full Name of UPL, and last 4 of SSN> has completed the UPL training, practical exams and homework and is ready to take the certification exam.
   b. The Urinalysis Practical Exam was administered by <Rank and Full Name of grader> on <date of Practical Exam>; the UPL received a “GO”
   c. I have reviewed and signed the Deployed SOP.
   d. I have appointed the UPL on orders.
   e. Examination Method (Choose one method – On-line is the preferred method):
      THE UPL has Internet access and is able to take the certification exam on-line.
      OR
      THE UPL does not have Internet access; the 1SG, an officer, or senior NCO (E-7) or above will proctor the closed book exam.

2. This e-mail was sent from my official correspondence address and will act as my electronic signature to this Memorandum. POC for this action is the undersigned at <telephone number: 555-123-1234.>

<JOHN Q. COMMANDER  
CPT, IN  
1ST ID, A Co., Commanding>

Note to Commander: Ensure no PII is included on this form, or transmit as an encrypted file only.
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MEMORANDUM FOR Director, Army Center for Substance Abuse Programs, Attn: Unit Prevention Leader Certification, 4501 Ford Ave, Suite 320, Alexandria, VA 22302

Subject: Commander’s Unit Prevention Leader Recertification Verification

1. I, <Commander’s Rank and Full Name> hereby certify that:

   a) <Rank and Full Name of UPL, and last 4 of SSN> has reviewed the UPL training, and is ready to take the re-certification exam.

   b) I have reviewed and signed the Deployed SOP.

   c) I have appointed the UPL on orders.

   d) Examination Method (Choose one method – On-line is the preferred method):

      <The UPL has Internet access and is able to take the certification exam on-line.>

      OR

      <The UPL does not have Internet access; the 1SG, an officer, or senior NCO (E-7) or above will proctor the closed book exam.>

2. This e-mail was sent from my official correspondence address and will act as my electronic signature to this Memorandum. POC for this action is the undersigned at <telephone number: 555-123-1234.>

<JOHN Q. COMMANDER  
CPT, IN  
1st ID, A Co., Commanding>

Note to Commander: Ensure no PII is included on this form, or transmit as an encrypted file only.
Appendix Q

Urinalysis Testing Results
Flowcharts
**Process for Positive Urinalysis Testing Results**

FTD TL posts drug test results to portal → BAC Manager or DTC retrieves results from portal → MRO Reviewable Drug? → Yes → Notify CDR & MRO → MRO makes decision → Legitimate/Illegal

**MRO Reviewable Drugs:**
- Oxycodone
- Oxymorphone
- Morphine
- Codeine
- Amphetamines
- Methamphetamines

**NOTE:** Special testing for prescription medications such as Valium, Zanex, and steroids require MRO Review.

**Non-MRO Reviewable Drugs:**
- THC
- Cocaine
- MDMA (Ecstasy)
- MDA
- PCP

Notify CDR → CDR Actions → BAC Manager or DTC forwards decision to Commander

UPL annotates results on 2624 Ledger & files for 3 years plus current year

End

BAC Manager or DTC forwards decision to Commander

UPL annotates "MRO evaluation results in legitimate use" on 2624 Ledger & files for 3 years plus current year

End
Process for Negative Urinalysis Testing Results

- FTDL posts drug test results to portal
- BAC Manager or DTC retrieves results from portal
- Notify Commander
- No CDR Action required

UPL annotates negative results on the copy of the 2624 and attaches printed results. UPL may also attach a copy of the drug testing results to the Unit Urinalysis Ledger.

UPL files negative results report with ledgers and 2624 for 1 year + the current year.

End
Commander Actions After Receiving Positive Urinalysis Testing Results

**FLOWCHART**

1. **Positive drug test result received**
   - **Does drug require MRO review?**
     - **Yes**
       - MRO determines illegitimate
         - No action required
         - **End**
     - **No**
       - **COMMANDER WILL:**
         1. Consult with law enforcement.
         2. Initiate flag.
         3. Initiate administrative separation IAW AR 635-200, 600-3-24; the retention/separation authority will decide if the soldier is retained or separated.
         4. Refer to ASAP
            - Deployed units should contact BAC manager for available services.
         5. **IF NO LAW ENFORCEMENT INVESTIGATION, ADVISE SOLDIER OF UCMJ ARTICLE 31 RIGHTS.**
           - **A. IF SOLDIER REMAINS SILENT OR REQUESTS A LAWYER, STOP.**
             Conduct commander's inquiry without questioning soldier.
           - **B. IF SOLDIER WAIVES RIGHTS:**
             1. Show evidence to soldier
             2. Request contraband
             3. Request statement
             4. Complete commander's inquiry
         6. Consider UCMJ or other adverse action.
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Appendix R

Discrepancy Codes
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## Specimen Submission Discrepancy Codes

<table>
<thead>
<tr>
<th>Bottle Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>BA</td>
<td>Bottle/Container Unauthorized</td>
</tr>
<tr>
<td>BC</td>
<td>Bottle Leaked in Shipment, Quantity Not Sufficient to Test</td>
</tr>
<tr>
<td>BD</td>
<td>Bottle – Broken Seal</td>
</tr>
<tr>
<td>BE</td>
<td>Bottle – No Seal</td>
</tr>
<tr>
<td>BF</td>
<td>Bottle – Two Seals, No Explanation</td>
</tr>
<tr>
<td>BU</td>
<td>Bottle – Empty</td>
</tr>
<tr>
<td>BY</td>
<td>Bottle Discrepancy – NOT TESTED</td>
</tr>
<tr>
<td>BZ</td>
<td>Bottle Discrepancy – TESTED</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Form Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>FA</td>
<td>Form – UIC or BAC Discrepant/Differs from Bottle</td>
</tr>
<tr>
<td>FH</td>
<td>Form – Date Specimen Collected Discrepant/Differs from Bottle</td>
</tr>
<tr>
<td>FL</td>
<td>Form – Not Received</td>
</tr>
<tr>
<td>FM</td>
<td>Form – Received Separately From Bottle</td>
</tr>
<tr>
<td>FN</td>
<td>Form – Chain of Custody Entries Discrepant</td>
</tr>
<tr>
<td>GG</td>
<td>Form – Specimen Listed, No Bottle Received</td>
</tr>
<tr>
<td>FP</td>
<td>Form – Specimen Not Listed, Bottle Received</td>
</tr>
<tr>
<td>FR</td>
<td>Form on Two Pieces of Paper – No Linking Identifiers</td>
</tr>
<tr>
<td>FT</td>
<td>Form – SSN Discrepant</td>
</tr>
<tr>
<td>GP</td>
<td>Form or Other Document Has Service Member’s Name/Signature</td>
</tr>
<tr>
<td>GR</td>
<td>Form – Marked Void for Received Specimen</td>
</tr>
<tr>
<td>GY</td>
<td>Form Discrepancy – NOT TESTED</td>
</tr>
<tr>
<td>GZ</td>
<td>Form Discrepancy – TESTED</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Label Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>LA</td>
<td>Label Missing/Blank</td>
</tr>
<tr>
<td>LD</td>
<td>Label Over Label</td>
</tr>
<tr>
<td>LF</td>
<td>Label – Collection Date Discrepant</td>
</tr>
<tr>
<td>LJ</td>
<td>Label – Member Initials Discrepant</td>
</tr>
<tr>
<td>LL</td>
<td>Label – Collector or Observer Initials Discrepant</td>
</tr>
<tr>
<td>LN</td>
<td>Label – SSN Does Not Match Form</td>
</tr>
<tr>
<td>LQ</td>
<td>Label has Service Member’s Name/Signature</td>
</tr>
<tr>
<td>LX</td>
<td>Label – SSN Discrepant</td>
</tr>
<tr>
<td>LY</td>
<td>Label Discrepancy – NOT TESTED</td>
</tr>
<tr>
<td>LZ</td>
<td>Label Discrepancy – TESTED</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Package Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>PA</td>
<td>Package – No Seal</td>
</tr>
<tr>
<td>PB</td>
<td>Package – Broken Seal</td>
</tr>
<tr>
<td>PD</td>
<td>Package – Missing Signature/Date</td>
</tr>
<tr>
<td>PY</td>
<td>Package Discrepancy – NOT TESTED</td>
</tr>
<tr>
<td>PZ</td>
<td>Package Discrepancy – TESTED</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Specimen Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>SA</td>
<td>Specimen Appears to be Adulterated – NOT TESTED</td>
</tr>
<tr>
<td>SB</td>
<td>Specimen Appears to be Adulterated – TESTED</td>
</tr>
<tr>
<td>SC</td>
<td>Specimen Quantity Not Sufficient to Test</td>
</tr>
<tr>
<td>SE</td>
<td>Specimen Volume &lt; 30 mL</td>
</tr>
<tr>
<td>SY</td>
<td>Specimen Discrepancy – NOT TESTED</td>
</tr>
<tr>
<td>SZ</td>
<td>Specimen Discrepancy – TESTED</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Specimen Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>OY</td>
<td>Laboratory Technical Discrepancy – NOT TESTED</td>
</tr>
<tr>
<td>OZ</td>
<td>Laboratory Technical Discrepancy – TESTED</td>
</tr>
</tbody>
</table>
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Glossary

**ACRONYMS**

ABMD  Alcohol Breath Measuring Device
ACSAP  Army Center for Substance Abuse Programs
ACU  Army Combat Uniform
ADAPT  Alcohol Drug Abuse Prevention Training
ADCO  Alcohol and Drug Control Officer
AR (600-85)  Army Regulation
ARCENT  Army Central Command
ARIMS  Army Records Information Management System
ASAP  Alcohol Substance Abuse Program
AWOL  Absent Without Leave
BAC  Base Area Code
BNOCOC  Basic Non-Commissioned Officer Course
BPL  Battalion Prevention Leader
CID  Criminal Investigation Command
CD  Clinical Director
DA  Department of Army
DAMIS  Department of the Army Management Information System
DOD  Department of Defense
DODD  Department of Defense Directive
DODI  Department of Defense Instruction
DOT  Department of Transporation
DTC  Drug Testing Coordinator
DTP  Drug Testing Program
DUI  Driving Under the Influence
DWI  Driving While Intoxicated
EAP  Employee Assistance Program
EAPC  Employee Assistant Program Coordinator
FAQ  Frequently Asked Questions
FOB  Forward Operating Base
FOUO  For Official Use Only
FTDTL  Forensic Toxicology Drug Testing Laboratory
IAW  In Accordance With
ILT  Instructor-Led Training
IMCOM  Installation Management Command
IPP  Installation Prevention Plan
IPT  Installation Prevention Team
JSAPC  Joint Substance Abuse Program Coordinator
JSAPO  Joint Substance Abuse Program Officer
LP  Lesson Plan
LSD  Lysergic Acid Diethylamide
MACOM Major Army Command
MEDCOM U.S. Army Medical Command
MFR Memorandum for Record
MP Military Police
MRO Medical Review Officer
MTF Medical Treatment Facility
NCO Non-Commissioned Officer
NCOPD Non-Commissioned Officer Professional Development
NGB National Guard Bureau
NIDA National Institute on Drug Abuse
OTSG Office of the Surgeon General
PATROL Project for Alcohol Training, Research, and Online Learning
PC Prevention Coordinator
PCP Phencyclidine
PLDC Primary Leadership Development Course
PM Provost Marshall
POC Point of Contact
PPE Personal Protective Equipment
PRP Personnel Reliability Program
PTO Prevention/Treatment & Outreach
PTSD Post Traumatic Stress Disorder
R-URI Reintegration Unit Risk Inventory
SAMHSA Substance Abuse and Mental Health Services Administration
SJA Staff Judge Advocate
SME Subject Matter Expert
SOP Standing Operating Procedures
SSN Social Security Number
TOC Tactical Operations Center
TDY Temporary Duty
UCMJ Uniform Code of Military Justice
UIC Unit Identification Code
UPL Unit Prevention Leader
UPLCTP Unit Prevention Leader Certification Training Program
UPP Unit Prevention Plan
URI Unit Risk Inventory
USACIDC Army Criminal Investigation Command
USAMEDCOM United States Army Medical Command
USAP SOP Unit Substance Abuse Program Standing Operating Procedures
USAR United States Army Reserve
WBT Web Based Training
TESTING CODES

Inspection Testing Codes
IR  Inspection Random
IU  Inspection Unit
IO  Inspection Other

Commander-Directed Testing Codes
PO  Probable Cause
CO  Fitness for Duty/ Competence for Duty
RO  Rehabilitation

Other Codes
AO  Mishap or Safety Inspection
VO  Consent
MO  Medical Examination

Discrepancy Codes

For FY 2008, the most frequently occurring discrepancies were:
• (FN) – DD Form 2624 did not have the chain of custody entries. The specimen was not tested.
• (GG) – DD Form 2624 listed specimen, but no bottle was received.
• (BC) – Specimen leaked in shipment, not enough sample to test.
• (FQ) – DD Form 2624 chain of custody entries not original. The specimen was not tested.
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Section 6

Job Aids
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Summary

The DD Form 2624 is the specimen custody document. The UPL must complete this form with extreme care and accuracy for every specimen to maintain the integrity of the drug testing program. Errors can cause the laboratory to reject specimens without testing them for drugs. The front of the DD Form 2624 contains detailed information about the source for each specimen and provides space for the testing laboratory to enter results.

HOW TO COMPLETE THE FORM

If you use DTP software to create testing documents and enter all information into the program correctly, the front side of the DD Form 2624 prints with the necessary information in the correct places. The UPL must still check this information for accuracy during the drug testing process, and must make corrections exactly as described in the UPL Handbook.

1. Submitting Unit

Input the Unit designation, complete address, and phone number for the Unit conducting the collection.

NOTE: For forms printed with DTP software, only three lines of information will appear.

2. Additional Service Information

Information entered here is dependent on your status. The text must not exceed three lines.

For garrison, enter the contact information for the installation ASAP.

For National Guard in garrison, enter contact information for the state JSAPC/O.

For US Army Reserve in garrison, enter contact information for the RSC ADCO.

For deployed, enter contact information for the BACM.

3. Base Area Code

Refer to the ASAP Web site if you need to look up your BAC.

4. Unit Identification Code

Enter the Unit Identification Code (5 digits after the “W” already entered). Refer to the ASAP Web site if you need to look up your UIC.

5. Document/Batch Number

Enter the batch number. The first test each day will usually be batch 0001.

6. Date Specimen Collected

Enter the date the specimen is collected. This date corresponds to the date on the bottle labels and the Testing Register.
Summary

The back of the DD Form 2624 documents chain of custody. This chain of custody must remain continuously and forensically intact until the specimens are received by the courier/shipping agency, and subsequently the drug testing laboratory. The UPL must fill out this part of the form completely and accurately every time.

Specimens Stored After Collection

Line (1): Complete When Moving Specimens Into Temporary Storage

12a DATE: Enter the date you placed the specimens in temporary storage.
12b RELEASE BY: Print name and sign payroll signature.
12c RECEIVED BY: Enter the location of the storage container, to include building and room number if applicable.
12d PURPOSE OF CHANGE/REMARKS: Enter “Placed in temporary storage.”

Line (2): Complete When Removing Specimens From Temporary Storage

12a DATE: Enter the date you removed the specimens from temporary storage.
12b RELEASE BY: Enter the location of the storage container, to include building and room number if applicable.
12c RECEIVED BY: Print name and sign payroll signature.
12d PURPOSE OF CHANGE/REMARKS: Enter “Removed from temporary storage.”

Repeat the steps for line 1 and line 2 on the next lines down if you move specimens in and out of temporary storage more than once.

Specimens Shipped After Collection

Line (1): Complete When Ready To Ship Specimens

12a DATE: Enter the date you mailed the specimens.
12b RELEASED BY: Print name and sign payroll signature.
12c RECEIVED BY: Enter the method of mail transport (i.e., United States Postal Service (USPS), UPS, FedEx, etc.).
12d PURPOSE OF CHANGE/REMARKS: Enter “Specimens mailed to FTDTL by [mail method].”

Commander Baker says:

Make sure the form is printed head-to-head on one sheet of paper.
Testing Codes

Summary

The Army uses testing codes to categorize the purposes for ordering urinalysis testing of Soldiers. When you prepare documentation for urinalysis testing, you will use these codes to identify the purpose of the test. Only one code at a time is used per set of urinalysis documentation.

As a UPL, you must know all of the urinalysis testing codes and use them accurately. Using an incorrect testing code can limit actions that the Commander can take.

Remember that the urinalysis test is material evidence in a court of law.

Commanders may conduct alcohol testing for the same reasons as they do drug testing.

There are nine testing codes in three groups: Inspection, Commander-Directed, and Other.

<table>
<thead>
<tr>
<th>Inspection</th>
<th>IU</th>
<th>IO</th>
</tr>
</thead>
<tbody>
<tr>
<td>IR - Inspection Random</td>
<td>IU - Inspection Unit</td>
<td>IO - Inspection Other</td>
</tr>
<tr>
<td><strong>Purpose</strong></td>
<td>Testing 100 percent of your Unit, also known as a “Unit Sweep.”</td>
<td>Testing performed in accordance with a Commander's policy memorandum or Unit SOP.</td>
</tr>
<tr>
<td>Randomly selecting a percentage of your Unit for urinalysis testing without targeting specific Soldiers. You will use the IR code most often, since you should test 4 percent of your Unit weekly to maximize Smart Testing.</td>
<td>Commanders should not conduct these types of tests routinely and should not use a Unit Sweep to target any individuals or groups on suspicion alone. The UPL should remain prepared to conduct an IU test with no notice.</td>
<td>Commanders should not use IO testing to target any individuals or groups on suspicion alone.</td>
</tr>
<tr>
<td>Example</td>
<td>The Commander orders you to test 10% of the Soldiers in the Unit.</td>
<td><strong>Example</strong></td>
</tr>
<tr>
<td>NOTE: Your Unit may use different percentages for sampling.</td>
<td>Example</td>
<td>Example</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

Letter of the Law: The Limited Use Policy does not apply to positive results from IR tests on Soldiers already enrolled in ASAP. Letter of the Law: The Limited Use Policy does not apply to positive results from IU tests on Soldiers already enrolled in ASAP. Letter of the Law: The Limited Use Policy does not apply to positive results from IO tests on Soldiers already enrolled in ASAP.
## Testing Codes

### Commander-Directed

<table>
<thead>
<tr>
<th>PO</th>
<th>CO</th>
<th>RO</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Probable Cause</strong></td>
<td><strong>Command Direct/ Competence for Duty/ Fitness for Duty</strong></td>
<td><strong>Rehabilitation</strong></td>
</tr>
</tbody>
</table>

| **Purpose** | **Testing when the Commander has sufficient evidence to believe that a Soldier has violated the UCMJ by using a controlled substance. The Commander must receive this information within the time frame that the drug can still normally be found in a person’s urine (retention time).**  
**Example** | **Testing when a Soldier’s behavior indicates drug or alcohol abuse, but there is insufficient evidence for PO.**  
**Purpose** | **Testing required as part of a Soldier’s rehabilitation program for drug and alcohol abuse.**  
**Purpose** | **Required testing as part of a Soldier’s rehabilitation program for drug and alcohol abuse.** |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Command Direct</strong></td>
<td><strong>Competence for Duty</strong></td>
<td><strong>Rehabilitation</strong></td>
</tr>
<tr>
<td><strong>Fitness for Duty</strong></td>
<td><strong>Fitness for Duty</strong></td>
<td><strong>Fitness for Duty</strong></td>
</tr>
</tbody>
</table>

| **Example** | **During a routine inspection, the Commander finds hypodermic needles in a Private’s room. The Private has no valid medical reason for possessing the needles. The Commander checks with the SJA before ordering a test. The Probable Cause (PO) code is appropriate because the Commander has reason to believe that the Private has used an illegal substance and that the drug can still be detected in his urine.**  
**Example** | **Over the past month, a Soldier exhibits tardiness and a decline in personal hygiene. He recently displayed several outbursts of unprovoked aggression towards his fellow Soldiers. Prior to this, the Soldier had an exemplary attendance record and got along well with his fellow Soldiers.**  
**Example** | **A Soldier who is enrolled in the ASAP rehabilitation program is participating in testing in order to comply with the requirements of the program.** |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NOTE:</strong> You may encounter other situations for which this code applies.</td>
<td><strong>NOTE:</strong> Results of tests under the CO code are considered Protected Evidence under the Limited Use Policy. That means the results cannot be used as a basis for disciplinary action or characterization of service. The results be used as a basis for administrative action, including separation.</td>
<td><strong>NOTE:</strong> Results of tests under the RO code are considered Protected Evidence under the Limited Use Policy. That means the results cannot be used as a basis for disciplinary action or characterization of service; however, the results may be used as a basis for administrative action, including separation.</td>
</tr>
</tbody>
</table>

**Letter of the Law:**  
Commanders are strongly advised, although not required, to consult with the local SJA prior to ordering a test under PO to determine whether or not they truly have probable cause. If the SJA is not available, the Commander can still proceed; however, Commanders should subsequently seek legal counsel before using the result in any adverse action.  

**Letter of the Law:**  
Results of tests under the CO code are considered Protected Evidence under the Limited Use Policy. That means the results cannot be used as a basis for disciplinary action or characterization of service. The results be used as a basis for administrative action, including separation.  

**Letter of the Law:**  
Results of tests under the RO code are considered Protected Evidence under the Limited Use Policy. That means the results cannot be used as a basis for disciplinary action or characterization of service; however, the results may be used as a basis for administrative action, including separation.
## Testing Codes

### Other

<table>
<thead>
<tr>
<th>AO</th>
<th>Mishap or Safety Inspection</th>
<th>VO</th>
<th>Consent</th>
<th>MO</th>
<th>Medical Examination</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Purpose</strong></td>
<td>Testing when a Soldier is involved in an accident that destroys property or injures personnel.</td>
<td><strong>Purpose</strong></td>
<td>Testing when a Soldier volunteers to provide a sample.</td>
<td><strong>Purpose</strong></td>
<td>Testing on the order of a physician after any examination for a valid medical purpose (for example, emergency treatment, periodic physical examinations, and other MOs as are necessary for diagnostic or treatment purposes in accordance with MRE 312).</td>
</tr>
<tr>
<td><strong>Example</strong></td>
<td>The Commander orders a Soldier tested because the Soldier had an accident on the FOB that totaled a Humvee. In this scenario, the Mishap or Safety Inspection (AO) code is appropriate, because there was an accident that destroyed property.</td>
<td><strong>Example</strong></td>
<td>A Command representative, who suspects a Soldier of having unlawfully used drugs, may request that the Soldier consent to urinalysis after advising the Soldier that he or she may decline to provide the specimen. Where practical, the Command representative should obtain the consent in writing, but this is not required.</td>
<td><strong>Example</strong></td>
<td>A doctor requests that a Soldier undergo urinalysis testing because the Soldier exhibited signs of drug abuse during a sick call visit. In this scenario, the Medical Examination (MO) code is appropriate because a specimen has been ordered to confirm a doctor’s suspicion of substance abuse.</td>
</tr>
<tr>
<td><strong>Letter of the Law:</strong></td>
<td>In accordance with AR 385–40, a specimen may be collected for drug testing from personnel contributing to any Class A, B or C aviation accident or when deemed appropriate by a Commander or physician. Specimens which are collected in compliance with MRE (for example, inspection by Command policy, search, seizure, or consent) may be used for any lawful purpose. However, specimens may also be collected for mishap investigatory purposes only and may not satisfy the requirements of the MRE for admissibility in a court-martial. If specimens do not satisfy the standards of admissibility, these tests will be protected by the Limited Use Policy.</td>
<td><strong>Letter of the Law:</strong></td>
<td>Consent must be totally voluntary. If the Commander were to say, “you either volunteer or I will order you to give a specimen”, then it is NOT a voluntary test. If the Soldier asks “What will happen if I don’t consent?”, then the Soldier may be told that the Commander may order a test anyway. This is still a voluntary test. A refusal to consent by the Soldier does not imply that the Soldier used drugs. The refusal has no bearing on the Soldier’s presumed innocence or guilt. It does not give the Commander probable cause.</td>
<td><strong>Letter of the Law:</strong></td>
<td>Results of tests under the MO code do NOT qualify as Protected Evidence under the Limited Use Policy. That means the testing results may be used as a basis for disciplinary action and characterization of service.</td>
</tr>
</tbody>
</table>
Testing Codes

Other (continued)

<table>
<thead>
<tr>
<th>Rotational Drugs</th>
<th>Steroid Testing</th>
<th>Special Tests</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Purpose</strong></td>
<td><strong>Purpose</strong></td>
<td><strong>Purpose</strong></td>
</tr>
<tr>
<td>To ensure that specimens are tested for a specific drug not normally part of every test at the FTDTL. To order this test, the Commander must complete a memorandum stating the drug for which he or she wants to test. The memorandum must not list Soldiers’ names, only their SSNs.</td>
<td>To test for anabolic steroids and any compound, derivative, or isomer of any such substance. The Commander must complete a memorandum requesting a test for steroids. All steroid testing must be performed on a Probable Cause (PO) test basis. The Soldier will need to provide 60 ml of specimen. Each specimen for steroid testing must be documented on a separate DD Form 2624. Since steroid testing is not done on a regular basis, please contact your DTC or ACSAP for assistance with steroid testing requests.</td>
<td>To test a Soldier for other drugs that the FTDTL does not normally test such as Valium, Rohypnol, mushrooms (psilocybin), or other drugs. The Commander must have probable cause. These types of tests require different paperwork depending on the drug in question, so the UPL should contact the DTC or the ACSAP for more information. Laboratory analysis is performed at the Armed Forces Institute of Pathology (AFIP) in Rockville, MD.</td>
</tr>
<tr>
<td><strong>Example</strong></td>
<td><strong>Example</strong></td>
<td><strong>Example</strong></td>
</tr>
<tr>
<td>A deployed Commander had a rash of oxycodone abuse. The Commander orders a 100 percent Unit test and requests that all samples are tested for oxycodone. The Commander submits a memorandum with each batch of specimens, noting the specific testing request for oxycodone. The UPL: a. Attaches the memo to the DD Form 2624 b. Maintains a file copy</td>
<td>The Commander has probable cause to believe a Soldier in his Unit is abusing steroids. The Commander creates a memorandum requesting a steroid test for the Soldier under suspicion. The memorandum cannot state the Soldier’s name, only his or her SSN. The UPL: a. Attaches the memo to the DD Form 2624 b. Maintains a file Copy The specimen bottle must be completely full (60 mL minimum). Only one bottle per DD Form 2624 is allowed. The specimen will only be tested for steroids and no other drugs. All specimen requests for steroids must be sent to the Fort Meade laboratory. The Fort Meade lab will then send a portion to the UCLA laboratory for steroid testing. It will take 6 –8 weeks to get a result.</td>
<td>Your Commander has Probable Cause that a Soldier is abusing a drug for which the FTDTL does not normally test. Contact the ADCO or DTC before collecting a specimen. A memorandum from the Commander stating why he/she needs this test will accompany the specimen. The memorandum cannot state the Soldier’s name, only his/her SSN. Maintain file copy of memo in your records. May require a different chain of custody form. The UPL should seek assistance from the ACSAP on the correct form to use. May require special collection, handling, and/or shipping procedures.</td>
</tr>
</tbody>
</table>

Letter of the Law:
The provisions of the Limited Use Policy and rules of Protected Evidence apply to special testing for rotational drugs just as they do for other types of test.
## Summary

The Base Area Code is a four-character code that identifies your installation, Command, or deployed areas.

Below are the BACs for deployed areas. If you are NG, USAR, or in garrison, your BAC is available from your supporting ASAP.

## Where to Enter the BAC

There are three places that must contain your Base Area Code:

1. Specimen bottle labels
2. Block 3 of the DD Form 2624
3. Envelope outside shipping box

### BAC List

<table>
<thead>
<tr>
<th>BAC</th>
<th>Location</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>CT01</td>
<td>Afghanistan (all areas outside Kabul)</td>
<td><a href="mailto:bacm.af.ct01@us.army.mil">bacm.af.ct01@us.army.mil</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>DSN: 318-431-4101</td>
</tr>
<tr>
<td>CT02</td>
<td>Afghanistan (Kabul area)</td>
<td><a href="mailto:bacm.af.ct02@us.army.mil">bacm.af.ct02@us.army.mil</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>DSN: 318-237-2561</td>
</tr>
<tr>
<td>CT03</td>
<td>Kuwait (excluding units subordinate to MNC-1)</td>
<td><a href="mailto:bacm.ku.ct03@us.army.mil">bacm.ku.ct03@us.army.mil</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>DSN: 318-430-6506</td>
</tr>
<tr>
<td>CT05</td>
<td>Multinational Corps Iraq (and all subordinate units except as listed in this paragraph)</td>
<td><a href="mailto:bacm.iz.ct05@us.army.mil">bacm.iz.ct05@us.army.mil</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>VOIP: 243-4257 • DSN: 318-822-8191</td>
</tr>
<tr>
<td>CT06</td>
<td>Multinational Division Baghdad (Iraq)</td>
<td><a href="mailto:bacm.iz.ct06@us.army.mil">bacm.iz.ct06@us.army.mil</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>VOIP: 242-7558 • DSN: 318-847-2651</td>
</tr>
<tr>
<td>CT08</td>
<td>Multinational Division North (Iraq)</td>
<td><a href="mailto:bacm.iz.ct08@us.army.mil">bacm.iz.ct08@us.army.mil</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>VOIP: 778-0122 • DSN: 318-849-0266</td>
</tr>
<tr>
<td>CT09</td>
<td>Corps Support Command (Iraq) (all units reporting to the Corps Support Command)</td>
<td><a href="mailto:bacm.iz.ct09@us.army.mil">bacm.iz.ct09@us.army.mil</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>DSN: 318-433-2505</td>
</tr>
<tr>
<td>CT10</td>
<td>Qatar</td>
<td><a href="mailto:bacm.qa.ct10@us.army.mil">bacm.qa.ct10@us.army.mil</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>DSN: 318-432-2889</td>
</tr>
<tr>
<td>CT11</td>
<td>Multinational Division Central</td>
<td><a href="mailto:bacm.iz.ct11@us.army.mil">bacm.iz.ct11@us.army.mil</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>VOIP: 647-0017 • DSN: 318-822-7399</td>
</tr>
</tbody>
</table>

Commander Baker says:

“Always know your Base Area Code.”
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Summary

Random selection is the key to Smart Testing and any testing you conduct needs to meet the requirements for unpredictability. It is important to remember that all personnel selected will be tested; even if the number selected exceeds the recommended minimum testing rate. Do not terminate testing when a certain number of specimens are collected, but collect specimens from all Soldiers who were selected. Excusing Soldiers or getting volunteers can invalidate the randomization and thus invalidate the test results.

It is imperative that the UPL and the Commander ensure that any random selection test is truly random, or you risk a positive test is dismissed from court.

The DOD drug testing software programs DTP and DTP Lite are the Army’s preferred methods of selecting Soldiers for testing. If DTP software is unavailable, use one of these approved manual random selection methods.

Manual Random Selection Based on Name:

1. Create a deck of cards by writing every Soldier’s name on a 3-by-5 index card. Shuffle the cards and draw the names from the deck.

NOTE: Prior to the selection process, the UPL and a senior NCO or above must verify all of the name cards against the alpha roster to ensure the deck represents the entire Unit.

2. The cards are then given to the Commander or First Sergeant and shuffled in the presence of the entire Unit in formation.

3. After shuffling, the Commander or First Sergeant passes among the ranks and direct individuals to select a card.

4. Personnel whose names are selected are required to report to the collection area for urinalysis testing.

NOTE: Manual Random Selection based on names works best with Units consisting of 100 or fewer Soldiers.

Manual Random Selection Based on SSN:

Roll a 10-sided die. Personnel whose SSN ends with the number rolled will be tested.

Write the numbers 0-9 on scraps of paper and drop them into a hat.
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Overview

Be sure to have the most current copy of the Unit alpha roster saved in a Microsoft Excel file on your computer. Refer to the UPL Handbook for instructions on locating and saving the Unit alpha roster.

There are seven basic steps to using DTP Lite:

1. Start the DTP Lite program.
2. Identify the correct roster file to use.
3. Format the roster file.
4. Choose testing parameters.
5. Select members for testing.
6. Complete the print products screen.
7. Preview and print documentation.

Using DTP Lite

Step 1: Start the DTP Lite Program

Perform these steps to start DTP Lite:

- Locate the Dtplite.exe file.
- Double-click to open the DTP Lite program.

A title window will appear briefly and close automatically. The Identify Roster File screen appears.

Every screen in DTP Lite has three main areas:

- Screen Title/Instructions
- Control
- Work Area

The contents of the Work Area change as you move from one screen to the next.
Step 2: Identify the Correct Roster File to Use

The Work Area of the *Identify Roster File* screen has three components:

- The File Location Box
- The Directory Pane
- The Document List

Perform these steps to complete the *Identify Roster File* screen:

- Locate the Unit Roster file in the Document List
- Click on the file name.

If you do not see the file on the list, search through the Directory Pane to locate it.

- Click “Next” to import the file into DTP Lite and view the *Format Roster* screen.
Step 3: Format the Roster

The Format Roster screen shows all of the raw roster data for your Unit. You must identify which data should be imported into DTP Lite. Name, SSN, Gender, and Rank are required.

Perform these steps to identify which data to import into DTP Lite and complete the Format Roster screen:

- Click on the temporary “Do Not Import” heading over the first column on the left. The Column Header drop-down list appears.
- Select the name of the column heading that matches the data in the column, starting with the first column on the left.
- If both the first and last name are in the same column in your original roster file, select Last Name for the column heading name. DTP Lite only requires the Last Name entry.
- Continue to match the column heading to the data for each of the remaining columns until the Name, SSN, Gender and Rank columns are each labeled.

When you have finished, if the Next button is not active, you have left out a required data field. Check the error message in the lower left corner to see what's missing.

- If you want to include the Organization information, click on the column heading and select Organization. This field is optional.
- If you choose to import the Organization data, the program will print out one separate form for each different organization. If you want to exclude organization from your printout, leave the default “Do Not Import” heading.
- Determine whether it is necessary to click the “Ignore Header” checkbox.
- Click “Next” to continue to the Choose Testing Parameters screen.

Familiarize yourself with these elements of the Format Roster File screen:

- File Type
  If your roster was formatted in something other than MS Excel, you must click on the File Type list to select the correct file type.

- Temporary Column Headings
  The columns all have the same temporary heading “Do Not Import”. You must change these headings as described below to complete this screen.

- Original Roster File Column Headings
  The first row under the DTP Lite column headings shows the original roster file column headings. See instructions below for the Ignore Header checkbox.

- Soldier Data
  You should see the following types of Soldier data in the columns: Name, SSN, Gender, Rank, and Organization.

- Ignore Header checkbox
  If your original roster file has column headings, such as Name and SSN, you must click this checkbox so that the headings don’t appear in your selection. Do not remove the column headings if Soldier data appears in the first row.
Step 4: Choose Testing Parameters

The Choose Testing Parameters screen shows all of the formatted roster data for your Unit and contains the entire test parameters that you need to input. The roster data appears in the list on the left. The testing parameters appear on the right.

Perform the following steps to complete the Choose Testing Parameters screen:

- Click on the “Location Code” list and select the location code for your Unit’s current location.
- Click on the “Testing Premise” list and select the appropriate testing premise (Test Basis Code). The default testing premise is Random Testing (IR).
- For Random Selection (IR) tests only, choose a Selection Method. If you select Probability, DTP will select approximately the percentage of the Unit in the Testing Probability field. The actual number of participants will automatically adjust from test to test. If you select Total Number, DTP will select the number of Soldiers that you specify in the Testing Count field. This is the recommended selection method.
- For IR tests only, enter the desired number in the Testing Count or Testing Probability field. The default number for both methods is 10. Either clear the field and enter a new value, or continue to accept the default entry. Be careful not to accidentally add a “0” to the default 10.
- For IR and IU tests only, click Finish to continue. A Confirm dialog box appears. Click No to modify the parameters or click Yes to continue to the Print Products screen.
- Click Next if you selected a testing premise other than IR or IU to continue to the Select Members for Testing screen.
Step 5: Select Members for Testing (Only for Tests Other Than IR and IU)

When you select a testing premise other than Random Testing (IR) or Inspection Unit (IU) and click Next in step four, the Select Members for Testing screen appears.

Familiarize yourself with the Select Members for Testing screen. The full list of Soldiers in your Unit appears on the left. The Soldiers you select to be tested appear on the right. The controls for selecting or deselecting Soldiers are in the center of the screen.

Perform the following steps to select a particular individual for testing:

- Click on the Soldier’s name on the “Available” list on the left.
- Click the upper red single arrow in the center.

The selected Soldier’s name appears in the Selected list on the right. Repeat this process to select additional individual Soldiers.

Another way to select multiple individual Soldiers is to press and hold the Ctrl key on the keyboard after selecting the first name, click the remaining names, and then click the upper red single arrow to complete the selection.

Perform the following steps to remove a particular individual from the testing selection:

- Click on the Soldier’s name on the Selected list on the right.
- Click on the lower red single arrow in the center.

The deselected Soldier’s name disappears from the list on the right.

Perform the following step to select all of the members of your Unit for a Unit Sweep:

- Click on the upper red double arrow in the center.

The names of all Soldiers in the roster file appear in the “Selected” list on the right.

Perform the following steps to remove all members from a selection

- Click on the lower red double arrow in the center.

Perform the following steps to complete the Select Members for Testing screen:

- Click Finish. A confirm dialog box appears.

- Click Yes in the dialog box when you are ready to create your test sample.
Step 6: Input Data on the Print Products Screen

The Print Products screen shows the list of Soldiers selected for testing and contains all of the print settings for your testing documentation. A list of Soldiers selected for testing appears on the left. The testing data and items to print appear on the right.

Perform the following steps to complete the Print Products screen:

- Click in the “BAC” box and carefully enter your Base Area Code. Refer to the ASAP Web site if you don’t know your BAC.
  
  It is critical that you enter the correct BAC.

- Click in the “UIC” box and carefully enter your Unit Identification Code. The “W” is already entered for you. Refer to the ASAP Web site if you don’t know your UIC.

- Click on the DD Form 2624 Block 1 box and carefully enter the Unit designation, complete address, and phone number for the Unit conducting the collection.
  
  You can only enter three lines of information and only a portion of your actual entries will be visible.

- Click on the DD Form 2624 Block 2 box and carefully enter the contact information for your installation ASAP office (Army Units in garrison), state JSAPC/O (NG Units in garrison), RSC ADCO (USAR Units in garrison), or BACM information (all deployed Units).
  
  You can only enter three lines of information and only a portion of your actual entries will be visible.

- Click on the Collection Date to open a calendar. Select the date that the test will occur. The default setting is the current date, but you can change it to print your documents a day or two ahead of time.

- Click in the “Starting Batch” box if you wish to change the batch number. Batch numbers start at 0001 for each day.
  
  The program will automatically calculate the batch numbers if your sample is larger than twelve.

If you select personnel for one test, and then select personnel for an additional test later in the same day, be sure to change the batch number before printing products for the second test.
If you want to print separate sets of documents for males and females, click in the Group By Gender checkbox.

This is not required, but having separate lists for men and women can make it easier to stay organized and run testing efficiently, especially when conducting a Unit Sweep or testing a large number of Soldiers. With two lists, it’s easier to locate names as Soldiers check in.

Click the check boxes under Available Printouts to select required products for print.

Required products to print are:
- Testing Register
- DD Form 2624
- DD Form 2624 (Back Side)
- Bottle Labels

Click the check boxes under Available Printouts to select optional products to print, if desired.

These documents help simplify contacting and tracking Soldiers for testing. They are only available DTP-Full Version software.

Optional products to print are:
- Personnel to Be Tested (Notification Copy)
- Personnel to Be Tested (Working Copy)

Click on the “Print” button and view the Print Preview screen.
Step 7: Preview and Print Documentation

When the Print Preview screen first opens, it shows the first document that will be printed.

- Typically, the first document will be the Testing Register.

Complete the following steps to preview and print documentation from the Print Preview screen:

- Click the Printer icon in the upper left corner of the screen to open the Print Dialog box.
- Verify that the correct printer name is selected. If it is not correct, click the name box to open a drop-down list and select the correct printer.
- Click "OK" to send the document to the printer.
- Be sure that you treat any printed papers as FOUO. Shred them or use a burn bag to dispose of them.
- Click "Close" at the top of the screen.
- The Print Preview screen will then show the next document to be printed.

- Repeat Print Preview screen steps above to print all documents. Typically, the remaining documents will print in this order:
  - DD Form 2624
  - DD Form 2624 (Back Side)

  When printing the DD Form 2624, it is imperative that you print both sides of the form on one sheet of paper, with the top in the same position on both sides.

- Bottle Labels

  Before printing bottle labels, a Starting Label Position dialog box asks you for a location at which to print the first label. The default location is "1". Keep in mind that there are 10 labels on a sheet. Change the default position if you are starting with a partially used sheet. Enter the starting page position desired and click "OK" to print the labels.

- Click “Close” on the Print Preview screen when all products have printed properly.
- Click “Close” on the Print Products screen. A Confirm dialog box appears.

- Click “Yes” to close DTP Lite or “No” to return to the Print Products screen.

REMEMBER: If you close the program, all information you have entered to this point will be lost and you will not be able to print any other forms.
While using DTP Lite, you may encounter screen or error messages that are not covered in the operating instructions. This troubleshooting guide will help you overcome these errors and allow you to continue to use DTP Lite to generate testing documents.

<table>
<thead>
<tr>
<th>Problem Identify Roster File Screen</th>
<th>Likely Cause</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>DTP Lite does not display a Unit alpha roster file upon startup.</td>
<td>The Unit alpha roster file is not in the same folder as the DTP Lite program.</td>
<td>Navigate to the DTP Lite directory using the left pane of Windows Explorer.</td>
</tr>
<tr>
<td>You cannot locate a Unit alpha roster file to use.</td>
<td>The alpha roster file is not on the computer.</td>
<td>Contact the Unit personnel section to obtain an electronic copy of the Unit alpha roster.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Problem Format Roster File Screen</th>
<th>Likely Cause</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>An error message or unrecognizable text appears instead of Soldier data.</td>
<td>You have selected an incorrect file type in the “File Type” list.</td>
<td>Choose other file types in the “File Type” list until Soldier data appears in the columns in the center of the screen. MS Excel is the most common Roster File type.</td>
</tr>
<tr>
<td>The Next button is unavailable after entering the required information.</td>
<td>You have entered only part of the required information.</td>
<td>Make sure you have correctly identified column headings for Last Name, SSN, Gender, and Rank.</td>
</tr>
<tr>
<td>The Last Name and First Name appear in the same column of the Roster.</td>
<td>Both first and last names are in a single column in the original Roster spreadsheet.</td>
<td>The individual’s last name probably appears with a comma preceding the first name in the original Roster file. Label the column as Last Name using the drop-down menu.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Problem Choose Testing Parameters Screen</th>
<th>Likely Cause</th>
<th>Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>An entry in the Roster Data lists a Soldier named “Name” with an SSN of “SSN”.</td>
<td>Original roster file headings were not removed on the Format Roster screen.</td>
<td>Click “Previous” to return to the Format Roster screen. Check the first line in Soldier data to see if heading information appears instead of an actual name, SSN, etc. Click the “Ignore Header” check box, then click “Next” to continue.</td>
</tr>
<tr>
<td>Soldier data appears in incorrect columns (for example, ranks where SSNs should be).</td>
<td>Incorrect column labels were applied on the Format Roster screen.</td>
<td>Click “Previous” to return to the Format Roster screen. Change column headings to match the type of information in the Soldier data area. Click “Next” to continue.</td>
</tr>
<tr>
<td>The “Next” or “Finish” button is unavailable after identifying the required information in the Choose Testing Parameters screen.</td>
<td>A Location Code has not been entered.</td>
<td>Click the arrow next to the “Location Code” field to access the drop-down menu. Select the appropriate Location Code.</td>
</tr>
<tr>
<td>DTP Lite terminates despite user input to continue.</td>
<td>This is a malfunction in the program that cannot be fixed with user interaction.</td>
<td>Restart the program and input information for the test again.</td>
</tr>
</tbody>
</table>
# Print Products Screen

<table>
<thead>
<tr>
<th>Necessary materials (Testing Register, Bottle Labels, DD Form 2626) do not show up on the Print Preview screen.</th>
<th>You did not select these products on the Print Products screen.</th>
<th>Close the Print Preview screen. Cancel printing. Select the documents that you need from the Print Products screen.</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Base Area Code (BAC), Unit Identification Code (UIC), and/or Block 1 or 2 of the DD Form 2624 are blank on the printed form.</td>
<td>You did not input information for these fields on the Print Products screen.</td>
<td>Close the Print Preview screen. Cancel printing. Make sure you have entered the BAC, UIC, Block 1 and Block 2 information on the Print Products screen.</td>
</tr>
</tbody>
</table>
Summary

The Observer briefing should occur prior to the Commander briefing. The UPL performs a verbal briefing, then ensures that each Observer reads and signs the Memorandum for Observers.

The UPL verbally briefs the Observers on the collection process and demonstrates how to perform direct observation of both males and females. Follow the Observer briefing script in the UPL handbook.

The purpose of the Observer briefing is to educate Observers on the crucial role they play during urinalysis collection, the reasons they were selected to serve as an Observer, and the UCMJ actions that they could face if they don’t follow protocol.

Letter of the Law

Observers must acknowledge that they understand their duties and must comply with them fully. Failing to do so could subject them to the following UCMJ articles:

★ 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 by signing the Testing Register and the DD Form 2624, 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.

Required Materials for Briefing

★ Observer Briefing script
★ Testing station and latrine or video/photographs for demonstrating Observer duties
★ Memorandum for Observers—one copy for each Observer

Observer Briefing Procedure

1. Assemble all Observers in the testing area.
2. Read the Observer briefing script aloud.
3. Respond to questions.
4. Perform a demonstration of all Observer duties.
5. Hand each Observer a copy of the Memorandum for Observers.
6. Instruct each Observer to read and sign the memorandum.
7. Respond to questions.
8. Collect all signed copies of the Memorandum for Observers before collection begins.

Commander Baker says:

Observers should fulfill their duties with maturity and integrity. It’s their job to preserve the dignity of the Soldiers that they observe.

Verbal Briefing (Must Read Aloud to Soldiers)

Observers should participate in the Observer Briefing before every drug test. During this briefing, you will learn about your specific duties—including risks, hazards, and legal implications—and you must sign the Observer Memorandum.

You are here to perform a critical portion of the procedures for urine collection as part of the Drug Testing Program. This duty is not attractive, but is one that comes with enormous responsibility. The best Observers turn the sensitive, unwanted and humiliating task of providing a urine specimen into a professional procedure that ensures the integrity of the specimen and helps the donor to be at ease with the process.

This brief training covers the specifics of how to properly observe Soldiers providing a urine sample, and includes explicit terminology for male and female anatomy and bodily functions.

You must meet these requirements to serve as an Observer:
Observer Briefing

★ Have a rank of E5 or above
★ Be the same gender as Soldiers being observed
★ Have sufficient maturity and integrity to preserve the dignity of the Soldier
★ Not be enrolled currently within the ASAP Rehab program or under investigation currently for any substance abuse related offense

Your primary responsibilities are to maintain eye contact with the specimen bottle during the ENTIRE collection process, and to report any unusual circumstances to the UPL. You must properly complete all collection steps as listed in the Observer Memorandum and guide each Soldier through all collection steps to ensure the integrity of every urine specimen.

The risks and hazards of urine collection include humiliation, harassment, ethical dilemmas (such as bribing), attempts to alter the specimen (through adulteration or tampering), and possible legal consequences if you don’t perform your duties correctly.

If it is found that a specimen was altered in any way while under your control as an Observer, you may face legal action under UCMJ Article 92, Article 107, and/or Article 134.

You must follow these specific procedures—without exception—when observing urine sample collection from male Soldiers:

★ Stand next to the Soldier at a urinal or toilet (urinal is preferred).
★ Ensure that you can see the end of the donor’s penis (if the Soldier is not circumcised, ensure that he pulls his foreskin back to allow direct view).
★ Maintain constant line of sight with the specimen bottle and cap from the moment the UPL hands the bottle to the Soldier until the moment that the Soldier hands the bottle back to the UPL. You must NOT touch the bottle or cap at any time.

You must follow these specific procedures—without exception—when observing urine sample collection from female Soldiers:

★ Do not allow the Soldier to sit down on the toilet seat—she must squat over the toilet.
★ Ensure the Soldier keeps her upper body straight—she cannot bend over to block view with body, hair, or clothing.

★ Ensure that the Soldier holds the collection cup or specimen bottle in front of her body and above the toilet rim.
★ Position yourself as necessary in front of the Soldier to maintain a direct view of urine leaving the Soldier’s body and entering the collection cup or specimen bottle.
★ If the Soldier is using the collection cup, directly observe the Soldier pouring urine from the cup into the specimen bottle.
★ Maintain constant line of sight with the specimen bottle and cap from the moment the UPL hands the bottle to the Soldier until the moment that the Soldier hands the bottle back to the UPL. You must NOT touch the bottle or cap at any time.

Do NOT allow any Soldier to provide a sample out of your direct view (such as behind a closed door) for any reason. You may allow the Soldier to have privacy:

★ ONLY AFTER the Soldier has provided a sample, AND
★ ONLY IF both the Observer and Soldier can maintain eye contact with the filled specimen bottle at all times.

You may face these challenges and special circumstances during the collection process:

★ Donor shyness / mental block, or stalling. There are NO valid excuses to avoid providing a sample.
★ Insufficient specimen. The UPL determines whether the specimen amount is sufficient. If instructed to do so, you must destroy the specimen bottle according to proper procedure.
★ The urine sample is an unusual color or there is a foreign object in the sample. Report this to the UPL when returning to the testing station.
★ The Soldier attempts to alter or tamper with the specimen, or to bribe you. Report this to the UPL when returning to the testing station.
★ The Soldier has a bowel movement. Follow procedure and then allow the Soldier to have privacy if possible under the closed door exception discussed earlier.
★ The Soldier is menstruating or pregnant, is wearing a bodysuit or a thong, or has body piercings. In these cases, collect as normal and refrain from making comments.

Do you have any questions?

You must now read, understand, and sign the Observer Memorandum before we begin the collection process with Soldiers.
Summary

All briefings occur before urinalysis collection begins. The Commander briefing occurs after the Observer briefing, but before the UPL Unit briefing.

The purpose of the Commander briefing is to review with Soldiers the reason for urinalysis testing, the drugs for which the lab tests, and the consequences facing Soldiers who fail to comply. This constitutes a legal order for the Soldiers to provide a specimen of their urine.

Intentional failure to provide a specimen absent a verified medical condition is a violation of a lawful order and may subject the Soldier to punishment under the UCMJ or other adverse action.

Letter of the Law

If a Soldier does not provide a urine sample, or if he or she submits a sample that is found to be adulterated, they may be subject to the following UCMJ articles:

★ ARTICLE 9: Willfully disobeying a lawful order of his or her superior Commander by not providing a urine sample as directed.
★ ARTICLE 107: Making a false official statement by signing the Testing Register, acknowledging the submission of a sample as only urine.

Verbal Briefing (Must Read Aloud to Soldiers)

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 (which includes methamphetamine, MDMA (ecstasy), MDA, and MDEA), heroin, plus up to three other drugs. The additional drug(s) will be chosen by the lab on a rotational basis from a group that includes Opiates (which includes morphine and codeine), PCP and synthetic opiates (Oxycodone/oxymorphone known commonly as OxyContin).

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.

Briefings Sequence

Observer   Commander   Unit

Commander Baker says:

There are no valid excuses for not participating in urinalysis testing.
Summary

All briefings occur before urinalysis collection begins. The Unit briefing occurs immediately after the Commander briefing.

The purpose of the UPL Unit brief is to review the procedures for the test and to inform Soldiers who the Observers will be.

During testing procedures, Soldiers are responsible to do the following:

★ Verify personal information on all the urinalysis documentation.
★ Provide a urine specimen in line of sight of the Observer.
★ Maintain ownership of their own specimen bottle from check-in to check-out.

Notes

If a Soldier to be tested arrives after the Commander and UPL briefings, the UPL or Holding area NCO/Officer will brief the Soldier.

There are no valid excuses for not participating in urinalysis testing. When a Soldier tries to use an excuse you have never heard before, use good judgment.

Letter of the Law

The UPL must execute urinalysis testing procedures properly every time or may face disciplinary action according to the following UCMJ articles:

★ ARTICLE 92: Being derelict in the performance of one's duties in allowing a non-urine or adulterated sample to be submitted for testing.
★ ARTICLE 134: Wrongful interference with an adverse administrative proceeding.

See reverse for UPL Unit briefing text.

Commander Baker says:

Cover each point in this briefing carefully and take time to answer all questions Soldiers have before beginning to test.
**Verbal Briefing**  
(**Must Read Aloud to Soldiers**)  

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 watched it be 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 Testing Register; verify SSN on DD Form 2624; and verify the date and your SSN on the bottle label.**

- **Wash your hands with only water upon entering the latrine.**

- **Provide a urine specimen under direct observation.**

- **Sign your payroll signature on the Testing Register 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.
Specimen Packing

Preparation
1. Complete Chain of Custody documentation as required.
2. Make suspense copies of DD Forms 2624 and Certificates of Correction for your files.
3. Enclose the original DD Form 2624 and original Certificates of Correction in a plain, white, unsealed business envelope.

Packing Steps
1. Place one absorbent pad in the collection box on top of the specimen bottles.
2. Seal all open sides, edges and flaps of the collection box with mailing tape.
3. Sign your payroll signature from corner to corner across the tape on the top and bottom of the collection box.
4. Write your Base Area Code in large letters on the outside of the white business envelope.
5. Secure the business envelope to the outside of the collection box with mailing tape. Continue immediately with specimen shipment.

Materials for Packaging
- Absorbent Pads
- Mailing Tape
- White Business Envelope
- Marker (Black), or Ink Pen (Blue or Black)

Notes
Allow an official postal clerk to perform a visual inspection, if required (deployed areas only).

Only sealed packages should be released to the mail handler for mailing.

Do not use 100 mile an hour tape (duct tape) or Scotch tape.

Do not include Testing Registers.

Do not seal flap of the business envelope containing the DD Form 2624.

Do not write your initials or take other shortcuts when signing the outside of the sealed collection box.

Key Points To Remember:
1. Complete chain of custody documentation by filling out the DD Form 2624 to indicate specimen removal from storage.
2. Do not use Scotch tape or duct tape when sealing the collection box.
3. Consult the UPL Handbook if you don’t remember all of the packing steps.

Commander Baker says:
Do not allow the postal clerk to touch the collection box or specimens during an inspection.
This page intentionally left blank.
Specimen Shipment

Chain of Custody

The person who ships specimens to the FTDTL makes the final entry on the back of the DD Form 2624 to complete chain of custody immediately before shipment. In deployed areas, the UPL completes the chain of custody form.

When ready to ship specimens to the FTDTL, complete the following sections of the DD Form 2624 as noted:

1. Enter the current date in block 12a.
2. Print your name and sign your payroll signature in block 12b.
3. Enter method of mail transport (for example, USPS) in block 12c.
4. Enter purpose of change (for example, “Specimens shipped to FTDTL by USPS”) in block 12d.

Materials for Shipment

To ship specimens to the FTDTL, you will need the following supplies:

- Photocopier
- Leak-proof bag
- Outer shipping box
- Label
- Mailing tape
- Black marker
- Other materials as mandated by local carrier

Approved Carriers

Use one of these transportation modes to ship specimens to the FTDTL:

1. Registered mail
2. US Postal Service by First Class Mail
3. Hand-carried by surface transportation
4. Military aircraft transportation system
5. US flag commercial air freight air express and air freight provider
6. As a last resort, if none of the above is available, ship by foreign flag air carrier.

Shipment Procedure

1. Complete chain of custody documentation as required, photocopy the DD Form 2624 and return it to the white business envelope attached to the outside of the specimen collection box.
   - Do not seal the envelope
   - Do not tuck the flap inside the envelope
2. Place the collection box inside the leak-proof bag.
3. Place the bagged specimen collection box in an outer shipping box according to carrier requirements and local policy. There are no specific taping instructions for the larger box.
4. Write the appropriate FTDTL mailing address on the shipping box.
5. Handwrite or affix a label that says “Diagnostic Specimens” near the mailing address.
6. Hand the shipping box directly to a staff member of the carrier at the point of shipment.
# Specimen Shipment

## FTDTL Addresses

<table>
<thead>
<tr>
<th>If you collected a specimen in</th>
<th>Ship the specimen to this FTDTL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Middle East (Iraq, Kuwait, Afghanistan)</td>
<td>Tripler AMC FTDTL 1 Jarrett White Road BLDG 40 Attn: MCHK-FT Tripler AMC, HI 96859-5000</td>
</tr>
<tr>
<td>US–West of the Mississippi</td>
<td></td>
</tr>
<tr>
<td>Fort Bragg</td>
<td></td>
</tr>
<tr>
<td>Pacific</td>
<td></td>
</tr>
<tr>
<td>US–East of the Mississippi (except Fort Bragg, Fort Benning, and Redstone Arsenal)</td>
<td>Commander Attn: Processing Section Forensic Toxicology Drug Testing Laboratory 2490 Wilson Street Fort Meade, MD 20755-5235</td>
</tr>
<tr>
<td>Europe</td>
<td></td>
</tr>
<tr>
<td>Any location, for steroid testing</td>
<td>Jacksonville Navy Drug Screening Laboratory Regular Mail Other Carriers PO Box 113 Jacksonville, FL 33212-0113 Building H2033 Adams Avenue Naval Air Station Jacksonville, FL 33212-0113</td>
</tr>
<tr>
<td>Fort Benning and Redstone Arsenal</td>
<td></td>
</tr>
<tr>
<td>Any location, for special tests (consult with the ASAP before collecting) unless otherwise directed by the ASAP</td>
<td>Armed Forces Institute Of Pathology Armed Forces Medical Examiner Services Attn: Division Of Forensic Toxicology Building 54 6825 16th Street, NW Washington, DC 20306-6000</td>
</tr>
</tbody>
</table>

---

**Commander Baker says:**

*Always ensure you accurately complete Chain of Custody documentation before shipment.*

---

**Key Points to Remember**

1. Be sure to place all of the collection boxes into leak proof bags.
2. It is imperative that you adhere to the Chain of Custody when shipping.
## Specimen Shipment

### FTDTL Addresses

<table>
<thead>
<tr>
<th>Army Reserve</th>
<th>Ship the specimen to this FTDTL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>If you collected a specimen while</strong></td>
<td><strong>Not Deployed (EXCEPT Hawaii)</strong> Commander</td>
</tr>
<tr>
<td></td>
<td>Attn: Processing Section</td>
</tr>
<tr>
<td></td>
<td>Forensic Toxicology Drug Testing Laboratory</td>
</tr>
<tr>
<td></td>
<td>2490 Wilson Street</td>
</tr>
<tr>
<td></td>
<td>Fort Meade, MD 20755-5235</td>
</tr>
<tr>
<td></td>
<td>Any location, for steroid testing</td>
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<tr>
<td></td>
<td>Attn: Processing Section</td>
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<td>Forensic Toxicology Drug Testing Laboratory</td>
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</tr>
<tr>
<td></td>
<td>Fort Meade, MD 20755-5235</td>
</tr>
<tr>
<td></td>
<td>Deployed or located in Hawaii</td>
</tr>
<tr>
<td></td>
<td>Tripler AMC FTDTL</td>
</tr>
<tr>
<td></td>
<td>1 Jarrett White Road BLDG 40</td>
</tr>
<tr>
<td></td>
<td>Attn: MCHK-FT</td>
</tr>
<tr>
<td></td>
<td>Tripler AMC, HI 96859-5000</td>
</tr>
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<td>Building 54</td>
</tr>
<tr>
<td></td>
<td>6825 16th Street, NW</td>
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<tr>
<td></td>
<td>Washington, DC 20306-6000</td>
</tr>
</tbody>
</table>

### National Guard

<table>
<thead>
<tr>
<th>National Guard</th>
<th>Ship the specimen to this FTDTL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>If you collected a specimen while</strong></td>
<td><strong>Not Deployed</strong> (except Hawaii) Brooks Laboratory</td>
</tr>
<tr>
<td></td>
<td>2730 Louis Bauer Drive</td>
</tr>
<tr>
<td></td>
<td>Building 930</td>
</tr>
<tr>
<td></td>
<td>Brooks City, TX 78235</td>
</tr>
<tr>
<td></td>
<td>Deployed or located in Hawaii</td>
</tr>
<tr>
<td></td>
<td>Tripler AMC FTDTL</td>
</tr>
<tr>
<td></td>
<td>1 Jarrett White Road BLDG 40</td>
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<td></td>
<td>Tripler AMC, HI 96859-5000</td>
</tr>
<tr>
<td></td>
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<td></td>
<td>Commander</td>
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</table>
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## Urinalysis Testing Process

<table>
<thead>
<tr>
<th></th>
<th>PRE-COLLECTION</th>
<th>COLLECTION</th>
<th>POST-COLLECTION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>COMMANDER</strong></td>
<td>★ Order Test</td>
<td>★ Remain Available</td>
<td></td>
</tr>
<tr>
<td></td>
<td>★ Select Soldiers</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>★ Notify Soldiers</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>★ Brief Unit</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>UPL</strong></td>
<td>★ Obtain Supplies</td>
<td>★ Check-In</td>
<td>★ Quality Control</td>
</tr>
<tr>
<td></td>
<td>★ Testing Area Setup</td>
<td>★ Check-Out</td>
<td>★ Testing Area Breakdown</td>
</tr>
<tr>
<td></td>
<td>★ Brief Observers and Unit</td>
<td>★ Maintain Chain of Custody and Line of Sight</td>
<td>★ Packaging</td>
</tr>
<tr>
<td></td>
<td>★ Check-In</td>
<td>★ Maintain Line of Sight</td>
<td>★ Shipping</td>
</tr>
<tr>
<td></td>
<td>★ Check-Out</td>
<td>★ Sign Unit Ledger</td>
<td></td>
</tr>
<tr>
<td><strong>OBSERVER</strong></td>
<td>★ Attend Observers Briefing</td>
<td>★ Urine Collection</td>
<td></td>
</tr>
<tr>
<td></td>
<td>★ Sign Memorandum for Observers</td>
<td>★ Maintain Line of Sight</td>
<td></td>
</tr>
<tr>
<td><strong>SOLDIER</strong></td>
<td>★ Attend Briefings</td>
<td>★ Verify Information</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Commander Briefing</td>
<td>★ Physical Collection</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• UPL Unit Briefing</td>
<td>★ Sign Unit Ledger</td>
<td></td>
</tr>
<tr>
<td></td>
<td>★ Attend Observers Briefing</td>
<td>★ Urine Collection</td>
<td></td>
</tr>
<tr>
<td></td>
<td>★ Sign Memorandum for Observers</td>
<td>★ Maintain Line of Sight</td>
<td></td>
</tr>
</tbody>
</table>

### LEGEND

- These tasks may be delegated to the UPL.
- A job aid is available for this process.
Urinalysis Testing Process

**PRE-COLLECTION PHASE**

**COMMANDER**
- Order Test
  - Type of Test Determined
- Select Soldiers
  - Manual
  - DTP Software (Preferred)
- Designate Holding area NCO/Officer and Observers
- Notify Soldiers
- Brief Soldiers

**UPL**
- Obtain Testing Supplies
- Select Soldiers if Delegated, Preferably with DTP Software
- Setup Testing Station Latrine Holding Area
- Brief Observers
- Brief Soldiers Unit Brief (and Commander Brief if Delegated)

**OBSERVER**
- Report to Testing Area
- Attend Briefing and Sign Memorandum

**SOLDIER**
- Report to Testing Area
- Attend Briefings

**LEGEND**
- These tasks may be delegated to the UPL.
- Symbol indicates step

**ASSUMPTIONS:**
- Testing supplies are available
- The Soldier has military ID card
- No edits to documentation are needed
**Urinalysis Testing Process**

**COLLECTION PHASE**

**CHECK-IN**

**COMMANDER**

- Be Accessible

**UPL**

1. Put on Gloves
2. Request Soldier ID
3. Instruct Soldier to Remove Outer Garments
4. Verify Information
5. Bottle-ID Swap
6. Place Label on Bottle
7. Hand Bottle to Soldier
8. Instruct Soldier and Observer to Move to Latrine

**OBSERVER**

- Maintain Line of Sight with the Specimen Bottle

**SOLDIER**

- Move to Latrine (bottle held above shoulder)

**LEGEND**

- Symbol indicates simultaneous task
- Symbol indicates step

**ASSUMPTIONS:**

- Using DTP software
COLLECTION PHASE
URINE COLLECTION

COMMANDER
Be Accessible

UPL
Continue to Check-In and Check-Out Soldiers

OBSERVER
Maintain Line of Sight with the Specimen Bottle
Direct Soldier (Donor) in All Actions Below

SOLDIER–MALE AND FEMALE
Wash Hands with Water Only → Uncap Bottle → Provide Sample in Specimen Bottle → Recap Specimen Bottle → Wash Hands with Soap and Water → Exit Latrine

SOLDIER–FEMALE OPTIONAL PROCESS
Provide Sample in Urine Female Collection Cup → Pour Sample into Specimen Bottle → Dispose of any Sample Remaining in Collection Cup → Rinse and Dispose of Collection Cup

LEGEND
Symbol indicates simultaneous task
Symbol indicates step
Urinalysis Testing Process

COLLECTION PHASE
CHECK-OUT

COMMANDER

- Be Accessible

UPL

- Chain of Custody Begins
- Verify Cap is Tight
- Verify Specimen Amount and Integrity
- Apply Tamper-Evident Tape
- Initial Bottle Label
- Return ID
- Release Soldier

- All Specimens Collected?
  - Yes: QC Begins
  - No: Return to Check-In

- Maintain Line of Sight with Specimen Bottle

OBSERVER

- Maintain Line of Sight with Specimen Bottle

SOLDIER

- Hand Specimen Bottle to UPL
- Maintain Line of Sight with Specimen Bottle
- Sign the Unit Ledger
- Return to Duty

LEGEND:
- Symbol indicates simultaneous task
- Symbol indicates step
- Symbol indicates note
- Symbol indicates decision
- Symbol indicates process
Urinalysis Testing Process

POST-COLLECTION PHASE
QUALITY CONTROL

Maintain Chain of Custody

Verify Information Matches on Urinalysis Documents
Ensure Information Complete on Urinalysis Documents
Ensure Specimen Bottles Sealed with Tamper-Evident Tape
Ensure Specimen Bottles Correctly Placed in Collection box

Breakdown
- Station
- Latrine
- Holding Area

Disinfect Testing Station
Return Supplies

Maintain Line of Sight

LEGEND:
Symbol indicates simultaneous task
Symbol indicates step
POST-COLLECTION PHASE
STORAGE, PACKAGING, AND SHIPPING

Maintain Chain of Custody

Garrison UPL?
Yes
Hand DD Forms 2624 and Testing Registers to DTC
Hand Collection Box(es) to DTC
Sign Specimens Over to DTC
Assist w/ Packing if Requested or Required by SOP

No
Perform 2nd QC
Shipping Specimens the Same Day?
Yes
Packaging
Sign DD Form 2624 and Transfer to Mail Services
Shipment

No
Move Specimens into Temporary Storage
Annotate DD Form 2624 and SF-702
Ready to Ship?
Yes
Remove Specimens from Storage
Annotate DD Form 2624 and SF-702
No
Keep Specimens in Storage

Maintain Line of Sight

LEGEND:
Symbol indicates simultaneous task
Symbol indicates step
Symbol indicates decision
Symbol indicates process