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MILITARY DRUG DEMAND REDUCTION PROGRAM

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This Instruction implements AFPD 90-5, *Community Action and Information Board*, Department of Defense Directive (DoDD) 1010.1, *Military Personnel Drug Abuse Testing Program*, and Department of Defense Instruction (DoDI) 1010.16, *Technical Procedures for the Military Personnel Drug Abuse Testing Program*, and prescribes the Air Force Drug Testing Program. It assigns responsibility for carrying out the program at the installation level. This Instruction applies to all Regular Air Force (RegAF) members, Air Reserve Component (ARC) members, applicants for the Air Force Academy, Advanced Reserve Officers' Training Corps (ROTC), regular Armed Forces, appointment or enlistment (or re-enlistment if discharged more than 6 months earlier) into Active or Reserve Components, and Air National Guard (ANG) members on AGR (Active Guard Reserve) status, Title 10 status (when activated longer than 30 days), or on Personnel Reliability Program (PRP) status. The authorities to waive wing/unit level requirements in this publication are identified with a Tier ("T-0, T-1, T-2, T-3") number following the compliance statement. See AFI 33-360, *Publications and Forms Management*, Table 1.1 for a description of the authorities associated with the Tier numbers. Submit requests for waivers through the chain of command to the appropriate Tier waiver approval authority, or alternately, to the Publication OPR for non-tiered compliance items. This publication may be supplemented at any level, but all direct Supplements must be routed to the OPR of this publication for coordination prior to certification and approval. This Directive sets forth policies regarding drug demand reduction activities of Air Force military personnel, including the Air Force Reserve and Air National Guard. Failure to observe prohibitions and mandatory provisions of this directive may result in administrative disciplinary action. Violations may result in enhanced punishment under Article 92(1) of the UCMJ for violations, and members may be found to have violated Article 92(1) regardless of their knowledge of the requirements established by the publication. Failure to observe the prohibitions and mandatory provisions in

paragraphs 1.2 and 1.3 of this publication by military members is a violation of Article 92 of the UCMJ.

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Chapter 1

PROGRAM OVERVIEW

1.1. Overview. The Drug Demand Reduction Program (DDRP) directly impacts mission readiness. The success of this long-standing program can be traced directly to strong command support at all levels.

1.1.1. Illicit Drug Use. The Air Force does not tolerate the illegal or improper use of drugs by Air Force personnel. Such use:

1.1.2. Is a serious breach of discipline.

1.1.3. Is not compatible with service in the Air Force.

1.1.4. Automatically places the member's continued service in jeopardy.

1.1.5. Can lead to criminal prosecution resulting in a punitive discharge or administrative actions, including separation or discharge under other than honorable conditions.

1.1.6. Studies have shown that products made with hemp seed and hemp seed oil may contain varying levels of tetrahydrocannabinol (THC), an active ingredient of marijuana, which is detectable under the Air Force Drug Testing Program. In order to ensure military readiness, the ingestion of products containing or products derived from hemp seed or hemp seed oil is prohibited. **Failure to comply with the mandatory provisions of this paragraph by military personnel is a violation of Article 92, UCMJ. Violations may result in administrative disciplinary action without regard to otherwise applicable criminal or civil sanctions for violations of related laws.**

1.1.7. In order to ensure military readiness; safeguard the health and wellness of the force, and maintain good order and discipline in the service, the knowing use of any intoxicating substance, other than the lawful use of alcohol or tobacco products, that is inhaled, injected, consumed, or introduced into the body in any manner to alter mood or function is prohibited. These substances include, but are not limited to, controlled substance analogues (e.g., designer drugs such as "spice" that are not otherwise controlled substances); inhalants, propellants, solvents, household chemicals, and other substances used for "huffing"; prescription or over-the-counter medications when used in a manner contrary to their intended medical purpose or in excess of the prescribed dosage; and naturally occurring intoxicating substances (e.g., Salvia divinorum). The possession of any intoxicating substance described in this paragraph, if done with the intent to use in a manner that would alter mood or function, is also prohibited. Failure to comply with the prohibitions contained in this paragraph is a violation of Article 92, UCMJ. Violations may result in administrative disciplinary action without regard to otherwise applicable criminal or civil sanctions for violations of related laws.

1.2. Goals and Objectives of the Drug Demand Reduction Program.

1.2.1. Enhance mission readiness and foster a drug-free environment through a comprehensive program of education, prevention, deterrence, and community outreach in support of the President’s National Drug Control Strategy.

1.2.2. Community outreach is defined as on and off base prevention, drug education/awareness and deterrence activities targeted to Department of Defense (DoD) family members, retirees, civilians, and contractors.

1.2.3. Maintain the health and wellness of a fit and ready fighting force as well as a drug-free Air Force community.

1.2.4. Deter military members, including those members on initial entry on RegAF after enlistment or appointment from using illegal drugs and abusing controlled substances.

1.2.5. Assist commanders in assessing the security, military fitness, readiness, and good order and discipline of their commands.

1.2.6. Detect and identify those individuals who use and abuse illegal drugs and other prohibited/controlled substances.

1.2.7. Provide a basis for action against a service member who tests positive for illicit drug use.

1.2.8. Ensure that urine specimens collected as part of the drug abuse testing program are supported by a legally defensible chain of custody procedure at the collection site, during transport, and at the drug testing laboratory.

1.2.9. Ensure that all AF military specimens are tested by a DoD certified drug testing laboratory. Re-tests may be sent to a DoD-certified laboratory, the Armed Forces Medical Examiner System (AFMES) or a Substance Abuse and Mental Health Services Administration (SAMHSA)-certified laboratory.

1.2.10. Ensure Air Force personnel recognize that the wrongful use of anabolic steroids, controlled substances, and other substances such as inhalants, prescription drugs, and over-the-counter medications by Air Force military members is an offense under the UCMJ. ANG members in Title 32 status are accountable to the State Code of Military Justice.

1.2.11. Ensure that AF members serving in Joint-Service commands, operations, and schools are tested according to the commanding service requirements. Host commanders may, at their discretion, test any and all Temporary Duty (TDY) personnel assigned to their units IAW the procedures outlined in this Instruction. Urine Specimen collection of other Service personnel may be performed under the AF Drug Testing Program, provided the commanding Service establishes either a Memorandum of Understanding (MOU) or a Memorandum of Agreement (MOA) to perform such testing. Absent the establishment of an MOU or MOA, testing of other Service personnel will be the responsibility of the respective Service.

1.2.11.1. The supporting Component at joint bases will manage the drug testing program for all military personnel assigned to the joint base and any affiliated geographically separate units and detachments, in accordance with each supported Component's respective policies and procedures for selection, collection, packaging, shipping, and testing (including utilizing supported component personnel as needed to comply with those policies and procedures).

1.2.12. Foreign/International students will be tested using the same standard as U.S. military members only when authorized by international agreement or other legal authority.

1.3. Levels and Frequency of Testing.

1.3.1. AF DDRPs will ensure compliance with DoD standards for AF end strength testing annually. (T-0) For example, at 100% testing rate, an installation with an end-strength of 5,000 Regular Air Force (RegAF) personnel must collect and ship a total of 5,000 specimens per year. This is accomplished through random selection of RegAF personnel using the Air Force Drug Testing Program (AFDTP) software or through a combination of random selection and dorm, unit sweeps/gate sweeps. (T-0).

1.3.1.1. If a combination of random selection and unit sweeps/gate checks are used, random selection using the Air Force Drug Testing Program (AFDTP) software must be at a level commensurate with guidelines established or agreed upon by DoD, Drug Enforcement Policy and Support and Secretary of the Air Force (SECAF). (T-1) All members must be tested at a rate of one test per member per year IAW DoDI 1010.1. (T-0) In order to ensure sufficient numbers are selected, the AFDTP software selection rate should be set at a selection rate no less than 9% per month for all Service Members. (T-1) The AFDTP Software Testing Target Rate can be adjusted (up or down) to ensure annual collection rates are achieved. ARC will use the Reserve version of the AFDTP software for random selections and will follow any additional AFRC provided guidance. (T-1)

1.3.2. All new accessions (officer and enlisted personnel) will be tested, as defined in Section F of this Instruction. (T-0)

1.3.3. **Untestable Specimen Rate.** Wing CCs should keep the untestable specimen rate as low as reasonably achievable in order to maximize program value. (T-3) If the rate of untestable specimens exceeds one percent in a month, installation commanders should take appropriate action and have a plan in place to decrease untestables. (T-3) Untestable discrepancies at GSUs will not be counted against the untestable rate at the host installation. (T-3)

1.3.4. Air Reserve Component (ARC) members will be tested utilizing available Reserve Component resources and constraints on training time. (T-1) Reserve component personnel on extended active duty (Guard in Federal status or active Reserve personnel) will be tested at the same rate as the RegAF component. (T-0) Individual Mobilization Augmentees (IMAs) are the responsibility of the RegAF. (T-2) Activated and mobilized reservists are the responsibility of the gaining Major Command (MAJCOM). (T-1) ANG only: Wing's must receive approval prior to testing ANG members who are in T10 status by e-mailing 201st MSS. (T-2)

1.3.5. A combination of random and other forms of inspection testing (e.g., unit/gate sweeps) will be performed no less than eight days per month (four days at GSUs). (T-1) Bases that have a population of 500 RegAF or less are only required to test four days a month. (T-1) Computer generated random testing days or commander (computer code: CO) selected testing days for Random Selection Testing must occur on at least six days per month (three days at GSUs and bases with a population of 500 RegAF or less). (T-1) The computer program must be run (button pushed) at least 15 days per month unless fewer days are approved by the Wing CC. (This is not applicable to ARC.) (T-2)

1.3.5.1. The Drug Testing Administrative Manager (DTPAM) at a Geographically Separated Unit (GSU) can run local drug testing software to select testing days and personnel for testing. (T-3) Alternatively, personnel assigned to GSUs can be included in the drug testing software of the host-base DDRP. (T-3) The latter option is preferable at

small GSUs to prevent personnel from being selected more frequently than personnel assigned to larger facilities.

1.3.5.1.1. When the host base software is used to select GSU personnel for testing, the Drug Demand Reduction Program Manager (DDRPM) (or DTPAM) will pre-designate at the beginning of the month which host-base testing days will include the GSU (for example, the first, third, fourth and seventh random testing days will include the GSU). (T-3) The selected schedule will not be shared with the GSU; the DTPAM at the GSU will be notified only on the day of testing. (T-3)

1.3.5.1.2. Names of GSU personnel selected by the host base on days that are not designated for testing at the GSU will be held by host-base DDRP and not communicated to the trusted agent or DTPAM at the GSU until the next GSU testing day. (T-3) If the host base software does not select personnel from a specific GSU to meet the minimum requirement of four testing days, this should be documented in an MFR by the host base and the GSU will not be required to test four days (so long as all assigned personnel are in the selection pool and are vulnerable to selected each time the software selects names). (T-3)

1.3.5.2. Daily random testing is strongly encouraged.

1.3.6. ARC will perform random and other forms of inspection testing at a frequency deemed appropriate by the reserve wing commander to meet DoD established rates. (T-3) The reserve wing commander is responsible for ensuring randomization and level of testing is met. (T-3) Monthly testing is highly encouraged. While the minimum rate of testing outlined in this paragraph does not strictly apply to Reserve Component units, every effort to achieve an equivalent rate of testing should be made. (T-3)

1.3.6.1. Air Reserve Component (ARC) members require testing. (T-0) Testing rates should ensure DoD compliance with current end-strength population testing rates for each unit annually. (T-0)

1.3.7. Field testing (rapid screening tests) is not authorized. (T-2)

1.3.8. All requests for waivers to any portion of this AFI, must be submitted to SAF/MR through the MAJCOM/Commander ((CC) (or Vice Commander (CV)), AFMOA/SGHW or AFMOA/SGB. (T-2)

Chapter 2

ROLES AND RESPONSIBILITIES

2.1. Assistant Secretary of the Air Force for Manpower and Reserve Affairs (SAF/MR) is responsible for providing guidance and direction for all matters pertaining to the Air Force drug testing program.

2.2. The Air Force Surgeon General (AF/SG) is the Office of Primary Responsibility (OPR) for the implementation of policy and guidance on AF drug testing. Responsible for formulation, review, and execution of plans, policies, programs, and budgets. Ensures that the program meets the requirements outlined in this Instruction and any additional requirements established by the White House Office of National Drug Control Policy, SAF/MR, SECAF, and Under Secretary of Defense for Personnel and Readiness (USD(P&R)). Formulation, review, and execution of plans, policies, programs, and budgets are the responsibility of AF/SG.

2.3. The Deputy Chief of Staff for Manpower and Personnel (AF/A1) acts as an Office of Collateral Responsibility (OCR) for military drug testing, focusing on personnel actions (retention, separation, Permanent Change of Station (PCS), TDY, etc.) for military personnel involved in, or identified for illegal drug use.

2.4. Air Force Medical Operations Agency (AFMOA).

2.4.1. Drug Testing Program Manager, AFMOA/SGB

2.4.1.1. Oversees Air Force DDRP Drug Testing Program as well as the Air Force Drug Testing Laboratory (AFDTL) and installation level drug testing operations and ensures compliance with policy established by higher headquarters.

2.4.1.2. Serves as the OPR for all drug testing issues.

2.4.1.3. Develops, implements, and manages Air Force drug testing program operations to support established guidance and procedures.

2.4.1.4. In coordination with the Alcohol and Drug Abuse Prevention and Treatment (ADAPT) branch, manages programming and execution of the Air Force drug testing program budget.

2.4.1.5. Coordinates with SAF/MR on matters concerning Air Force drug testing and implements established Air Force policy.

2.4.1.6. Develops and publishes detailed program standards to the AFDTL and MAJCOM DDRPMs in order to ensure AF-wide standardization and compliance with DoD and AF policy.

2.4.1.7. Monitors testing rates to support that the DoD mandated testing rate is accomplished at each base.

2.4.1.8. Coordinates Drug Testing Program policy changes with HAF offices involved in drug testing/demand reduction program policy.

2.4.1.9. Serves as Point of Contact (POC) for AF Drug Testing Policy with other Air Force, DoD, and civilian agencies having collateral responsibilities and interests.

2.4.1.10. Disseminates statistical data for installations AF wide, assesses testing trends, untestable rates, and shares information with installation DDRPMs/DTPAMs through MAJCOM DDRPMs.

2.4.1.11. Coordinates appropriate requests for more detailed data, requesting DoD approval for Defense Manpower Data Center (DMDC) actions.

2.4.1.12. Provides operational guidance to MAJCOM DDRPMs.

2.4.1.13. Coordinates, facilitates, and attends conferences, training and other professional forums that address demand reduction issues and determines appropriate Air Force representation at these events.

2.4.1.14. Responds to drug testing program related issues, Air Force suggestions, Congressional and high-level inquiries, and Freedom of Information Act requests.

2.4.1.15. Provides final approval for MAJCOM corrective action plans for discrepancies.

2.4.1.16. Identifies and assesses drug abuse trends and ensures Quality Assurance (QA) inspections of the AFDTL. The QA inspection shall assess the performance of the laboratory and its adherence to the requirements as outlined in DoDI 1010.16.

2.4.1.17. Monitors, and when appropriate, participates in laboratory inspections.

2.4.1.18. Monitors performance on external proficiency programs conducted by the AFMES to ensure continuous accuracy in test results.

2.4.1.19. Provides installation/MAJCOM guidance for any unique testing scenarios.

2.4.1.20. Reviews AFDTL operating instructions (OIs) and any changes deemed necessary by the AFDTL to ensure compliance with AF Drug Testing policy.

2.4.1.21. Serves as the Air Force voting member on the DoD Biochemical Testing Advisory Board (BTAB).

2.4.1.22. Ensures execution of an effective QA program at the AFDTL. Monitors the internal and external quality control (QC) programs to ensure test results are scientifically sound.

2.4.1.23. Serves as the Air Force technical representative for developing specifications and awarding contracts at the DoD and AF levels.

2.4.1.24. Establishes testability status of discrepancy codes in coordination with the DoD BTAB.

2.4.1.25. Reviews and approves AFDTL inspection reports.

2.4.1.26. Coordinates with AFMES to ensure the completion of DoD re-certification inspections of the AFDTL occur as required by DoD.

2.4.1.27. Reviews Medical Review Officer (MRO) interpretation in DoD Portal or appoints designee to complete this function.

2.4.1.28. Forwards all DDRP drug testing correspondence received from higher headquarters to the MAJCOM DDRPM or DTPAM

2.4.1.29. Oversees MAJCOM DDRPMs to ensure collection training is conducted.

2.4.1.30. Develops and provides MRO training.

2.4.1.31. Provides MAJCOMs with a list of delinquent results (results not yet entered in the Drug Testing Portal with an MRO review) on a quarterly basis to facilitate follow-up.

2.4.2. ADAPT/ Branch, AFMOA/SGHW

2.4.2.1. Oversees: prevention, education, and outreach programs designed to reduce potential for use of illegal and/or abuse of controlled substances.

2.4.2.2. Coordinates with Office of the Assistant Secretary of the Air Force for Financial Management and Comptroller (SAF/FM) for budget planning and execution.

2.4.2.3. Oversees the Alcohol and Drug Abuse Prevention and Treatment (ADAPT) Program, including programs for assessing and treating individuals identified for substance abuse.

2.4.2.4. Assists in developing standardized AF training for individuals assigned to the DDRPM and DTPAM functions.

2.4.2.5. Assists with analysis of AF-wide drug abuse trends and coordinates appropriate actions with MAJCOMs and installations.

2.4.2.6. Provides expert review on substance abuse prevention and treatment.

2.4.3. Air Force Drug Testing Laboratory (AFDTL).

2.4.3.1. Supports DoD and Air Force objectives to provide a work place free of illicit drug use and provide a mission-ready fighting force at all times.

2.4.3.2. Receives, processes, maintains, and reports results of drug urinalysis specimens in support of the Air Force and other DoD DDRPs.

2.4.3.3. Ensures the control and security of all specimens while they remain in possession of the laboratory.

2.4.3.4. Ensures accurate and timely processing and reporting of results, both positive and negative.

2.4.3.5. Ensures each test result report and urinalysis report undergoes appropriate reviews of analytical data, chain of custody compliance, and cross-referencing of specimen identification numbers.

2.4.3.6. Ensures results are not reported until certified by a Laboratory Certifying Official (LCO).

2.4.3.7. Ensures release of information or analytical results complies with the Air Force and DoD guidance.

2.4.3.8. Ensures competency of laboratory certifying officials/expert witness personnel to certify positive and negative results, provides consultation services to installation legal officials and health officers on drug testing procedures and policies, and ensures expert witness competency to provide testimony at Air Force administrative boards and courts-martial.

2.5. The Judge Advocate General (AF/JA).

2.5.1. Assists AF/SG, AFMOA, and MAJCOM/FOAs (Field Operating Agency)/DRUs (Direct Reporting Unit) in managing legal aspects of the drug testing program.

2.5.2. Provides advice regarding legal requirements.

2.5.3. Provides a legal advisor to the Air Force Drug Testing Program who performs the following functions:

2.5.3.1. Serves as advisor to the Air Force Substance Abuse Prevention and Treatment Program Manager (SGHW) and the Air Force Drug Testing Program Manager (SGB) on all legal issues related to the Air Force Drug Testing Program.

2.5.3.2. Monitors, and when appropriate, participates in all laboratory inspections.

2.5.3.3. Advises AFDTL on compliance with all applicable guidance to maintain forensic integrity of the drug testing program.

2.5.3.4. Works with representatives of USD(P&R), AFMES, AF/SG, and Staff Judge Advocates (SJAs) at all command levels to ensure compliance with applicable law and policy and forensic integrity of the drug testing program.

2.5.4. Ensures adequate facilities and equipment to support the legal advisor to the AFDTL.

2.5.5. Provides a legal advisor to the AFDTL who performs the following functions:

2.5.5.1. Serves as advisor to the AFDTL on all legal issues related to drug testing at the AFDTL.

2.5.5.2. Provides legal advice concerning urine testing discrepancy resolution.

2.5.5.3. Manages and facilitates litigation support.

2.5.5.4. Assists DoD trial counsel in producing materials needed to fulfill the United States discovery obligations.

2.5.5.5. Interfaces between the AFDTL and the legal community, commanders, and law enforcement

2.5.5.6. Receives copies of the completed Staff Judge Advocate assessments from each installation within five working days of completion of the documentation.

2.6. MAJCOMs.

2.6.1. The Command SG is the OPR for implementation of guidance over the command-level drug testing program and appoints a command-level DDRPM.

2.6.1.1. The command level DDRPM assists and serves as the primary focal point for installation level DDRPM andDTPAMs in administering the drug testing program. Command level DDRPMs will provide assistance to those installations without a DDRPM position. MAJCOMs that do not have a DDRPM at the headquarters level will determine which DDRPM within their MAJCOM will be the point of contact for installations without a local DDRPM. (This could be the enlisted functional manager or one of the DDRPMs within the MAJCOM).

2.6.1.2. MAJCOM DDRPM in conjunction with AFMOA, will ensure that each installation has in place a mechanism to provide adequate training of personnel assigned to the installation-level DDRPM and DTPAM functions. Centrally-developed (AFMOA/SGHW) CBT can be used if the opportunity for TDY is not available. All installation DDRPMs/DTPAMs must have training to perform DDRP duties. (T-0)

2.6.1.3. MAJCOM DDRPMs will ensure that each installation-level DDRPM and/or DTPAM conforms to this AFI. Information and training should be tailored to fit the needs of each installation. Training materials will be updated as needed and must be reviewed and approved by the MAJCOM DDRPM prior to implementation.

2.6.1.3.1. MAJCOM DDRPMs will ensure that installation DDRPMs or DTPAMs enter positive results on the Drug Testing Portal in a timely manner following MRO review.

2.6.1.4. MAJCOM DDRPMs are responsible for monitoring testing rates for installations in their command to support 100% testing rate is accomplished at each base. If an installation is not testing at the required rate, the MAJCOM DDRPM will identify a corrective action plan. (T-2)

2.6.1.5. Forwards all DDRP correspondence received from higher headquarters and AFMOA/SGB to the installation DDRPM or DTPAM.

2.6.2. The MAJCOM SJA is the MAJCOM OCR assisting the Command SG in managing the legal aspects of the MAJCOM drug testing program.

2.6.3. At installation CCs request, MAJCOM DDRPMs in conjunction with AFMOA work with installations with untestable specimen rates exceeding one percent in a given month to reduce the untestable error rate. Untestable discrepancies at GSUs will not be counted against the untestable rate at the host installation.

2.6.4. **Installation.**

2.6.4.1. Installation Commander/ARC Wing Commander.

2.6.4.1.1. Ensures the drug testing program is conducted IAW this Instruction and all other applicable guidance. (T-2)

2.6.4.1.2. Ensures testing level and type of test is appropriate to the local drug threat and is consistent with Air Force guidance. (T-3) Inspection random testing shall be the predominant type of test used in non-deployed settings. (T-3) Commanders should also consider using other types of additional inspections such as unit sweeps and gate sweeps. Commanders may establish testing levels in excess of the Air Force minimum requirements but must ensure staffing to support additional testing levels. (T-3) If testing levels exceed the 100% end-strength level, Commanders must carefully consider if sweeps should be initiated due to the amount of resources required in conducting sweeps. (T-3)

2.6.4.1.3. May test any and all TDY Air Force personnel assigned to their units. Frequency of testing for TDY personnel will be determined by the installation commander using the perceived threat and in consultation with the SJA and the installation DDRPM or DTPAM. (T-3)

2.6.4.1.4. On a case-by-case basis, may postpone notification/testing of an individual after coordination with the SJA.

2.6.4.1.5. For AD installations only, ensures effective oversight of the installation drug testing program by ensuring the Installation/CC or Installation/CV, the DDRPM or DTPAM, and SJA meet on a quarterly basis (or more often as required) to assess the status and effectiveness of drug testing program operations. (T-3) Other members can attend as needed, such as OSI, SFS, etc. Any issues of concern (such as members reporting outside of the two-hour window, untestables, positives, etc.) should be discussed at this meeting. (T-3) The SJA will also present the results of the last quarterly inspection. (T-3) A MFR will be written by the DDRPM or DTPAM to document this meeting. (T-3) (Suggest keeping these MRFs for 3 years). The installation CC/CV will determine if any issues need to be presented to Group/Squadron leadership or other base agencies. (T-3) See attachment 17 for sample quarterly meeting memo.

2.6.4.1.6. ARC will continue the Cross Functional Oversight Committee (CFOC) meeting at least annually or more frequently if deemed appropriate. (T-3) CFOC will be chaired by the Wing/CC or CV, and membership will include at a minimum, SJA, SF or OSI, RMU/CC DDRPM or DTPAM. (T-3) Group/Squadron/CCs, First Sgts, additional attendees may be required by the Wing/CC. SJA will present the last annual inspection results, and DDRPM/DTPAM will also present quarterly/annual metrics. (T-3)

2.6.4.1.7. Provides adequate and appropriate facilities dedicated for full-time use by the DDRPM and the DTPAM to include: a secured, private work area sufficient for the performance of administrative functions, the safeguarding of files and supplies to carry out and maintain the integrity of the drug testing program, and appropriate urine collection facilities. (T-3) (See **Attachment 16** for facility guidelines.)

2.6.4.1.7.1. Ensures adequacy of personnel resources to meet program administration requirements (e.g., DTPAM(s), observers, collection personnel). (T-3) This must include backup support to maintain DDRP collection operations when regular DDRP personnel are absent. (T-3) It is highly recommended each installation has at least two fully-trained DTPAMs available at all times to ensure the DDRP is fully operational.

2.6.4.1.8. Appoints in writing a DDRPM and/or DTPAM who will serve a minimum of six months (1 year recommended). (T-2) If it is determined a DDRPM is needed on the installation, this person may be a civilian or an AD member (must be a TSgt or above). (T-3) The DTPAM may be a civilian or an AD member (must be a SSgt or above). (T-3) Commanders can resource this position as they see fit with the exception that medical personnel cannot be used exclusively, but can be used on an equitable basis with other units to support the program. (T-2) If the testing population size and workload of the installation warrants additional program resources (including backup support when the DTPAM is unavailable), appoints in writing an alternate(s) to the DTPAM to serve for a minimum period of three (3) consecutive months. (T-3) Strongly recommend the alternate to the DTPAM should be appointed to serve a minimum of twelve (12) consecutive months to enhance and

maintain a high level of program integrity. Recommend the alternate perform periodic testing procedures (monthly) to validate understanding for added program continuity.

2.6.4.1.8.1. ANG only: The Medical Group Commander will have oversight of the DDR program and will appoint a physician to serve as the MRO. (T-2). The DDRPM will not be assigned to a member of the Guard Medical Unit (GMU). (T-2)

2.6.4.1.8.2. AFRC only: Appoints in writing Traditional Reserve (TR) primary DDRPMs and/or DTPAMS who will fill the FFDDR Unit Type Code(s) (UTC) and the corresponding assigned manpower position for a minimum of 18 months. (T-2) An ART may be placed in the FFDDR UTC and corresponding Part B manpower authorization as long as the Drug Demand Reduction Program is their primary duty on UTA drill weekends. (T-2)

2.6.4.1.9. Ensures Commanders and First Sergeants are trained on DDRP, to include their responsibilities, within 60 days of assumption of duty. (T-3) Training may be accomplished by briefings provided by the DDRPM, DTPAM, or ADAPT staff; or conducted by AF DDRPM-approved Computer Based Training.

2.6.4.1.10. Serves as the supervisor or designates supervision responsibilities of the DDRPM/DTPAM to the CV or Wing DS. (T-3)

2.6.4.2. Functions of the Cross Functional Oversight Committee (CFOC) (This is for AFRC only; AD bases are not required to hold a CFOC).

2.6.4.2.1. The CFOC will advise the Installation Commander and provide recommendations to improve the efficiency of the drug testing program. (T-3) The CFOC will monitor and evaluate:

2.6.4.2.1.1. The installation drug testing program's ability to meet the drug testing program goals**.** (T-3) Particular attention should be given to the quality of compliance with guidelines for specimen collection, packaging, and shipment.

2.6.4.2.1.2. Commanders' and supervisors' understanding and support for the goals of the drug testing program, its readiness and health implications, as well as its effectiveness in ensuring a drug-free workplace. (T-3)

2.6.4.2.1.3. Compliance with the required testing and the type of test appropriate to the local threat. (T-3)

2.6.4.2.1.4. Testing of personnel assigned to the Reserve Wing/Group regardless of grade, status, or position. (T-3)

2.6.4.2.1.5. Commanders' and supervisors' understanding of the random selection process and range of appropriate responses to military members who fail to go for testing or refuse to provide a specimen. (T-3)

2.6.4.3. The MTF Reserve Medical Unit (RMU) Commander, or Guard Medical Unit (GMU) Commander.

2.6.4.3.1. Provides oversight of the DDRP regarding the day to day functions (while the Wing provides supervisory functions IAW 4.4.4.1.11). (T-3)

2.6.4.3.2. Appoints in writing qualified licensed physicians to serve as primary and alternate MRO for the military drug testing program. (T-1)

2.6.4.3.3. For ANG only: For all positives that are not medically justified, Commanders must initiate discharge or waiver IAW AFI 36-3209. (T-3)

2.6.4.4. Medical Review Officer (MRO). (T-1)

2.6.4.4.1. Is responsible for reviewing test-positive messages and reports from the AFDTL. (T-1)

2.6.4.4.2. Must be a physician who has appropriate medical training to interpret and evaluate an individual's positive test result based on review of information in the member's medical record. (T-1) Must be knowledgeable in the medical use of prescription drugs and the pharmacology and toxicology of prescription and illicit drugs. (T-1) *Only individuals holding either a Doctor of Medicine (MD) or a Doctor of Osteopathy (DO) degree may serve as MROs.* (T-1)

2.6.4.4.3. Must determine whether the member's positive drug test could be caused by prescribed medication or other natural or synthetic substances to which the member has been exposed. (T-1) The MRO will review the member's medical, pharmacy, and dental records as well as other documents deemed appropriate in assessing a positive test result. (T-1)

2.6.4.4.3.1. ANG only: The unit commander shall coordinate with the Medical Review Officer (MRO) and arrange a review of all positive results for the purpose of determining whether it is medically justified or medically unjustified. (T-3) The MRO shall issue a written memorandum, which determines whether there is medical justification for the positive result. (T-3)

2.6.4.4.3.2. Because a positive results(s) may be caused by legitimate use of a valid medication prescription, the following urinalysis drug test results require review by the MRO. (T-1)

a. Amphetamines (d-methamphetamine and d-amphetamine).
b. Opiates (codeine, morphine).
c. Steroids (all steroids analyzed through an AFDTL designated outside laboratory).
d. Synthetic opiates (oxycodone, oxymorphone, hydrocodone, and hydromorphone).
e. Benzodiazepines.
f. Any positive reported for any Schedule II to V drug prescription if requested by an appropriate authority or if the drug has been added to the drug program testing panel.

2.6.4.4.3.2.1. ANG only: The MRO review shall occur PRIOR to the Security Forces interview if the service member tests positive for one of the following substances: (T-3)

a. Amphetamines (D-type, etc)
b. Opiates (codeine, morphine)
c. Steroids (CDTF commander's signature)
d. Synthetic opiates (oxycodone, oxymorphone, hydrocodone, and hydromorphone)
e. Benzodiazepines

When the positive result is for one of the substances enumerated in paragraph 2.6.4.4.3.2.1, the unit commander shall meet privately with the member and provide notice (verbally or written) of the positive result. (T-3) The member shall receive a copy of the relevant documents that pertain to the positive result and identifies the drug at issue. (T-3) The member shall then be given thirty (30) calendar days to provide any medical records or other documentation which may justify the positive result. (T-3) It is the responsibility of the service member to forward (email, fax, or mail) all relevant medical documentation to the MRO and unit commander within allotted timeframe. (T-3) If documentation is not received within the (30) calendar timeframe, the unit commander reserves the right to process the positive as an illicit drug result or extend timeframe by (15) calendar days. (T-3) The MRO will only interview or email the service member if clarification is needed concerning any of the documentation. (T-3) If the MRO makes a determination that the result is medically justified, the MRO's memorandum will include the name of the lawful drug used, the date prescribed, expiration date, the amount prescribed, and the directions/circumstances for use. (T-3) A copy of this memorandum will be forwarded to the service member, unit command, SJA, Wing and State level DDRPMs, and all adverse actions will be dismissed. (T-3) If the MRO makes a determination that there is no medical justification for the positive result, the Commander shall schedule an interview with Security Forces and consult with SJA on waiver or separation procedures. (T-3)

2.6.4.4.3.3. The drugs in a through e below do not require review by an MRO and are sent directly to unit commanders for action. A review may still be requested in special circumstances.

a. 6-monoacetylmorphine (6-MAM) – heroin metabolite.
b. Benzoylecgonine – cocaine metabolite.
c. Methylenedioxymethamphetamine (MDMA), methylenedioxyamphetamine (MDA) – amphetamine and methamphetamine designer drugs (see glossary).
d. Tetrahydrocannabinol (THC) – marijuana parent compound.

2.6.4.4.3.3.1. ANG only: The commander shall NOT schedule a review with the MRO prior to a Security Forces interview if the service member tests positive for the following substances: (T-3)

a. 6-monoacetylmorphine (6-MAM) - heroin metabolite
b. Benzoylecgonine- cocaine metabolite
c. Methylenedioxymethamphetamine (MDMA), methylenedioxyamphetamine (MDA)
d. Amphetamine and methamphetamine designer drugs
c. Phencyclidine (PCP)
d.Tetrahydrocannabinol (THC)-marijuana parent compound

2.6.4.4.4. Must not interview or otherwise communicate with the individual in question. (T-2)

2.6.4.4.4.1. ANG only: When the positive result is for one of the substances enumerated in paragraph 2.6.4.4.3.3.1, an interview shall be arranged with the Security Forces, and the member shall not be notified before the interview that there is a positive result. (T-3) When Security Forces conducts an interview, a copy of the report including the member's statement will be forwarded to their unit Commander. (T-3) During the medical determination and/or separation

process, the commander reserves the right to curtail the duties of the service member to ensure the safety and well-being of the wing populace and government property. (T-3)

2.6.4.4.4.2. ANG only: Service members cannot attend any PME, perform duty on any military orders, or be promoted until a medical justification is rendered by MRO case. (T-3) If a positive notification is received and a service member is currently attending a PME, on military orders, or awaiting promotion announcement, the service member may remain in current status until a medical justification is determined by MRO. (T-3) If a medically unjustified determination is rendered by MRO, the commander reserves the right to curtail any military orders and/or deny promotion. (T-3)

2.6.4.4.4.3. ANG only: The MRO must render a medical determination during the Unit Training Assembly (UTA) in which he/she has first received all documentation and/or interview with service member is complete. (T-3) Results must be forwarded on a formal memorandum to service member, unit commander, SJA, and the Wing and State Level DDRPMs. (T-3) State Level DDRPMs will forward justifications to DDRPMs at the NGB level. (T-3) The entire process (from the time the DDRPM receives the positive urinalysis results to the MRO rendering a medical determination) should not exceed 90 days. (T-3)

2.6.4.4.5. Should consult with a forensic toxicologist at the AFDTL on an as needed basis regarding drug testing results. (T-3)

2.6.4.4.6. Receives all positive drug reports from the DDRPM/DTPAM and provides a review to the DDRPM/DTPAM preferably within one duty day of receipt, not to exceed two duty days. (T-3) If the positive drug report is deemed to be the result of lawful drug use, the MRO will include the name of the lawful drug used, the amount prescribed/used, and the date of prescription/use in his or her report to the DDRPM/DTPAM. (T-3)

2.6.4.4.7. Is not involved in making determinations of chain of custody issues (i.e., specimen authenticity and integrity).

2.6.4.4.8. Must complete AFMOA-approved MRO training within four months of appointment as MRO. (T-2)

2.6.4.4.9. MRO will return specimen result determination to DDRPM or DTPAM to update in Internet Forensic Toxicology Drug Testing Laboratory (iFTDTL). (T-2)

2.6.4.5. The Drug Demand Reduction Program Manager (DDRPM).

2.6.4.5.1. Must be an individual possessing unquestionable integrity and trustworthiness and meet the following criteria: (T-1)

2.6.4.5.1.1. If RegAF, no Unfavorable Information File (AFI 36-2907 *Unfavorable Information File (UIF) Program). (T-1)*

2.6.4.5.1.2. Individuals are ineligible to serve as DDRPMs/DTPAMs if they have a record of conviction by courts-martial or civilian criminal court. (T-3) Additionally, the individuals are ineligible if they have received non-judicial punishment under Article 15, UCMJ, or a Letter of Reprimand or similar

administrative action (Letter of Admonishment, Letter of Counseling) for misconduct involving dishonesty, fraud, or drug abuse (including use, possession, or distribution). (T-3) Prior to assigning an individual to serve as a DDRPM, the unit commander will review the individual's Personnel Information File - PIF (military) or personnel record (civilian). (T-3)

2.6.4.5.1.3. Commanders, on a case-by-case basis, make the determination on whether conduct is dishonest and/or fraudulent. (T-3) Commanders will receive advice from the servicing SJA in situations in which it is unclear as to whether past misconduct is disqualifying. (T-3)

2.6.4.5.1.4. No pending UCMJ action (court-martial, Article 15), pending civilian criminal action, or pending administrative action (Separation, Letter of Reprimand/Counseling/Admonishment for dishonesty, fraud, or other integrity offenses). (T-3)

2.6.4.5.1.5. No medical or mental health condition which will preclude him/her from responsibly performing his or her assigned duties as a DDRPM. (T-3)

2.6.4.5.1.6. Finally, the individual will be asked to certify, and will sign a statement certifying, no record of conviction for any offense or history of past misconduct involving dishonesty, fraud, or drug abuse (including use, possession, or distribution). (T-3)

2.6.4.5.1.7. If RegAF, recommend the individual be at least an E-6. (T-3)

2.6.4.5.2. Ensures DDRP is conducted IAW the AFI, DoD requirements (See Attachment 1). (T-1)

2.6.4.5.3. Is responsible for the management of all aspects of the DDRP to include budget and military/civilian drug urinalysis testing programs. (T-3) If needed at certain installations the MAJCOM will manage the budget. (T-3)

2.6.4.5.3.1. Budget management will include, but is not limited to, conducting and analyzing annual resource requirements, planning and submitting an annual budget, as well as ensuring proper expenditure of funds. (T-3)

2.6.4.5.4. Installation DDRPMs, or where there is no DDRPM, the DTPAM will perform the following duties: (T-3)

2.6.4.5.4.1. Acts as the focal point for installation-level drug testing and any optional drug prevention/education issues (drug prevention/education is not required). (T-3)

2.6.4.5.4.2. Briefs unit commanders, first sergeants, and supervisors on the drug testing program (T-3). Depending on available manning, Alcohol and Drug Abuse Prevention and Treatment (ADAPT) staff may do these briefings.

2.6.4.5.4.3. AFRC Only: Outreach activities should be targeted at service members and DoD civilians. (T-3) Other audiences should be included as time permits. (T-3)

2.6.4.5.4.3.1. AFRC Only: Will provide one outreach activity that pertains directly to the Air Force Reserve personnel, their family members, and DoD

civilian employees. (T-3) Local DDRPMs are responsible for reporting the results of the outreach activity to the AFRC DDRPM within 45 days of activity completion. (T-3) Outreach activity participation is one key element in the AFRC DDRP Annual Award criteria.

2.6.4.5.5. Ensures all DTPAMs (including GSU DTPAMs) are adequately trained and competent to perform associated duties. (T-3) The DDRPM/DTPAM documents and certifies training for all DTPAMs who participate in the installation's DDRP. (T-3) MAJCOM DDRPMs will ensure DTPAMs at installations with no DDRPM are adequately trained. (T-3)

2.6.4.5.6. Ensures trusted agents and observers have documented training. (T-3)

2.6.4.5.7. Ensures random and other forms of inspection testing (e.g. unit/gate sweeps) are performed no less than eight days per month (four days for GSUs). (T-3) Random testing must occur on at least six days per month (three days at GSUs). (T-3) Daily random testing is strongly encouraged. Ensures the DTPAM utilizes the Air Force Drug Testing Program software for inspection (random) testing and Commander Selected Random Selection Testing. (T-3) Failure to use the Air Force Drug Testing Software will not affect the validity of results. Exemptions from the use of this software must be requested by the installation commander and approved in writing by AFMOA/SGB. (T-3) Air Reserve Components are not required to strictly adhere to the requirements of this paragraph, but shall tailor their programs to mirror these practices as closely as feasible. (T-3) ARC units should refer to section 2.6.4.6. for additional guidance. (T-3) Deviations from these procedures must be approved by AFMOA/SGB. (T-2)

2.6.4.5.8. Ensures the DTPAM utilizes the Air Force Drug Testing Program software for inspection (random) testing and CO Selected Random Selection Testing. (T-3) Failure to use the AF Drug Testing Software will not affect the validity of results. Exemptions for the use of this software must be approved in writing by AFMOA/SGHW or AFMOA/SGB. (T-2) ANG only: ANG will use the National Guard Bureau (NGB) DDRP software already in place. (T-3)

2.6.4.5.9. Maintains a current contact listing of all unit Commanders, First Sergeants, trusted agents, and legal office personnel. (T-3)

2.6.4.5.10. Safeguards the sensitive medical information that testing may generate IAW AFI 33-332, Privacy Act Program. (T-1)

2.6.4.5.11. Ensures the MRO is notified in writing within one duty day when positive drug test results are received, or in the case of ARC units, as soon as practicable, not to exceed seven days. (T-3)

2.6.4.5.11.1. Inputs the MRO interpretation/findings into the DoD portal and ensures notification, verbally and/or in writing, to the member's Commander/First Sergeant, AFOSI/Security Forces, ADAPT Program Manager, and installation SJA of all drug positive results that are not medically excused/explained by the MRO, and samples determined by the AFDTL to be either adulterated or not consistent with human urine. (T-3) All other requests for drug testing data should

be submitted to AFMOA/SGB. (T-3) AFRC units should request additional drug testing data from AFRC/SGPD. (T-3)

2.6.4.5.11.2. ANG only: The Wing Drug Demand Reduction Program Manager shall receive all positive urinalysis results via secure military network email from Drug Demand Reduction Program Managers at the NGB level. (T-3) The Wing level Drug Demand Reduction Program Manager shall then forward the positive result to the Wing Commander, unit commander, Staff Judge Advocate (SJA), and Security Forces Commander on or before the next UTA after initial receipt of positive notification. (T-3)

2.6.4.5.12. Maintains appropriate statistical data as required by higher headquarters and this AFI. (T-3)

2.6.4.5.12.1. In conjunction with the DTPAM, monitors the monthly rate of untestable specimens (fatal discrepancies) and non-fatal discrepancies (**Attachment 9**). (T-3) Takes appropriate action to ensure less than one percent of specimens are untestable. (T-3) At Installations exceeding the one percent untestable level, the Installation Commander should identify specific steps to reduce the untestable error rate and a timetable for resolution. (T-3) MAJCOM DDRPMs can assist with this process. Untestable discrepancies at GSUs will not count against the untestable rate at the host installation; however, the MAJCOM DDRPM is responsible for the action plan and training of collection personnel at the GSUs. (T-3)

2.6.4.5.12.2. Specimens reported to be untestable by the lab with the following discrepancy codes may be contested through the MAJCOM program manager; those that are approved may be categorized as Caused by Other:

BC - Bottle leaked in shipment, quantity not sufficient to test
BU - Bottle empty
BY - Bottle discrepancy – Not tested (depending on the lab's explanation)
SC - Specimen quantity not sufficient to test
SE - Specimen volume <30ml
SY - Specimen discrepancy – not tested (depending on the lab's explanation)
GP - Form or other document contains service member's name and signature
GY - Form discrepancy – Not tested
PB - Package – Broken seal
PY - Package – Discrepancy – Not tested (depending on lab's explanation)
LQ - Label has service member's name/signature
LY - Label discrepancy – Not tested (depending on lab's explanation)

2.6.4.5.13. Uses the Air Force Drug Testing software to track individual(s) unavailable for testing because they cannot be located at the time, swing shift workers, flying status, etc. (T-3) Members who are on leave, TDY, or deployed do NOT need to be kept on the due back list.

2.6.4.5.14. Ensures that, prior to the actual collection process, observers read, understand, sign, and date a Drug Testing Observer's Briefing acknowledging their acceptance and understanding of their responsibilities and the consequences of their

actions for not performing their duties IAW established guidelines, as well as physically review the process involved in observation and collection. (T-3) These signed briefing forms must be maintained as part of the drug urinalysis testing file IAW AFMAN 33-363, *Management of Records*. (T-3) This briefing remains current for the observer for a maximum of five calendar days, after which the briefing must be re-accomplished. (T-3) **Attachment 4** provides a sample observer briefing letter.

2.6.4.5.15. ARC notification of MRO confirmed positive drug testing results will be made by the RMU and GMU ARC guidance. (T-3)

2.6.4.6. The Drug Testing Program Administrative Manager (DTPAM). (T-1)

2.6.4.6.1. Coordinates drug testing activities with the DDRPM and other agencies as applicable. (T-3) If there is no DDRPM at the installation, then the DTPAM will coordinate with other agencies. (T-3)

2.6.4.6.2. If an installation has an experienced DDRPM, recommend DTPAM be an E-5 or above. If there is a new DDRPM, recommend DTPAM be an E-6 or above.

2.6.4.6.3. Must be an individual possessing unquestionable integrity and trustworthiness and meet the following criteria: (T-1)

2.6.4.6.3.1. No UIF (T-1)

2.6.4.6.3.2. Individuals are ineligible to serve as DDRPMs/DTPAMs if they have a record of conviction by courts-martial or civilian criminal court. (T-3) Additionally, the individuals are ineligible if they have received non-judicial punishment under Article 15, UCMJ, or a Letter of Reprimand or similar administrative action (Letter of Admonishment, Letter of Counseling) for misconduct involving dishonesty, fraud, or drug abuse (including use, possession, or distribution). (T-3) Prior to assigning an individual to serve as a DTPAM, the unit commander will review the individual's Personnel Information File - PIF (military) or personnel record (civilian). (T-3)

2.6.4.6.3.3. Commanders, on a case-by-case basis, make the determination on whether conduct is dishonest and/or fraudulent. (T-3) Commanders will receive advice from the servicing SJA in situations in which it is unclear as to whether past misconduct is disqualifying. (T-3)

2.6.4.6.3.4. No pending UCMJ action (court-martial, Article 15), pending civilian criminal action, or pending administrative action (Separation, Letter of Reprimand/Counseling/Admonishment for dishonesty, fraud, or other integrity offenses). (T-3)

2.6.4.6.3.5. No medical or mental health condition which will preclude him/her from responsibly performing his or her assigned duties as a DTPAM. (T-3)

2.6.4.6.3.6. Finally, the individual will be asked to certify, and will sign a statement certifying, no record of conviction for any offense or history of past misconduct involving dishonesty, fraud, or drug abuse (including use, possession, or distribution) and no medical or mental health condition which will preclude them from responsibility performing their assigned duties as DTPAMs. (T-3)

2.6.4.6.3.6.1. If RegAF, recommend the individual be at least an E-5. (T-2)

2.6.4.6.3.7. Ensures specimens are collected, packaged, and transported to the drug testing laboratory according to the forensic requirements of this Instruction and any guidance established by AFMOA/SGHW. (T-3) **Attachment 3** provides a sample checklist, which may be used at the collection site.

2.6.4.6.3.7.1. Makes notifications for specimen collection to trusted agents, (e.g. Commanders, First Sergeants) by confidential means. (T-3) Notifies Commanders/First Sergeants and SJA when an individual does not show for testing or could not be contacted by the trusted agent. (T-3)

2.6.4.6.3.7.2. In the event the DTPAM is randomly selected to provide a drug testing specimen, the DTPAM may not handle, prepare paperwork, or package and ship his/her own specimen for testing. (T-3) Arrangements must be made to ensure that all aspects of packaging and shipment of the box containing the DTPAM are performed by an alternate DTPAM (or the DDRPM) who is thoroughly knowledgeable and competent to perform this task and who is properly appointed. (T-3)

2.6.4.6.3.8. In conjunction with the DDRPM, monitors the rate of untestable specimens and takes appropriate action to attain less than one percent of specimens are untestable. (T-3)

2.6.4.6.3.9. Verifies results are received for every specimen sent for testing, tracks outstanding results, and performs follow-up with the testing laboratory to resolve issues of turnaround times, outstanding results, and untestable specimens. (T-3) Communicates findings and proposed resolutions to untestable discrepancies to the DDRPM or MAJCOM DDRPM if no installation DDRPM exists. (T-3)

2.6.4.6.3.10. Ensures DDRP is conducted IAW the AFI, DoD requirements, and the DDR standards. (T-3)

2.6.4.6.3.11. Safeguards the sensitive medical information that testing may generate IAW AFI 33-332. (T-1)

2.6.4.7. ARC units.

2.6.4.7.1. Will conduct random monthly testing during the Unit Training Assembly (UTA) and/or during the member's annual tour. (T-3) Monthly testing is recommended but not required as long as the annual quota is met and program maintains a deterrent effect. (T-3) It is suggested that drug testing of Active Reserves be conducted during the month in order to reduce the demands on limited time available during training assemblies and to enhance the deterrent effect.

2.6.4.7.2. Selection of members for testing may be accomplished prior to the day of testing and selection rosters must be placed in secure storage with limited access. (T-3) Notification of selection for testing will not be made until the day of testing. (T-3) Once notified, individuals must report for testing within two hours. (T-3) Individuals who are shift workers or on scheduled days off will be tested within two hours of reporting for duty during the next drug testing period. (T-3)

2.6.4.7.3. In ARC units with one allocated manpower position dedicated to drug testing and outreach, that individual will serve as both the DDRPM and DTPAM. (T-3)

2.6.4.7.4. AFRC Only: Ensure DDRPM or DTPAM attend local AFRC Integrated Delivery System (IDS) meetings in accordance with AFI 90-501, *Community Action Information Board (CAIB) and Integrated Delivery System (IDS)*, 15 October 2013. (T-3) The AFRC IDS functions as the action arm of the CAIB and develops a comprehensive, coordinated plan for integrating and implementing community outreach and prevention programs (e.g., financial, relationship, family maltreatment, sexual assault, equal opportunity, suicide prevention, substance abuse, health promotion, tobacco cessation, etc.), with the goal of enhancing resilience in military communities. The AFRC IDS improves the delivery of human service programs by establishing a seamless system of services through collaborative partnerships and coordinated activities – one of which is the DDR Program.

2.6.4.8. Group, Squadron, and Detachment Commander.

2.6.4.8.1. Commanders have the authority to order drug testing for sweep testing, probable cause testing, and commander directed and Bickel testing. Sweeps will be contingent upon resources of the local DDRP. (T-3) The commander will provide manning resources to accomplish the appropriate testing. (T-3)

2.6.4.8.2. Ensures that all unit military members regardless of rank or status, are subject to inspection testing. (T-3) Commanders are responsible for issuing written notification letters to members and for ensuring that notification letters are appropriately acknowledged (date) and time of acknowledgment, as well as the member's signature are evident) and a copy of such notification and acknowledgement letters are maintained within the unit IAW AFM 33-363 (**http://www.e-publishing.af.mil**). (T-3) **Attachment 5** provides a sample notification letter to provide a urine sample. Specimen collection is to be conducted on the day of selection. (T-3) Once notified, members must report to the testing location within two hours. (T-3) Exceptions: a. Commanders will permit personnel who must travel to the collection site more than two hours if required by distance and/or traffic or weather conditions. (T-3) Any such time extension must be noted in the Notification of Selection to Provide a Urine Sample. (T-3) b. Personnel who are shift workers or who routinely work alternative duty weeks with weekends during the regular duty week must report to the testing location within two hours of notification, as soon as possible upon returning to duty, preferably the same day the member returns to duty. (T-3) Commanders and/or First Sergeants will coordinate such activities with the collector to ensure the member reports for testing, within two hours of notification, as soon as possible upon returning to duty, preferably the same day the member returns to duty. (T-3) Commanders must not notify members of their selection sooner than one hour prior to the available testing period. (T-3)

2.6.4.8.2.1. Commanders who choose to appoint a designee (such as a deputy commander) for issuing and ensuring member notification should consult with the servicing SJA. (T-3) Designations must be made in writing. (T-3)

2.6.4.8.3. Track individual(s) unavailable for testing because they cannot be located at the time, swing shift workers, flying status, etc. (T-3) Members who are on leave, TDY, or deployed do NOT need to be kept on the due back list.

2.6.4.8.3.1. Commanders or designee will coordinate with the collector to ensure testing of shift working individuals. (T-3) Commanders must not notify members of their selection sooner than one hour prior to the scheduled collection time. (T-3)

2.6.4.8.3.2. ARC (to include IMAs). Members who are on, pass, quarters, flying status, crew-rest, missile duty, or non-duty status, or who did not attend training where their names were randomly selected for drug testing, will report for testing during the next training/drug testing period. (T-3) Commanders must not notify members of their selection sooner than two hours prior to the scheduled collection time. (T-3)

2.6.4.8.3.3. Commanders, at their discretion, may give Service Members who are approved for teleworking the option to select an alternate site for drug testing. While most teleworking Service Members will be able to present for drug testing at the installation DDRP, some may telework at a location which is a significant distance from the installation and an alternate DDRP location may be closer. When the Service Member chooses an alternate site, their name will be removed from the installation DDRP drug testing software and added to the selection pool at the alternate location. (T-3) When selected for testing, the Service Member will report to the selected DDRP location regardless of whether they are teleworking or working at the traditional duty location. (T-3) Alternatively, teleworking Service Members may also be given the option to be included in the selection pool at both the installation DDRP and an alternate DDRP. (T-3) When this option is selected, the selected Service Member will report to the DDRP location that made the selection. (T-3) If the Service Member is teleworking when selected by the assigned base DDRP, he or she will not be notified until the next work day at the traditional workplace. (T-3) If the Service Member is working at the traditional workplace when selected by the alternate DDRP, he or she will not be notified until the next telework day. (T-3) The choice to be included in the selection pool at two locations can significantly reduce travel time for some teleworkers; however, individuals choosing this option must be informed of the fact that their chances of being selected will increase two fold. (T-3) Those not wanting to subject themselves to increased testing should decline this option. (T-3)

2.6.4.8.3.3.1. Service Members who are given the option to select an alternate drug testing site will be given a window of time annually to change their selection. (T-3) The time period designated for changes to be made will be determined locally by each DDRPM/DTPAM. (T-3) If they discontinue approved telework status, however, the installation DDRP will be notified and the member's name will be added to the installation selection pool and removed from the alternate site's pool. (T-3)

2.6.4.8.3.3.2. If the alternate location is operated by another military Service, a memorandum of agreement (MOA) will be signed between the squadron or higher level commander and the equivalent commander at the alternate location. (T-3) A single MOA can cover multiple Service members. If an MOA cannot be completed, the service member will not have the option to move to the alternate DDRP. (T-3)

2.6.4.8.3.4. Take appropriate administrative or UCMJ action against personnel who fail to report for testing without a valid reason (leave, pass, TDY, quarters, flying status, crew-rest, missile duty, or non-duty status). (T-3) All actions taken by commanders must be coordinated with the SJA to ensure the integrity of the program. (T-3)

2.6.4.8.3.5. May order Commander-directed testing. Any Commander-directed drug testing must first be coordinated with the SJA. (T-3)

2.6.4.8.3.6. Will appoint in writing a Trusted Agent who performs the following duties: (T-3)

2.6.4.8.3.6.1. Receives and maintains rosters (IAW AFMAN 33-363, (**https://www.my.af.mil/afrims/afrims/afrims/rims.cfm**) of individuals selected for urinalysis testing. (T-3)

2.6.4.8.3.6.2. Notifies individuals selected for urinalysis testing no earlier than one hour prior to the scheduled starting collection time and no later than one hour prior to the scheduled end of collection time. (T-3) Do not make notifications by phone, individuals must come and be presented with the letter to be notified. (T-3) For GSU members, the one hour period may be extended by the commander.

2.6.4.8.3.6.3. Returns the Commander's Notification Letter to the collector with annotations of those members notified; those not notified; and/or those on leave, pass, TDY, quarters, flying status, crew-rest, missile duty, or non-duty status, (with return dates)/ by the time specified by the collector. (T-3)

2.6.4.8.3.7. Trusted Agent must be an individual possessing unquestionable integrity and trustworthiness, and meeting the following criteria: (T-3)

2.6.4.8.3.7.1. No UIF (T-3).

2.6.4.8.3.7.2. Individuals are ineligible to serve as Trusted Agents if they have a recent record (within five years) of conviction by courts-martial or civilian criminal court for matters not involving dishonesty, fraud, or drug abuse. (T-3) Additionally, the individuals are ineligible if they have a record of conviction by courts-martial or civilian court or have received non-judicial punishment under Article 15, UCMJ, or a Letter of Reprimand or similar administrative action (Letter of Admonishment, Letter of Counseling) for misconduct involving dishonesty, fraud, or drug abuse (including use, possession, or distribution). (T-3) Prior to assigning an individual to serve as a Trusted Agent, the unit commander will review the individual's PIF or equivalent personnel record. (T-3) Normally, misconduct, including drug

abuse, that occurred prior to entering RegAF service in the Air Force should not be considered a bar to service as a Trusted Agent.

2.6.4.8.3.7.2.1. Commanders, on a case-by-case basis, make determinations as to whether or not conduct is/was dishonest and/or fraudulent, and may make exceptions to the rule articulated in above paragraph. (T-3) Commanders will receive advice from the servicing SJA in situations in which it unclear as to whether past misconduct is disqualifying. (T-3)

2.6.4.8.3.7.3. No pending UCMJ action (courts-martial, Article 15), pending civilian criminal action, or pending administrative action (Separation or Letter(s) of Reprimand/Counseling/ Admonishment for dishonesty, fraud, or other integrity offenses). (T-3)

2.6.4.8.3.7.4. No medical or mental health conditions which will prevent them from performing their assigned duties as a Trusted Agent. (T-3)

2.6.4.8.3.8. Provide observers who meet the following criteria: (T-3)

2.6.4.8.3.8.1. Not selected for testing in the same session as the one in which they are observers. (T-3)

2.6.4.8.3.8.2. Must be an individual possessing unquestionable integrity and trustworthiness and meet the following criteria: (T-3)

2.6.4.8.3.8.2.1. No UIF (AFI 36-2907*)* (T-3).

2.6.4.8.3.8.2.2. Individuals are ineligible to serve as observers if they have a recent record (within five years) of conviction by courts-martial or civilian criminal court for matters not involving dishonesty, fraud, or drug abuse. (T-3) Additionally, the individuals are ineligible if they have a record of conviction by courts-martial or civilian court or have received non-judicial punishment under Article 15, UCMJ, or a Letter of Reprimand or similar administrative action (Letter of Admonishment, Letter of Counseling) for misconduct involving dishonesty, fraud, or drug abuse (including use, possession, or distribution). (T-3) Prior to assigning an individual to serve as an observer, the unit commander will review the individual's PIF or equivalent personnel record. (T-3) Normally, misconduct, including drug abuse that occurred prior to entering RegAF service in the Air Force should not be considered a bar to service as an observer. (T-3)

2.6.4.8.3.8.2.2.1. Commanders, on a case-by-case basis, make determinations as to whether or not conduct is/was dishonest and/or fraudulent, and may make exceptions to the rule articulated in above paragraph. (T-3) Commanders will receive advice from the servicing SJA in situations in which it unclear as to whether past misconduct is disqualifying. (T-3)

2.6.4.8.3.8.2.3. No pending UCMJ action (courts-martial, Article 15), pending civilian criminal action, or pending administrative action (Separation or Letters(s) of Reprimand/ Counseling/ Admonishment for dishonesty, fraud, or other integrity offenses). (T-3)

2.6.4.8.3.8.2.4. Not within six months of either separation or retirement from RegAF, or in the case of the ANG and Air Force Reserve, one year of either separation or transfer from an active participation status. (T-3)

2.6.4.8.3.8.2.5. No medical or mental health conditions which will prevent them from performing their assigned duties as observers. (T-3)

2.6.4.8.3.8.2.6. Commissioned officers or noncommissioned officers (NCOs) are to be used as observers. (T-3) In the event of the unavailability of officers or NCOs to perform observer duties, personnel in the grade of Senior Airman may be used, but only with the concurrence of the servicing SJA. (T-3)

2.6.4.8.3.8.2.7. Not assigned to work in any legal office. (T-3)

2.6.4.8.3.9. Unless approved by AFMOA/SGB, all drug testing managers, collectors and observers will be RegAF or reserve component AF personnel or AF civilian employees. (T-3) At joint installations, other Services' military and civilian employees may serve in these roles to facilitate drug testing of AF personnel.

2.6.4.9. The Staff Judge Advocate (SJA).

2.6.4.9.1. Performs and documents periodic (no less than quarterly, annually for ARC and GSUs) assessments of the drug testing program using DoDDs and DODIs, AFIs, and/or appropriate checklists derived from these publications or other applicable publications. (T-2) The report will be discussed at the quarterly meeting with Wing leadership. (T-2) Copies of the completed assessments will be sent to the AFDTL's legal advisor within five working days of completion of the documentation. (T-3) Ensures that all phases of installation level drug testing program (i.e. member selection, notification, sample collection, storage, packaging, and shipping) are forensically sound. (T-3) Recommends and ensures implementation of corrective actions to the DDRPM/DTPAM when necessary. (T-3) Any observations which negatively impact on the integrity of the program must be communicated through appropriate channels to the MAJCOM SJA representative; Office of the Judge Advocate General, Administrative Law Directorate (AF/JAA); and AFMOA/SGHW. (T-3) The local SJA will be responsible for performing (no less than annually) an audit of collection procedures at GSUs. AFRC and ANG perform and document periodic assessments no less than annually. (T-3)

2.6.4.9.2. Advises Commanders, the DDRPM, DTPAM, and other installation officials and agencies regarding legal aspects of the drug testing program. (T-3)

2.6.4.9.3. Advises and coordinates on all requests for urinalysis drug testing other than routine random inspection testing. (T-3)

2.6.4.9.4. Evaluates requests by service members for independent retest. (T-3)

2.6.4.9.5. Requests in writing to the appropriate drug testing laboratory an extension to retain a positive specimen for administrative or UCMJ actions that will extend beyond one year. (T-3) The originating agency must specify a defined period of time (e.g., six months). (T-3) A request for indefinite retention will not be honored by the

laboratory. (T-3) At the end of this extension period, the SJA must advise the laboratory every 60 calendar days of the need for further retention. (T-3) The local SJA is responsible for notifying the drug testing laboratory when further retention of the specimen is no longer necessary. (T-3)

2.6.4.9.6. Will provide, in coordination with the DDRPM/DTPAM, training sessions (as deemed appropriate by the SJA and DDRPM) for observers on the collection and observation processes for the drug urinalysis program. (T-3)

2.6.4.10. Air Force Members.

2.6.4.10.1. When notified of random selection to provide a urine specimen, the selected military member must acknowledge receipt of the written notification by endorsing with his/her signature. (T-3)

2.6.4.10.2. Military members selected for random drug testing must report to the designated testing site within the time period provided in the written notification (must be 2 hours or less) with their military identification (ID) cards and the signed written notification. (T-2)

2.6.4.10.3. The selected military member must remain at the testing site until he or she has provided an adequate urine specimen (minimum of 30 milliliters in one uninterrupted collection) and applicable documentation has been completed. (T-0) Once this has been accomplished, the individual may be released by testing site personnel. The only exceptions to the requirements of this paragraph are those military members meeting the criteria listed in the Section N, Inability to Provide a Urine Specimen. (T-0).

2.6.4.11. Civil Air Patrol

2.6.4.11.1. **(CAP)** /CAP-USAF.

2.6.4.11.1.1. Serves as a liaison to the CAP. (T-3) Coordinates and approves briefings on the CAP Demand Reduction Program (DRP) by the CAP Chief, Demand Reduction to DoD and other Federal agencies. (T-3)

2.6.4.11.1.2. Provides guidance and oversight to the CAP DRP. (T-3)

2.6.4.11.1.3. Reviews and approves CAP-CORP Demand Reduction Budget. (T-3)

2.6.4.11.1.4. Regularly reviews program status and reprograms funds in a timely manner. (T-3)

2.6.4.11.1.5. Maintains program accountability in accordance with DoD Directives and AFMOA/SGHW guidance, and AFI 65-601V1, Budgetary Guidance and Procedures. (T-3)

2.6.4.11.1.6. All DRP funding and policy issues involving CAP must be coordinated in advance with HQ CAP-USAF. (T-3)

2.6.4.11.1.7. Ensures expenditures of DRP —fenced funds meet all appropriate budget code limitations. (T-3) All resources, equipment and materials purchased with DRP funds are subject to audit.

2.6.4.11.1.8. Ensures proper coordination with finance, administrative grants, and contracting offices. (T-3)

2.6.4.11.2. CAP National Headquarters

2.6.4.11.2.1. Sponsors, endorses and supports DRP activities. (T-3)

2.6.4.11.2.2. Reviews annual funding, projections, cost analysis, and efficient use of funds for travel, outreach, education, and training purposes. (T-3) Initiates appropriate paperwork to accomplish budgeting tasks. (T-3)

2.6.4.11.3. Chief, Drug Demand Reduction (CAP/DOD).

2.6.4.11.3.1. Ensures all aspects of the DRP comply with established DoD and Air Force Directives, Instructions, and guidelines. (T-3) Establishes and maintains administrative files and complete records of all official DRP transactions and activities. (T-3) Supervises and performs duties consistent with the DRP. (T-3)

2.6.4.11.3.2. Properly manages all areas of budgeting for the CAP's DRP, including but not limited to: conducting and analyzing annual resource requirements, planning and submitting an annual budget and ensuring proper expenditure of funds. (T-3)

2.6.4.11.3.3. Conducts and analyzes annual program evaluations in accordance with AFMOA/SGHW guidance to identify funded and unfunded requirements. (T-3)

2.6.4.11.3.4. Briefs DoD and Federal agencies on the CAP DRP. (T-3)

2.6.4.11.3.5. Establishes policy and procedures for CAP DRP as specified in CAP Pamphlet (CAPP) 55, Civil Air Patrol Drug Demand Reduction Program. (T-3)

2.6.4.11.3.6. Develops plans, policies, goals, and objectives for DRP IAW established guidelines. (T-3)

2.6.4.11.3.7. Community Outreach. Outreach activities are the responsibility of the Demand Reduction (DR) Program. (T-3) These include all activities aimed at non-active duty populations (i.e., dependents, retirees, and school-age children) and include programs such as Red Ribbon, D.A.R.E., and Drug Education For Youth (D.E.F.Y.).

2.6.4.11.3.8. Develops plans and implements education and prevention activities. (T-3)

2.6.4.11.3.8.1. Promotes CAP as a positive community service lifestyle. (T-3)

2.6.4.11.3.8.2. Encourages youth to remain in school. (T-3)

2.6.4.11.3.8.3. Focuses on drug abuse education, prevention and awareness. (T-3)

2.6.4.11.3.8.4. Provides positive activities as an alternative to drugs, gangs and violence. (T-3)

Chapter 3

GUIDANCE AND PROCEDURES

3.1. Chain of Custody for Collecting and Transporting Urine Specimens.

3.1.1. Required Specimen Bottle Information. (T-0)

3.1.1.1. The DTPAM ensures that the urine specimen bottle label contains the following information legibly annotated (recommend that bottle labels be annotated with a ballpoint pen to avoid problems with ink smearing from felt-tip and similar pens.): (T-0)

3.1.1.2. Collection month, day, and year. (T-0)

3.1.1.3. Installation Identification Number (BIDN), ensuring the proper prefix correctly identifies the status of the member (e.g., F– Air Force Active Duty (RegAF), R – Air Force Reserve, G–Air National Guard). (T-0)

3.1.1.4. All digits of submitting member's social security number (SSN) or Military ID Number. (T-0)

3.1.1.5. The member's initials (and date, when applicable) certifying the authenticity of the specimen, correctness of bottle information, and witnessing the application of the tamper evident tape. (T-0)

3.1.1.6. The observer's initials and the date of observation. (T-0)

3.1.1.7. No portion of the member's name (including signature) shall appear on the label. (T-0)

3.1.2. Required Ledger (Register) Information.

3.1.2.1. The DTPAM maintains the urinalysis ledger or register. (T-2) Recommend that ledger documents be annotated with a ballpoint pen (where not typed) to avoid problems with ink smearing from felt-tip and similar pens. The ledger or register documents each member submitting a urine specimen with the following minimum identifying information. (T-2)

3.1.2.1.1. Month, day, year. (T-2)

3.1.2.1.2. BIDN, batch number, specimen number. (T-2)

3.1.2.1.3. All digits of the member's SSN. (T-2)

3.1.2.1.4. Member's rank. (T-2)

3.1.2.1.5. Signature, initials, and printed name of the member. (T-2)

3.1.2.1.6. The time at which the member provided the specimen to the DTPAM. (T-2)

3.1.2.1.7. Signature, initials, and printed name of the observer. (T-2)

3.1.2.1.8. Test basis code. (T-2)

3.1.3. DTPAM/Collector will: (T-0)

3.1.3.1. Visually inspect specimen bottles and ensure they are clean, free of debris, and not damaged. (T-2)

3.1.3.1.1. Maintain drug testing supplies in a limited access, secure area. (T-2) Names of individuals having access to this area must be clearly posted and access to all others will be denied. (T-3)

3.1.3.1.2. Check the member's military ID card and document the information required in paragraph 5.1.2. (T-0)

3.1.3.2. The DTPAM/Collector will maintain possession of the member's military ID card until the collection process is completed. (T-0)

3.1.3.3. Designate for the member providing a specimen an observer who is of the same gender and has not been chosen to provide a sample during the same collection time. (T-0) Observers must be briefed on-site prior to the collection process about their duties and responsibilities, as described in paragraph 2.6.4.5.14. (T-3) This briefing remains current for the observer for a maximum of five calendar days, after which the briefing must be re-accomplished. (T-3) This briefing must consist of a verbal explanation as well as a written statement signed and dated by the observer acknowledging their acceptance and understanding of their responsibilities and the consequences of their actions for not performing their duties IAW established guidelines. (T-3) Attachment 4 of this AFI provides a sample observer briefing letter.

3.1.3.4. Apply the appropriate bottle label to the specimen bottle. (T-2) Collector and member will verify the ledger and bottle information are accurate. (T-2) Have the individual inspect the bottle in the presence of the DTPAM/Collector and observer, making sure that it is not damaged and is clean and free of any debris. (T-2) Instruct the individual to carry the specimen bottle so that it is in view of the observer at all times. (T-2)

3.1.3.4.1. Optional use of the individually packaged sterile specimen container cup is authorized for collecting urine specimens by female members only. (4 ¾ oz, NSN 6530-00-837-7472 or NSN 6530-01-048-0855 or equivalent). Immediately after collection in the wide mouth collection cup, the urine must be poured into the specimen bottle and tightly capped by the person submitting the specimen. (T-2) This must be performed under direct observation and supervision of the observer to preclude adulteration, contamination, or break in the chain of custody. (T-2)

3.1.3.5. Direct the individual providing the specimen to remove bulky outer garments (e.g., Airman Battle Uniform (ABU blouse) if direct observation by the observer may be impeded. Direct the individual to remove all genital body piercing jewelry. (T-3) The donor must wash his or her hands (with water only) after removal of any genital body piercing jewelry. (T-3) No hats, purses, bags, briefcases, or other baggage may be brought into the collection room. (T-3)

3.1.3.6. Receive the urine specimen bottle from the member, visually check for contamination and adulteration, and ensure the urine volume is a minimum of 30 milliliters. (T-0)

3.1.3.6.1. A specimen which appears contaminated or adulterated must be brought to the attention of the DTPAM/Collector or DDRPM who will immediately contact the SJA for guidance. (T-2) If contamination or adulteration is suspected, take custody of the suspected sample and note such custody on the DD Form 2624, *Specimen Custody Document - Drug Testin*g. (T-2) Maintain custody of the suspected sample in secure storage and release only as directed by SJA. (T-2) Direct the member to remain in the area until he/she can provide an acceptable sample in a different specimen bottle that complies with all chain of custody requirements. (T-3)

3.1.3.6.2. If there is inadequate volume, have the member who provided the specimen, under direct observation, discard the specimen and return the empty bottle to the DTPAM/Collector. (T-3) The DTPAM/Collector will void the label on the bottle, and in the ledger or register annotate Quantity Not Sufficient or QNS. (T-3) The DTPAM/Collector will deface and discard the label as well as the bottle. (T-3) In the case of voided specimens, the information on the label and ledger or register must be re-accomplished. (T-3) If using automated labels, annotate the ledger or register including QNS and time, and reprint a new label for the member. (T-3) The member must remain in the collection facility until a 30 milliliter volume of urine can be produced at one time. (T-3)

3.1.3.7. If the individual provides an adequate volume of specimen, then, in the presence of the member, ensure the cap is firmly fixed, then apply tamper evident tape (conforming to the shape of the bottle to minimize tearing) extending from approximately halfway down and over the gummed label (not covering any identifying information) across the bottle cap, and to an approximate midpoint on the other side of the specimen bottle, touching the label. (T-0)

3.1.3.8. Have the member confirm that the SSN and other identifying information on the specimen bottle is correct, that the member witnessed the application of the tamper evident tape, and that the specimen in the bottle is that of the member. (T-2) Then have the member initial (and date, when applicable) the bottle label. (T-2) Have the member initial and sign (payroll signature) by his or her printed name in the ledger after verifying that the SSN annotated on the bottle label matches the entries in the ledger or register. (T-2)

3.1.3.9. Have the observer initial (and date, when applicable) the bottle label on the line marked OB INIT to certify the integrity of the collection process that the urine is that of the member. (T-2)

3.1.3.10. Have the observer print his or her name where designated in the ledger, initial, and sign his or her signature next to the member's entry. (T-3)

3.1.3.11. If the tape is broken during initial sealing in the presence of the member, or is later broken during subsequent repackaging, reseal the bottle with tamper evident tape. (T-2) Do not place the tape directly over the original tape. (T-2) The reapplication should be slightly offset of the original taping, following the procedures in paragraph **3.1.3.7**. (T-2)

3.1.3.11.1. When tamper evident tape is reapplied, prepare a memorandum for record (MFR) describing the circumstance under which the tape was broken and by whom

the tape was reapplied, and attach it to the DD Form 2624, *Specimen Custody Document - Drug Testin*g. (T-2)

3.1.3.12. If a second label needs to be placed over an existing label (e.g. label torn, writing smeared), prepare a MFR describing the circumstance under which the label needed to be replaced and by whom the label was reapplied, and attach it to the DD Form 2624, *Specimen Custody Document - Drug Testin*g. (T-2) Do not place the label directly over the original label – the reapplication should be slightly offset of the original label. (T-2) Ensure tamper evident tape covers the second label. (T-2)

3.1.3.12.1. The use of signature stamps or signatures replacement (e.g.//SIGNED//) on MFR is prohibited. (T-2)

3.1.3.13. Place the specimen bottle(s) in a specimen box for sealing and shipment to the drug testing lab. (GSUs will send specimens to the DDRPM/DTPAM if required by the DDRPM/DTPAM). (T-1)

3.1.3.14. Any unusual or suspicious activity observed during the collection process must be reported to the collector. (T-3) The collector will make appropriate contact with the SJA and law enforcement personnel and will document the unusual or suspicious activity in a memorandum for record. (T-2)

3.1.4. The observer must:

3.1.4.1. Be available for urinalysis drug testing whenever designated or ordered to perform observer duties. (T-3)

3.1.4.2. Direct the member to rinse his/her hands with only water and dry them prior to providing a specimen. (T-3) Members may be allowed to wash their hands with soap and water or hand sanitizer after providing a sample and securing the lid on the bottle.

3.1.4.3. Directly observe the urine leaving the member's body and entering the specimen bottle. (T-3)

3.1.4.3.1. If a female member chooses to use the optional wide-mouth specimen container cup, the observer must directly observe the following: the member providing the specimen, pouring the specimen into an approved specimen bottle, and securing the lid tightly to the bottle. (T-3)

3.1.4.4. Ensure that the member providing the specimen secures the lid tightly on the bottle and that it is not reopened by the member or anyone else at the collection site. (T-3) Maintain the bottle in line of sight at all times. (T-3) Members may be allowed to clean their hands after providing a sample and securing the lid on the bottle.

3.1.4.4.1. Ensure the specimen bottle is returned to the DTPAM immediately after the urine collection or any attempted urine collection that does not result in the required minimum 30 milliliters of urine during one attempt. (T-3)

3.1.4.4.1.1. If less than the required 30 milliliters of urine is collected, the observer must escort the member to the DTPAM who will verify the insufficient volume. (T-3) The DTPAM, upon verification of insufficient volume, will direct the member to discard the specimen. (T-3) The observer must witness the discarding of the specimen by the member. (T-3) The bottle will be returned to

the DTPAM who will dispose of the bottle IAW Occupational Safety and Health Administration (OSHA) guidelines. (T-3)

3.1.4.5. Initial (and date, if applicable) the bottle label. (T-3) Place tamper-proof tape to the bottle. (T-3)

3.1.4.6. Sign, initial, and print his or her name in the ledger. (T-3) This certifies that the observer directly witnessed the member urinating into the specimen bottle. If a wide mouth cup is used for females, the observer is certifying that she directly witnessed the member urinating into the wide-mouth cup and transferring the urine into the specimen bottle. (T-3)

3.1.4.7. If an error is made in the documentation associated with a urine specimen, see paragraph **4.1.2** and refer to **Attachment 15** for guidance on forensic documentation and acceptable methods for correcting errors on forensic documentation.

3.1.5. Public Health Measures.

3.1.5.1. DDRPMs/DTPAMs should consult with their installation Public Health offices to establish local procedures for allowing members to clean their hands after providing a urine sample. For example:

3.1.5.2. Other measures of hand cleaning, e.g., skin-approved wipe (disinfectant or plain (e.g., baby wipe)) or alcohol-based sanitizer, may be used as well as washing with soap and water after the specimen has been collected and the lid secured on the bottle. This could be in the bathroom if soap dispensers are not available but should be provided in the area where the specimens are taped and initialed, since there may be residual urine on the cup/hands or from common-use pens. (T-3)

3.1.5.3. If a common pen is used, it could be wiped off with a wipe after each person uses it. Otherwise, everyone could be required to use their own personal pens. Alternatively, wipes could be made available if someone wants to wipe the pen down (this would be wipes put next to the pen on the table top, not wipes kept in another location that must be retrieved).

3.1.5.4. Collectors must wear disposable gloves when handling specimen containers, which may have been contaminated with urine and merely dried off with a paper towel. (T-3)

3.1.6. Special Considerations. (T-1)

3.1.6.1. Specimens that are solely for clinical diagnosis (i.e., medical evaluations, ADAPT Program enrollment, aircraft incidents/accidents) should not be submitted to the drug testing laboratory. (T-1) Specimens obtained as a result of aircraft incidents/accidents must be collected by the MTF laboratory and submitted to the AFMES. (T-1) See AFMAN 91-223, Aviation Safety Investigations & Records. All others as defined for clinical diagnosis may be processed locally. (T-1)

3.1.6.1.1. Collection, packaging, and shipping of specimens for all aircraft mishaps and/or fatalities involving RegAF members is the responsibility of Flight Medicine. (T-1) (See AFMAN 91-223, Aviation Safety Investigations & Records.) DDRPMs and/or DTPAMs may provide assistance upon request. (T-1)

3.1.6.2. DDRPMs, DTPAMs, and observers, who are military members or civilian employees in Testing Designated Positions, must be included in a random drug testing program, but collections and mailing must be completed by other qualified individuals. (T-1) DDRPMs, DTPAMs, and observers will not participate in any collection in which they provided specimens. (T-1) Collection of urine specimens from these personnel may be conducted in a special, separate collection session so that the tested DDRPMs, DTPAMs, or observers can participate in collection sessions involving the general population. In special circumstances, the DDRPM should consult the local SJA who will assist in developing and documenting a process that minimizes opportunities for anyone to influence the collection and shipment of his/her urine specimen. (T-1)

3.1.6.3. If a specimen is certified positive and the member has departed due to PCS/Permanent Change of Assignment (PCA), the losing unit commander will notify the gaining unit commander by message and send a copy of the message to the gaining MTF/CC. (T-3)

3.1.7. After Hours Collection. The DDRPM/DTPAM, in consultation with the SJA, will establish procedures to periodically collect and secure specimens outside normal duty hours, including weekends and holidays. (T-3)

Chapter 4

FORM COMPLETION AND SPECIMEN PACKING REQUIREMENTS

4.1. Completion of the DD Form 2624, *Specimen Custody Document - Drug Testin*g.

4.1.1. Complete DD Form 2624 IAW **Attachment 10** of this AFI. (T-0)

4.1.1.1. Fill out, sign, and date a DD Form 2624 for every shipping box or mailer sent to the AFDTL (or other drug testing lab designated by MAJCOM). (T-0) The following information must be recorded on the DD Form 2624: (T-0)

Block 1. Enter submitting unit name and address.
Block 2. Enter DDRPM or Designee's name and phone number.
Block 3. Enter Installation Identification Number.
Block 4. Leave blank.
Block 5. Enter Batch Number.
Block 6. Enter date collected.
Block A. Enter Air Force Drug Testing Laboratory. (PACAF Bases: indicate mailing address of the laboratory performing the drug testing).
Blocks B, C, D, E, F, G, H (1), H (2) and H (3). Leave blank.
For each specimen shipped, enter the following information:
Block 7. Specimen number.
Block 8. Member's complete SSN.
Block 9. Test basis.
Block 10. Test information. Entry only required if additional testing requested. See instructions on reverse side of DD Form 2624.
Block 11. Leave blank.
Block 12. Chain of Custody. Every time the custody of a sample is transferred, an entry must be made.
a. Enter date (YYMMDD).
b. Enter signature and printed name.
c. Enter the signature and printed name of the individual who received the specimens or Secure Storage. The final line should either indicate the mode of shipment or be left blank.
d. Enter the purpose for change of custody, such as Secure Specimens, Prepare to Ship, or Ship to AFDTL via (insert mode of shipment). The final entry should indicate shipment to the drug testing laboratory. When specimens are packaged and returned to storage awaiting shipment, documentation must be retained locally to indicate mode of shipment, releaser, date of release, and to whom sample(s) released.

4.1.1.2. Use the barcode program to computer generate the DD Form 2624 and barcoded specimen identification. (T-3) Computer generated DD Form 2624 must be a single-paged, double-sided document. (T-3) To ensure forensic integrity and chain of custody accountability, double-paged, single-side reproduction of the DD Form 2624 will not be used. (T-3) If a barcode DD Form 2624 computer program is not available, then complete the DD Form 2624 using the computer programs Pure Edge, or Fillable Adobe PDF; using typewritten entries on a printed version of the form; or by making

handwritten entries on a printed version of the form. (T-3) If handwritten, entries must be legible and the use of any ink other than black is strongly recommended. (T-3)

4.1.1.2.1. Block 1. Submitting Unit. Complete the mailing address. APO's and FPO's should identify the country. (T-3)

4.1.1.2.2. Block 2. Additional Service Information. Annotate the name, rank, and DSN number of the installation DTPAM. (T-3)

4.1.1.2.3. Block 3. Installation Identification Number. Annotate the installation number (e.g., F123, R123, G123) that appears on the specimen bottle label. (T-3)

4.1.1.2.4. Block 4. Unit Identification Code. Leave blank.

4.1.1.2.5. Block 5. Document/Batch Number. Annotate the batch number (e.g., 001, 002, 003) that appears on the specimen bottle label. (T-3) Use a separate DD Form 2624 for different batch numbers. (T-3)

4.1.1.2.6. Block 6. Date Specimen Collected. Enter the date of specimen collection using the format YYYYMMDD. (T-3) Use a separate DD Form 2624 for each collection day when shipping specimens collected on different days. (T-3)

4.1.1.2.7. Block 7. Specimen Number. Annotate the specimen number (e.g., 001, 002) that appears on the specimen bottle label. (T-3) Nothing else is to be entered into this block.

4.1.1.2.8. Block 8. Complete SSN. Enter the complete nine-digit SSN. (T-3)

4.1.1.2.9. Block 9. Testing Basis. Use one of the following codes: IO (inspection testing); PO (probable cause); VO (consent testing); RO (rehabilitation); CO (commander directed); MO (medical); NO (new entrant); IR (random sample); IU (unit sweep); and OO (other). (T-3) Consult the servicing SJA's office if there are any questions regarding test basis.

4.1.1.2.10. Block 10. Test Information. Complete this block only if anything other than routine testing is to be performed. (T-3) Special testing codes: F, full panel (specimen requires testing for the presence of all drugs); O, other drugs (specimen requires testing for the presence of a particular drug); S, steroid.

4.1.1.2.11. Block 11. Prescreen. Leave blank. (T-3)

4.1.1.2.12. Block 12. Chain of custody. Complete block 12a, 12b, 12c, and 12d. (T-3) Account for specimen transfer and storage within the unit and record shipment to the drug testing laboratory IAW paragraph **4.1.1**. (T-3) Shipping date and releaser's signature must be originals and not photocopies. (T-3) The use of an ink color other than black for signatures is strongly recommended.

4.1.1.2.12.1. The use of signature stamps on the DD Form 2624 is prohibited and will be considered an untestable discrepancy. (T-3)

4.1.1.2.13. Block A. Laboratory Conducting Drug Testing. Indicate the mailing address of the laboratory performing the drug testing. (T-3)

4.1.1.2.14. Blocks B through H. Reserved for use by the drug testing laboratory. Do not make any annotations in these blocks. (T-3)

4.1.1.2.15. Maintain a photocopy of the completed DD Form 2624 for retention in drug testing files. (T-3)

4.1.1.2.16. Package and ship specimens to the drug testing laboratory within 2 working days of the collection date. (T-2) Specimens not mailed within two working days will require a MFR explaining the reason for the delay (T-2). The MFR must be forwarded to the servicing SJA, and a copy of the MFR must be retained on file for 3 years. (T-2) Secure specimens not mailed on the same day as collection must be placed in a secured storage area with access limited to the trusted agents of the drug testing program (i.e., the DTPAM and the DDRPM). (T-2) The chain of custody (block 12) must clearly reflect any changes in custody of the specimens.) (T-2)

4.1.2. Forensic Corrections to All Collections Documents. Do not write over information. (T-3) Do not use correction fluid or typewriter correction ribbon. (T-3) Refer to **Attachment 15** for acceptable methods of documenting and correcting errors.

4.1.3. Bar-Code Labels.

4.1.3.1. Whenever possible, use bar-code printed identifiers corresponding to the individual's SSN on both the specimen bottle and the DD Form 2624.

4.1.3.2. The bar coded label must also have the corresponding information printed in a format that can be read without a bar-code reader. (T-3) Additional identifying information, date collected, or other numbers required may be recorded on the bottle or bottle label as long as it does not interfere with reading of the bar-code labels.

4.2. Packaging and Shipping of Specimens.

4.2.1. Attachment 11 provides a step-by-step pictorial guide on the packaging of specimens. The photos are illustrative only; refer to the text in paragraphs below for packaging requirements.

4.2.2. Use appropriate personal protective equipment (PPE) and comply with applicable OSHA regulations. (T-3)

4.2.3. Place the specimen bottles (maximum of 12) into the specimen box ensuring that the tamper evident tape is intact. (T-3) Only box (NSN 6640-00-165-5778) may be used. (T-3) Re-used boxes may not be used. Single test kits (STK) are the only alternative to NSN 6640-00-165-5778. (T-3)

4.2.3.1. When using the STK: Open the STK sealed box in the presence of the member. (T-3) Annotate the member's SSN and collection date on a blank bottle label provided, and affix the label to the empty specimen bottle provided with the STK. (T-3) See chapters 10 and 11 for STK completion, packaging, and shipping.

4.2.4. After ensuring that the specimens listed on the DD Form 2624 match the bottles that are in the box, date and sign block 12. (T-3)

4.2.5. Place the DD Form 2624 and any MFRs inside the specimen box in a sealed leak proof plastic bag to prevent loss or damage of the documents. (T-0) If these documents are sent separately they will not be accepted. (T-0)

4.2.5.1. The use of signature stamps or signature replacements (e.g.: —//SIGNED//) on MFRs is prohibited. (T-0)

4.2.6. Place a sufficient amount of flat absorbent pads (NSN: 6530-01-304-9754 or equivalent) inside the box to absorb leakage and prevent damage. (T-0)

4.2.7. Do not use confetti-type or popcorn shipping fillers. (T-3) Individual specimen bottles are not to be placed inside plastic or white shipping bags. (T-3)

4.2.8. Seal all openings and edges of the specimen box with adhesive tape (e.g., masking tape, nylon strapping tape, or package sealing tape). (T-3) One piece of tape must be applied around the center opening of the box so that it covers the opening flap on the top and bottom of the box and completely encircles the box. (T-3) Additionally, tape must encircle each end of the box that has an opening so that the edges are completely covered and sealed. (T-3)

4.2.9. Packager (collector) must sign his or her payroll signature across the tape once on the top and once on the bottom of the box. (T-3) The payroll signature must cross from the tape to the box in at least one location on each the top and bottom. (T-3) The manufacturer's tape on a specimen box is considered part of the box. The manufacturer's tape is not considered part of the tape that must be placed completely around the box. (T-3)

4.2.10. Place the sealed box in a leak preventive mailing pouch (NSN: 6530-01-304-9762 or equivalent) to absorb leakage and prevent damage to other packages during shipment. (T-3)

4.2.11. If an individual box of twelve specimens (sealed in a leak-preventive mailing pouch) is to be shipped, wrap in postal mailing paper with all sides, edges, and flaps sealed and plainly mark the outside of the mailing package, Chain of Custody to alert the drug testing laboratory that chain of custody specimens are in the package. (T-3) The DTPAM should consult the guidelines of the shipper prior to shipping urine specimens. (T-3)

4.2.11.1. DTPAMs may ship several specimen boxes within a larger secondary outer shipping box. To reduce the potential for untestable specimens, the properly sealed, pouched box of twelve specimens with all sides, edges, and flaps secured with an adhesive tape (properly signed and dated) must be placed in a second container. (T-3) The larger secondary outer shipping box must be securely sealed and have the TO and FROM addresses as well as the statement Chain of Custody. (T-3)

4.2.12. Address the package to: HQ, Air Force Drug Testing Laboratory, AFMOA/SGBD, 2480 Ladd Street, Bldg 3750, Lackland AFB, TX 78236-5310. Specimens can be shipped to an alternate DoD drug testing lab if approved in writing by the AF Drug Testing Program Manager at AFMOA/SGBD. Note: PACAF uses the Army Drug Lab at Tripler and they send the specimens there.

4.2.13. Specimens should be shipped the same day as collected. (T-3) If it is not possible to ship the specimens the same day as collected, the sealed specimen box or shipping box should be placed in secured storage under chain of custody. (T-3) The chain of custody must be annotated and documented until the specimen or shipping box is sealed. (T-3) A log should be kept locally that clearly tracks when specimen packages are placed in the control of the shipping agency or company. (T-3) Specimens not mailed within two working days will require a MFR explaining the reason for the delay. (T-3) The MFR must be forwarded to the servicing SJA, and a copy of the MFR must be retained on file for 3 years. (T-3) All AETC bases that participate in EXODUS testing are authorized to extend their shipping day requirement from two to five duty days as necessary.

4.2.14. **Attachment 8** of this AFI provides a sample checklist, which may be used in the packaging and shipment of specimens.

4.3. Acceptable Modes of Transportation.

4.3.1. The DTPAM will ensure that specimens are shipped using one of the following transportation modes. (T-0)

4.3.1.1. United States Postal Service (USPS) first class, certified, registered mail, signature confirmation, or use of a commercial service having the capability to track shipments.

4.3.1.2. Hand delivery under chain of custody.

4.3.1.3. US flag commercial air freight, air express, or air freight forwarder. Use of a commercial service having the capability to track shipments is highly recommended.

4.3.1.4. Defense Transportation System.

4.3.1.5. Foreign flag air carrier when none of the above can satisfy the movement requirement.

4.3.2. Whatever carrier is selected for shipping, the DDRPM/DTPAM must ensure that the shipping requirements and rules of that carrier are met. (T-3)

4.4. Packaging And Shipping Of Specimens Collected In Single Test Kits (STKs) And Collection By Geographically Separated Units.

4.4.1. Collection Procedures for Geographically Separated Units (GSUs).

4.4.2. These Instructions must be followed in order to ensure the integrity of the drug testing program at GSUs is maintained, and the program remains an effective deterrent to illegal drug use. (T-3) DDRPMs/DTPAMs have discretion to work out the most practical method to accomplish specimen collection. GSU commanders will ensure drug testing procedures are followed IAW this Instruction and GSU DTPAMs must work with the host installation DDRP staff to ensure proper collection and shipment of specimens are accomplished. (T-3)

4.4.2.1. Commanders or their GSU DTPAM will be responsible for the notification, collection, and shipment of samples. (T-3) Commanders must select only individuals possessing unquestionable integrity and trustworthiness as GSU DTPAMs to administer the notification, observation, collection, packaging, and shipment processes. (T-3)

4.4.2.2. The GSU DTPAM must:

4.4.2.2.1. Be appointed in writing by the GSU commander. (T-3)

4.4.2.2.2. Receive and open the drug testing package from the host installation. (T-3) The drug testing package contains the desired list of personnel selected for drug testing.

4.4.2.2.3. Notify the member as soon as reasonably possible. (T-3) Notification must be the same as those procedures previously outlined, (i.e., signed commander's letter, dated, and endorsed by the member upon receipt). (T-3) **Attachment 5** provides a sample commander's notification letter.

4.4.2.2.4. Ensure that all members who are selected for testing report to the collection site with a valid military ID card. (T-0)

4.4.2.2.5. Maintain a drug urinalysis testing log and all pertinent documentation associated with the drug testing program. (T-3)

4.4.2.3. Once the member reports to the testing site, the GSU DTPAM will:

4.4.2.3.1. Check the member's military ID card. (T-0)

4.4.2.3.2. Annotate the date and time the member reported for testing on the notification letter. (T-3)

4.4.2.3.3. Document the urine drug testing log with the individual's name, rank, SSN, unit, date, and time of collection, along with the sample accession number (Installation Identification Number). (T-3)

4.4.2.3.4. GSUs may use either NSN 6640-00-165-5778 (12 specimen box) or STKs. (T-3)

4.4.2.3.5. Ask the member to verify identifying data by initialing and signing the drug testing log. (T-3)

4.4.2.3.6. Ensure that the specimen is collected IAW the guidelines established in the AFI, paragraph 5. (T-3)

4.5. Completion of the Chain of Custody Form, DD Form 2624, for Single Test Kit (STK).

4.5.1. A separate DD Form 2624 must be used for each STK. (T-3)

4.5.2. The DD Form 2624 must be completed with the following information: (T-3)

4.5.2.1. Blocks A, 1, 2, 3, 5, and 9 must be completed by the host installation. (T-3)

4.5.2.2. Blocks 6, 7, 8, and 12 must be completed by the trusted agent or GSU DTPAM. (T-3)

4.5.2.3. The last person to handle the specimen will complete blocks 12a, 12b, and 12c.

4.5.2.4. The means of shipment must be entered in block 12d. (T-3)

4.5.2.5. A copy of the completed DD Form 2624 must be faxed to the host installation DDRPM/DTPAM. (T-3) The GSU will maintain for their records a copy of the completed DD Form 2624. (T-3)

4.5.2.6. The original completed DD Form 2624 and any MFRs must be placed in a sealed leak-proof plastic bag inside the box containing the specimen. (T-0) If these documents are sent separately they will not be accepted. (T-0)

4.5.2.7. Forensic Corrections to All Collections Documents. Do not write over information. (T-3) Do not use correction fluid or typewriter correction ribbon. (T-3) Refer to **Attachment 15** for acceptable methods of documenting and correcting errors.

4.6. Packaging and Shipment of STK Specimens.

4.6.1. **Attachment 12** provides a step-by-step pictorial guide on the packaging of specimens. The photos are illustrative only; refer to the text in the paragraphs below for packaging requirements. The DTPAM/GSU DTPAM must:

4.6.1.1. Place the specimen bottle and absorbent pad in the specimen bag provided in the STK and place the specimen in the STK box. (T-0) Place the plastic bag containing the DD Form 2624 and any MFRs in the STK box. (T-0) Only box (Item # CUC-1, UI Case) may be used. Re-used boxes may not be used. (T-0)

4.6.1.1.1. Seal the mailer box by applying adhesive tape one time completely around the sides of the box so the tape overlaps. (T-3)

4.6.1.1.2. Sign, using payroll signature, and date the kit box seal provided with the test kit prior to applying it to the mailer box. (T-3)

4.6.1.1.2.1. The mailer box must be sealed using the kit box seal. (T-3) Apply the signed and dated seal to the mailer box ensuring a portion of the date and signature is across the open edge of the box. (T-3) If the kit box seal does not adhere, use any effective glue to attach the kit box seal. (T-3)

4.6.2. It is highly recommended that STKs be mailed separately. However, if the STKs are mailed in a single shipment, the secondary (outer) container must be sealed IAW the guidelines established in Section D, paragraph 8. (T-3) The individual test kits must be prepared and sealed as outlined above in paragraph **4.4**. (T-3) Do not use confetti-type or popcorn shipping fillers. (T-3)

4.6.2.1. To eliminate a potential challenge to the chain of custody of the specimens, the STK or shipping box containing several STKs should be mailed or shipped immediately after it is prepared for shipment. (T-3) If this is not possible, the sealed STK or shipping box should be placed in secured storage under chain of custody. (T-3) The chain of custody must be maintained and documented until the sealed STK or shipping box is dispatched. (T-3)

4.6.3. For GSU testing:

4.6.3.1. The GSU DTPAM will mail all urine specimens collected for drug testing directly to the AFDTL (or appropriate lab designated by MAJCOM) unless the servicing DDRPM requires the GSU to send samples to the servicing installation DDR office for QC review of samples. (T-3) PACAF mails urine specimens to Army Drug Lab at Tripler.

4.6.3.1.1. In cases of QC checks performed by servicing DDR Office, the chain of custody must remain intact and documented. (T-3) The original chain of custody from the GSU must be annotated by the individual who opens and performs the quality review and ships the specimen(s) to the lab. (T-3) The sample should not be shipped in the same box it was received and may be shipped in a new container or with the installation shipment of specimens. (T-3)

4.6.3.1.2. A sample that has discrepancies will be reviewed by the local SJA and SJA will make a determination of action to include possible re-collection of the untestable sample. (T-3) The DDRPM/DTPAM will ensure the GSU DTPAM understands the discrepancy to preclude re-occurrence. (T-3)

4.6.3.2. In all cases, the GSU DTPAM must ensure that the specimens are mailed within two duty days of collection using one of the transportation modes outlined in chapter **8.** (T-3) Specimens not mailed within two working days will require a MFR explaining the

reason for the delay. (T-3) The MFR must be forwarded to the servicing SJA and a copy kept on file for 3 years. (T-3) In cases of quality review the DDRPM/DTPAM must ensure that the specimens are mailed within two duty days of receipt of samples for QC using one of the transportation modes outlined in chapter 8. (T-3) Specimens not mailed within two working days will require a MFR to the SJA explaining the reason for the delay. (T-3)

Chapter 5

DRUG URINALYSIS TESTING FOR NEW ACCESSIONS

5.1. Personnel to be Tested.

5.1.1. All new accessions into the United States Air Force will be tested. (T-0) The following individuals are required to be tested: (T-0)

5.1.1.1. New enlisted entrants into the Air Force to include officer candidates undergoing initial training in an enlisted status. (T-0)

5.1.1.2. Cadets and Prep School students entering the United States Air Force Academy orthose entering the ROTC. (T-0)

5.1.1.3. Other individuals to whom a commission may be offered following completion of a commissioning program. (T-0)

5.1.1.4. Regular and Reserve officers appointed from civilian life. (T-0)

5.1.1.5. Prior service applicants for enlistment in the active component with a break in service of more than six months. (T-0)

5.1.1.6. Reserve officers entering RegAF after an educational delay following completion of ROTC studies and appointment. (T-0)

5.1.1.7. Foreign and international students entering the United States Air Force Academy will be tested IAW host country agreements. (T-0)

5.1.1.8. Newly assigned ARC members who have not yet attended BMT, COT, BOT, etc., and are participating with a unit of assignment, Development and Training Flight (DFT), etc. for pay and or Points may be randomly drug tested and will be included in the local Reserve DDRP Drug Testing Database for such purposes. (T-1)

5.2. Timing of Testing.

5.2.1. Individuals listed above who are required to undergo testing must be tested within 72 hours after initial entry on RegAF (IEAD). (T-1) IEAD is the member's first period of full-time duty in the active military service of the United States following enlistment or appointment. (T-1)

5.2.2. Enlisted members must be tested at the Basic Military Training School (BMTS). (T-1)

5.2.3. Officers and officer candidates not covered under paragraphs **5.1.1.2** and **5.1.1.3**. must undergo testing during the officer basic courses. (T-1) If an officer's IEAD does not occur at the basic course, testing must be conducted at the officer's permanent duty station. (T-1)

5.2.4. Individuals covered under paragraph **5.1.1.2**. must undergo testing and be evaluated during the physical examination given to the applicant before appointment as a cadet. (T-1)

5.2.5. Individuals covered under paragraphs **5.1.1.4**., **5.1.1.5**., and **5.1.1.6** must be tested within 48 hours following entry at accession locations specified by the Air Force (e.g., first duty station). (T-1)

5.3. Drug Testing Policy.

5.3.1. All new entrants shall be tested for the same drugs as those on RegAF. (T-0) The analysis will be conducted in a DoD certified forensic drug testing laboratory using procedures established by the USD (P&R) as contained in DoDI 1010.16. (T-0)

5.3.2. New accessions (i.e., those individuals on their IEAD) must also present a valid photo ID such as a driver's license, state ID card, or college ID card. (T-2) The individual's SSN must be verified through possession of a Social Security Card. (T-2) Those individuals lacking a valid photo ID card will be required to obtain a military ID card prior to testing. Such individuals will not be excluded from providing a specimen for urinalysis testing. (T-2)

Chapter 6

DRUG TESTING LABORATORY CHAIN OF CUSTODY PROCEDURES

6.1. Chain of Custody Requirements During Analysis.

6.1.1. The drug laboratory establishes written internal chain of custody procedures. (T-3)

6.1.2. The drug testing laboratory receives the chain of custody shipment of specimens.

6.1.3. Employees are trained and certified to perform duties in the Specimen Control Section of the Drug Testing Laboratory: (T-3)

6.1.3.1. Visually inspect each shipment box to determine if the box was sealed properly, or if the box appears to have been opened or tampered with while in transit. (T-3)

6.1.3.2. Open the sealed box or mailer and inventory the bottles to ensure specimen integrity, locate the DD Form 2624, sign and date the DD Form 2624, annotate the mode of transportation by which the specimens were received at the laboratory, and describe the condition of the seals on the shipping package in the remarks block of DD Form 2624 or complete an MFR if appropriate. (T-3)

6.1.3.3. Inspect each bottle and closely examine the tamper evident tape to determine if it is intact. (T-3) If the tape on a bottle is broken on receipt, the sample is not tested unless the discrepancy is explained. (T-3) A notation is made by the drug testing lab personnel on the DD Form 2624 to identify those bottles that arrived at the laboratory with the tamper evident tape broken. (T-3)

6.1.3.4. Inspect each bottle to ensure that it contains a minimum of 30 milliliters of urine, and is not adulterated. (T-3) Volumes below 30 milliliters may not be tested. (T-3)

6.1.3.4.1. Annotate DD Form 2624 to reflect the discrepancy, and ensure submitting unit is informed of the discrepancy. (T-3) A discrepancy letter should be sent to the submitting unit for any discrepancy which is not self-explanatory or needs explanation. (T-3)

6.1.3.4.2. Consult the laboratory legal advisor concerning urine testing discrepancy resolution. (T-3) Ask the laboratory legal advisor to recommend to the laboratory commander resolution if there is a question regarding chain of custody or integrity of the specimen. (T-3)

6.1.3.5. Assign laboratory specimen accession numbers, and label each original specimen bottle and the cap of the bottle to ensure proper identification. (T-3)

6.1.3.6. Keep original specimen bottles secured in a controlled access area at all times until destruction is authorized. (T-3)

6.1.3.7. Prepare portions (aliquots) of each specimen for screen testing and if necessary, rescreen and confirmation testing, and maintain a chain of custody on aliquots using appropriate chain of custody documents. (T-3)

6.1.3.8. Until specimen analysis is completed, laboratory personnel processing the specimen or the aliquot taken from it will ensure that the appropriate chain of custody document is properly signed, dated, and annotated when the sample is received or

released during analysis. (T-3) The individual maintaining custody of the sample or aliquot must safeguard the sample or aliquot at all times. (T-3)

6.1.3.8.1. Once a specimen has been tested and identified as negative by either screen, rescreen, or confirmation testing for all drug classes requested, the specimen is released from the chain of custody and destroyed, unless the specimen is to be used for method development or research purposes. (T-3) In this event, after annotation of destruction on chain of custody, all identifying information will be removed. (T-3)

6.2. Laboratory Chain of Custody Requirements After Analysis.

6.2.1. After specimen analysis is completed, the individual designated by the Commander, Drug Testing Laboratory:

6.2.1.1. Certifies the results on the DD Form 2624 and reports results to the originating agency. (T-3)

6.2.1.2. Reports as negative any specimen that fails to meet or exceed the established DoD minimum concentration for determination as positive for a drug on either the initial screening test, rescreening test, or confirmatory test. (T-3)

6.2.1.3. Ensures for specimens confirmed positive that all results of testing conducted in the laboratory, including applicable printouts, tracings, and chain of custody documents, remain on file secured in the drug laboratory or in a secured storage area. (T-3)

6.2.1.4. Stores specimens confirmed positive in a frozen state in a secure area under proper chain of custody document. (T-3)

6.2.1.4.1. Keeps a military member's frozen specimen and that of a military accession applicant for one calendar year, at the end of which time it is destroyed unless the originating agency has requested that it be retained or the specimen is to be used for method development or research purposes. (T-3)

6.2.1.4.2. If the originating agency requests retention for a longer period, the laboratory will maintain the specimen for the requested period. (T-3) *The originating agency must specify a defined period of time (e.g., six months). (T-3) A request for "indefinite retention" will not be honored by the laboratory.* At the end of this additional retention period, the laboratory will destroy the sample IAW paragraph **6.2.1.4.1** unless the originating agency requests a further retention. (T-3) When this occurs, the requesting agency must advise the laboratory every 60 calendar days of the need for further retention. (T-3) The SJA from the originating agency notifies the drug testing laboratory legal advisor when further retention of the specimen is not necessary. (T-3)

6.2.1.4.3. The individual who destroys a stored specimen annotates, signs, and dates the appropriate chain of custody document. (T-3)

Chapter 7

ADDITIONAL PROCEDURES

7.1. Drug Detection Levels and Reporting Procedures.

7.1.1. The drug testing laboratory will screen specimens by using an immunoassay (IA) process, or other methodologies as approved by ASD (HA) and AFMOA/SGHW for a particular drug, and cut-off levels established by ASD (HA). (T-2)

7.1.2. Laboratory confirmation will be performed by using gas chromatography/mass spectrometry (GC/MS), or other methodologies as approved by ASD (HA) and AFMOA/SGHW for a particular drug. (T-3)

7.1.3. Drug test results certified as positive (i.e. containing drug or drug metabolite) must be reported within an average of six working days of receipt of the specimen within the drug testing laboratory. (T-2)

7.1.4. Requests For Retest:

7.1.4.1. All requests for retests must be made in writing or be sent by electronic message to the laboratory where the original sample is stored. (T-3) The following information is required:

7.1.4.1.1. Purpose of the retest. (T-3)

7.1.4.1.2. The unique BIDN for each specimen. (T-3)

7.1.4.1.3. Laboratory accession number. (T-3)

7.1.4.1.4. SSN of the service member. (T-3)

7.1.4.1.5. Name and telephone number of a point of contact at the requesting installation. (T-3)

7.1.4.2. Retests are performed using the procedures determined by the drug testing laboratory where the original sample is stored. (T-3) The AFDTL, a DoD drug testing lab, or a contract laboratory will retest specimens:

7.1.4.2.1. On request of the submitting command. (T-3)

7.1.4.2.2. On request of an administrative board under rules applicable to the board. (T-3)

7.1.4.2.3. On order of a military judge under rules applicable to courts-martial. (T-3)

7.1.4.3. On request by a service member, or a defense counsel representing the service member, at an independent laboratory of his or her choice, the AFDTL, a DoD drug testing lab, or a contract laboratory certified by DoD or the SAMSHA will send a portion of the service member's sample to the designated laboratory, provided there is sufficient specimen remaining. (T-3) (The service member bears the expense of the retest, to include the cost of shipping). Proof of payment to the independent laboratory must be provided before the specimen will be released for testing by the AFDTL. (T-3)

7.1.4.3.1. Any request for a retest by a service member of a sample analyzed at the AFDTL or a DoD drug testing lab must be made in writing or sent by electronic message to the laboratory where the original sample is stored. (T-3) The request must contain the same information as stated above. (T-3) The request is provided to the commander initiating disciplinary or administrative action and to the commander's SJA. (T-3)

7.1.4.3.2. The service member must have the laboratory where he or she wishes the sample analyzed send confirmation to the AFDTL that the service member has contacted the laboratory and contracted to have the sample tested there. (T-3)

7.1.4.3.3. Once the AFDTL has received the request and written confirmation, a portion of the service member's sample is shipped under chain of custody via overnight mail to the designated laboratory. (T-3) The location of a retest, except for independent retests at the request of a service member, is at the discretion of the DTL where the original specimen is stored.

7.1.5. Steroid Testing.

7.1.5.1. Prior to collecting the specimen for steroid testing, a written, signed request must be submitted to the AFDTL describing the number of specimens, the period during which the specimen is to be collected, and the gender of the donors. (T-3) **Attachment 6** provides a sample format of the request letter. Failure to coordinate prior to collection may result in the specimen not being tested for the special steroid test. (T-3)

7.1.5.2. Specimens collected solely for steroid testing must contain at least 60 milliliters of urine. (T-3) Specimens collected solely for steroid testing must be collected, shipped, and processed separately and differently from those requiring routine testing. (T-3)

7.1.5.3. If routine drug testing is required in addition to steroid testing, an additional 30 milliliter specimen must be collected **in a separate bottle**. (T-3) The specimen intended for routine drug testing must be collected and shipped as normal. (T-3)

7.1.5.4. Upon receipt of the approval letter, ship the specimen as outlined in the letter. (T-3) Use a separate DD Form 2624 for shipping specimens to be tested for the presence of steroids. (T-3) Do not list specimens requiring steroid testing on the same DD Form 2624 as those specimens requiring routine testing. (T-3)

7.1.6. Special Testing. Testing for the presence of drug or drug metabolites other than those routinely tested by the AFDTL may be requested by the DDRPM/DTPAM to AFMES through the Air Force Drug Testing Program Manager or lab legal advisor. Failure to coordinate prior to collection may result in the specimen not being tested for the special test. Specimens will be collected with their own chain-of-custody and mailed directly to AFMES. (T-3) If the standard panel is also desired, that should be so indicated on the memorandum to AFMES. (T-3) The AFDTL should only receive specimens for the standard panel and/or steroids. (T-3)

7.2. Drug Testing Laboratory Procedures.

7.2.1. The Air Force Drug Testing Laboratory shall establish internal procedures, approved by AFMOA/SGHW. (T-3)

7.2.2. Procedures shall be documented in unit Operating Instructions (OI) and shall address the following: (T-3)

7.2.2.1. Facility security requirements and laboratory personnel security measures. (T-3)

7.2.2.2. Data security and laboratory information management security measures. (T-3)

7.2.2.3. Specimen receipt and intra-laboratory chain of custody procedures. (T-3)

7.2.2.4. Forensic testing procedures for conducting initial screens, rescreens, confirmatory tests, and retests for each drug analyzed. (T-3)

7.2.2.5. An internal QC and QA program. (T-3)

7.2.2.6. Administrative processes. (T-3)

7.2.2.7. Participation in the AFIP/AFMES external QC program. (T-3)

7.2.3. The OIs developed by the AFDTL shall be kept current and reviewed annually by the laboratory director. (T-3)

7.2.4. As sections are replaced, historical records of procedures and the dates used shall be maintained in accordance with appropriate laboratory records management plan. (T-3)

7.2.5. The certified drug testing laboratory shall abide by the administrative and technical requirements of DoDI 1010.16., and additional administrative or technical guidance required by USD (P&R), AFIP.AFMES, and or AFMOA/SGHW to include: (T-0)

7.2.5.1. Maintaining an OI manual for the drug testing technical procedures. (T-3)

7.2.5.2. Maintaining intact chain of custody during the processing of specimens or aliquots of the specimen used in testing from receipt to disposal of the specimen. (T-3)

7.2.5.3. Maintaining a tracking record and chain of custody when processing aliquots of the specimen for shipment to another laboratory for testing. (T-3)

7.2.5.4. Establishing and maintaining a forensically secure information management system of limited access, sequential processing of testing requirements, audit trails of data access, edits, deletions, or data changes. (T-3)

7.2.5.5. Documenting qualifications and training of laboratory personnel. (T-3)

7.2.5.6. Keeping maintenance and repair records for each instrument used in testing. (T-3)

7.2.5.7. Validating analytical methods used for each drug. (T-3)

7.2.5.8. Participating, satisfactorily, in a certification round of AFIP/AFMES proficiency sample analysis for each drug group being routinely tested and maintaining satisfactory performance in ongoing AFIP/AFMES proficiency (open) and blind QC sample programs. (T-3)

7.2.5.9. Maintaining an internal QC program consisting of at least five percent controls and standards, including blind positives and negatives in screening and blind negatives in confirmation. (T-3)

7.2.5.10. Maintaining an internal QA program that includes monitoring the timeliness and effectiveness of discrepancy resolution and health of overall performance of drug testing processes as compared to scientific and forensic requirements. (T-3)

7.2.5.11. Establishing procedures to ensure timely responses to discovery requests and other inquiries from authorities. (T-3)

7.2.5.12. Maintaining DoD certification and participating satisfactorily in an ongoing DoD inspection process. (T-0)

7.3. Supplies.

7.3.1. Supplies to be used in conjunction with the Drug Demand Reduction Program (DDRP) are as follows:

7.3.1.1. Bottle, urine specimen, shipping 120S, NSN 6640-00-165-5778 (standard mouth), (or other as stipulated by HQ USAF or DoD); NSN 6530-00-837-7472 or NSN 6530-01-048-0855 (wide mouth). (T-3)

7.3.1.2. Envelope (pouch), mailing, plain white, 4 1/8 x 9 ¾ inches, NSN 6530-01-304-9762 or equivalent. (T-3)

7.3.1.3. Label, Avery shipping 2” X 4”, #5163 (T-3)

7.3.1.4. Label, pressure sensitive. **Attachment 7** provides a sample request letter for ordering bottle labels from the drug testing lab. (T-3)

7.3.1.5. Paper, craft untreated, wrapping, NSN 8135-00-290-3407 (24 inches) or equivalent; NSN 8135-00-160-7764 (36 inches) or equivalent. (T-3)

7.3.1.6. Absorbent pad, NSN 6530-01-304-9754 or equivalent. (T-3)

7.3.1.7. Tape, tamper evident. (T-3)

7.3.1.8. Sealable leak-proof plastic bags, NSN 8510-00-837-7755 or equivalent. (T-3)

7.3.1.9. One-inch wide strapping tape, NSN 7510-00-582-4772 or equivalent. (T-3)

7.3.1.10. Brown postal mailing tape, NSN 7530-00-079-7905 or equivalent. (T-3)

7.3.1.11. DoD-certified Drug Testing Program Software. (T-3)

7.3.1.12. Single Test Kits (STKs). (T-3) STKs may be purchased from Tri-Tech Incorporated, 4019 Executive Park Blvd, S.E., Southport, N.C., 28461, 1-800-438-7884, fax: 910-457-0094. Item number CUC-1, Single Bottle Urine Specimen Collection Kit. 100 kits per case.

7.3.1.13. Bluing agent for toilet. (T-3) Used to prevent specimen dilution for individuals having a medically documented verified shy bladder or situational anxiety, or physical abnormalities that inhibit or preclude on-demand observed urine collection.

7.3.1.14. Self-Adhesive Temperature Strip – Code: 855, UI ea (T-3)

Source: AlcoPro Drug & Alcohol Testing Products
(800) 227-9890 http://www.alcopro.com/
or infrared thermometer

7.3.1.15. NSN for Specimen box - 6640-00-165-5778 (standard mouth) boxes and bottles are normally bought as a unit. Extra boxes without bottles may also be ordered: (T-3)

Source: Alpha Points Association for the Blind
7501 Prospect
Kansas City, MO 64132

7.3.1.16. Disposable gloves. (T-3)

7.4. Drug Testing Report Requirements/Drug Testing Metrics.

7.4.1. Each DDRPM/DTPAM must use appropriate metrics to monitor performance of the military drug testing program. (T-3) These metrics must be provided to the appropriate installation or wing commander on a quarterly basis. (T-3) Demographic data for metrics (obtained from the drug testing laboratory, Defense Manpower Data Center (DMDC) or higher headquarters) may be made available upon request through the MAJCOM DDRPM to the Air Force Drug Testing Program Manager.

7.4.2. Each Installation CC will determine what quarterly performance metrics s/he would like to receive. Possible metrics are: (T-3)

7.4.2.1. Number of testing days per each month during the quarter.

7.4.2.2. Number of individuals selected for testing per each month during the quarter.

7.4.2.3. Number of individuals selected that were actually tested per each month during the quarter.

7.4.2.4. Number of individuals selected and notified for testing but failed to show without justification (No-Show).

7.4.2.5. Number of individuals identified as No Contact by the Trusted Agents. (No Contact means the trusted agent diligently attempted to contact the selected individual, without success, and the individual was not on leave, pass, TDY, quarters, flying status, crew-rest, missile duty, or non-duty status).

7.4.2.6. Number reporting to the testing facility outside the two-hour window of notification.

7.4.2.7. Percentage of specimens deemed untestable by the drug testing laboratory per each month during the quarter.

7.4.2.8. Number of individuals tested positive by individual drug category (THC, COC, AMP, and any other drugs listed by DoD).

7.4.2.9. Any data describing special testing and/or steroid testing.

7.4.2.10. Collection percentage rate toward annual collection target (100% end strength).

7.5. Use Of Urinalysis Results.

7.5.1. Commanders' Options for use of urinalysis results. See **Table 7.1**.

7.5.1.1. Commanders must consult with the local SJA prior to initiating any disciplinary or adverse actions based on the results of Air Force drug testing. (T-2)

Table 7.1. Actions Authorized by Positive Drug Test Results.

Basis for Test	Affects Discharge Characterization	Administrative Actions (See Note 1)
Inspection Military Rules of Evidence (MRE) 313, (See Note 2)	Yes	Yes
Voluntary Consent - MRE 314(e)	Yes	Yes
Probable Cause - MRE 315-316 (See Note 3)	Yes	Yes
Commander Directed - (See Note 4)	No	Yes
Self Identification, Initial Testing (See Note 5)	No	Yes
Valid Medical Purpose MRE 312(f) (See Note 6)	Yes	Yes

NOTES

1. Administrative actions include, but are not limited to, letters of admonishment, counseling and reprimands, denial of re-enlistment, removal from Personal Reliability Program (PRP), removal from duties involving firearms, removal from flying status or sensitive duties, suspension of security clearance, and removal of restricted area badges. If there are any questions regarding actions authorized for positive drug test results, consult the local servicing SJA.
2. Inspections under Military Rules of Evidence (MRE) 313(b) include inspections under the installation's random urinalysis drug testing program and unit or gate sweeps.
3. Probable cause tests are authorized searches and seizures ordered by a military magistrate or appropriate commander (See MRE 315 and 316).
4. Absent probable cause, commander directed results may not be used for disciplinary action under the UCMJ or to characterize an administrative separation. EXCEPTION: Commander directed results may be offered for impeachment purposes or in rebuttal in any proceeding in which a service member first introduces evidence in a proceeding to infer or support a claim of non-use of drugs.
5. Members may not be disciplined under the UCMJ when they legitimately self-identify for drug abuse and enter the ADAPT Program. In the interests of unit safety and security, commanders may initiate non-adverse administrative actions such as removal from flying status, removal from the PRP, removal of restricted area badges, etc. Urinalysis tests of individuals following entry into the ADAPT Program are for valid medical purposes. Individuals in the ADAPT Program may also be disciplined under the UCMJ when independent evidence of drug use is obtained.
6. Urine specimens obtained from an examination for a valid medical purpose may be used for any purpose.

7.6. Inability To Provide A Urine Specimen.

7.6.1. Since members have been required to provide urine samples in direct observation since basic training, commands should take all precautions to ensure the member is not attempting to defeat the drug testing process. (T-2) If a member claims to be unable to provide a sample during the command's collection period, the member shall be turned over to the command and remain under observation at all times until a sample is provided. (T-2) If, after a period of 8 hours, the member still cannot provide a urine sample, member shall be examined by a military medical authority to investigate possibility of physical problems. (T-3) Under no circumstances will an otherwise healthy person, unable or unwilling to provide a sample, be catherized solely for the purpose of obtaining a urine sample. (T-2)

7.6.2. Examination should be completed the same day of the collection and documented in member's medical record. (T-3) If failure to provide a sample is a chronic problem, member shall be sent to the MTF for further evaluation. (T-3)

7.7. Demand Reduction Outreach Activities And Use Of Appropriated Funds (outreach activities are optional based on funding)/Financial Management Activities.

7.7.1. DDRPMs or MAJCOM DDRPMs prepare and submit both Budget and Financial Plans for their DDRP as required locally, but no later than 15 Aug of the current year, for the upcoming fiscal year. (T-3) Financial Plans will outline the DDRP requirements and plan of execution by month, quarter, and year. (T-3)

7.7.1.1. Budgets will be prepared IAW the DoD Financial Management Regulation (DoDFMR); AFI 65-601 V1, *Budget and Guidance Procedures*; and annual execution guidance provided by DASD/CN; Deputy Assistant Secretary for Budget, Directorate of Budget Operations (SAF/FMBO); and AFMOA. (T-0) Work in conjunction with MAJCOM resource management personnel to ensure all budgetary documents are processed correctly. (T-0)

7.7.1.1.1. DDRPMs or MAJCOM DDRPMs review annual funding, projects, cost analysis, and efficient use of funds for travel, outreach, education, and training purposes. (T-3) Initiate appropriate paperwork to accomplish budgeting tasks. (T-3) All counternarcotics programs are funded through Central Transfer Account from DASD/CN. An A40 limitation is placed on these funds, which means funds cannot be added to or subtracted from the amount provided by SAF/FMBO. (T-3) This also means funds may not be reprogrammed out of the program for non-counter narcotics purposes, nor executed for non-counternarcotic activities. (T-3)

7.7.1.1.2. DDRPMs/DTPAMs provide monthly obligation data, to include medical supply transactions, from Defense Medical Logistics Supply System (DMLSS) to MAJCOM's resource management personnel in order to consolidate and forward to SAF/FMBOO no later than (NLT) the 20th of each month. (T-3) Also, notify resource management personnel of any vacant counter narcotics civilian personnel positions for MAJCOM Financial Management (FM) to provide full time equivalent (FTE) quarterly report to SAF/FMBO. (T-3)

7.7.1.1.3. Regularly review program status and reprogram funds in a timely manner. (T-3) DASD/CN requires approval on all moves between DDRP project codes (PC): 8460 drug testing collection, 8484 prevention/outreach, and 8470 drug testing

laboratory operations. Requests for realignment must be submitted by MAJCOM, through AFMOA/SGHW to OSD/PR for approval. (T-3) Once approved, SAF/FMBOO will issue a funding authorization document re-aligning funds to facilitate full execution. (T-3)

7.7.1.1.3.1. Responsibility Center/Cost Center (RCCC) XX5950 and other RCCCs go with Project Code (PC) 8460 (Dem Redux - Collection Costs); include Civilian Pay in this data retrieval. (SG will use RCCC B00164).

7.7.1.1.3.2. RCCC XX5949 goes with PC 8464 (Dem Redux – Prevention, Education and Outreach) (SG will use RCCC B0016C).

7.7.1.1.3.3. Operating Agency Code (OAC) 15 Operating Budget Account Number (OBAN) BH goes with PC 8470 (Drug Lab).

7.7.1.1.4. Maintain program accountability IAW DoDDs and AFMOA/SGHW and/or MAJCOM guidance to include establishing and maintaining administrative files, complete records of all official DDRP transactions (including medical supplies in the Defense Medical Records Disposition Schedule located in AFRIMS at **https://www.my.af.mil/afrims/afrims/afrims/rims.cfm**. (T-3)

7.7.1.1.5. Ensure expenditures of DDRP fenced funds meet all appropriate budget code limitations. (T-3) All resources, equipment, medical supplies and materials purchased with DDRP funds are audited annually. (T-3)

7.7.1.1.6. Ensure proper coordination with MAJCOM FM and contracting offices. (T-3)

7.7.1.2. AFRC only: Coordinate with SAF/FMBO for budget planning and execution of the AFRC DDRP. (T-3)

7.7.1.3. DDRPMs/DTPAMs ensure proper expenditure of funds for outreach activities in strict accordance with AFI 65-601V1, paragraph **4.29**, Awards and Gifts. Special attention should be given to section 4L, Awards, Awards Ceremonies and Gifts. (T-1)

THOMAS W. TRAVIS
Lieutenant General, USAF, MC, CFS
Surgeon General

Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References

AFI 33-332, *Privacy Act Program,* 5 June 2013

AFI 36-2907, *Unfavorable Information File (UIF) Program,* 17 Jun 2005

AFI 36-3209, *Separation and Retirement Procedures for Air National Guard and Air Force Reserve Members,* 14 April 2005

AFI 44-121, *Alcohol and Drug Abuse Prevention and Treatment (ADAPT) Program,* 11 April

AFMAN 33-363, *Management of Records,* 1 Mar 2008

AFMAN 91-223, *Aviation Safety Investigations & Records,* 16 May 2013

AFPD 44-1, *Medical Operations,* 01 Sep 1999

AFPD 90-5, *Community Action and Information Board*, 15 Oct 2002

Article 92**,** *Failure to Obey Order or Regulation, Uniform Code of Military Justice*

ASD(SO/LIC) Memorandum, 3 Jan 2012

DoDI 1010.01, *Military Personnel Drug Abuse Testing Program,* 13 Sept 12

DoDI 1010.04, *Problematic Substance Use by DoD Personnel*, 20 Feb 14

DoDI 1010.16, *Technical Procedures for the Military Personnel Drug Abuse Testing Program,*10 Oct 12

Prescribed Forms

None

Adopted Forms

AF Form 847, *Recommendation for Change of Publication*

DD Form 2624, *Specimen Custody Document – Drug Testing*

Abbreviations and Acronyms

ADAPT—Alcohol and Drug Abuse Prevention and Treatment

AFDTL—Air Force Drug Testing Laboratory

AFI—Air Force Instruction

AFIP—Armed Forces Institute of Pathology

AF/JA—Headquarters, United States Air Force, Judge Advocate

AFMAN—Air Force Manual

AFMES—Armed Forces Medical Examiner System

AFMOA—Air Force Medical Operations Agency

AFRC—Air Force Reserve Command

AF/SG—United States Air Force, Surgeon General

AFMOA/SGHW—Air Force Medical Operations Agency/Mental Health Division

AFRIMS—Air Force Records Information Management System

AGR—Active Guard Reserve

AMP—D-AMP and D-methamphetamine

ANG—Air National Guard

ARC—Air Reserve Component

BIDN—Installation Identification Number

BMTS—Basic Military Training School

BTAB—DoD level Biochemical Testing Advisory Board

CC—Command/Commander

DASD/CN—Deputy Assistant Secretary of Defense for Counternarcotics

DMCD—Defense Manpower Data Center

DO—Doctor of Osteopathy

DoD—Department of Defense

DoDD—Department of Defense Directive

DoDI—Department of Defense Instruction

DDR—Drug Demand Reduction

DDRPM—Drug Demand Reduction Program Manager

DRU—Direct Reporting Unit

DTPAM—Drug Testing Program Administrative Manager

FM—Financial Management

FOA—Field Operating Agency

GMU—Guard Medical Unit

GSU—Geographically Separated Unit

HA—Health Affairs

HAF—Headquarters Air Force

HHS—Department of Health and Human Service

HQ—Headquarters

IA—Immunoassay

IAW—In Accordance With

IEAD—Initial Entry on Active Duty

ID—Identification

iFTDTL—Internet Forensic Toxicology Drug Testing Laboratory

IO—Inspection Testing

IR—Random Testing

JA—Judge Advocate

LAN—Laboratory Accession Number

LCO—Laboratory Certifying Official

MAJCOM—Major Command

MD—Doctor of Medicine

MFR—Memorandum for Record

MOA—Memorandum of Agreement

MOU—Memorandum of Understanding

MPF—Military Personnel Flight

MRO—Medical Review Officer

MRE—Military Rule of Evidence

MTF—Medical Treatment Facility

NCO—Noncommissioned Officer

NSN—National Stock Number

OCR—Office of Collateral Responsibility

OI—Operating Instruction

OPI—Opiates (morphine, codeine)

OPR—Office of Primary Responsibility

OXY—Oxycodone, Oxymorphone

PCA—Permanent Change of Assignment

PCP—Phencyclidine

PCS—Permanent Change of Station

PEC—Program Element Code

PM—Program Manager

PRP—Personnel Reliability Program

QA—Quality Assurance

QC—Quality Control

RDS—Records Disposition Schedule

RMU—Reserve Medical Unit

RO—Rehabilitation Testing

ROTC—Reserve Officers' Training Corps

SECAF—Secretary of the Air Force

SAF/FM—Office of the Assistant Secretary of the Air Force for Financial Management and Comptroller

SAF/FMBO—Deputy Assistant Secretary for Budget, Directorate of Budget Operations

SAF/MR—Office of the Assistant Secretary of the Air Force for Manpower and Reserve Affairs

SAMHSA—Substance Abuse and Mental Health Services Administration

SJA—Staff Judge Advocate

SSN—Social Security Number

STK—Single Test Kit

TDY—Temporary Duty

THC—Tetrahydrocannabinol

UCMJ—Uniform Code of Military Justice

UIF—Unfavorable Information File

USD(P&R)—UnderSecretary of Defense for Personnel and Readiness

USPS—United States Postal Service

VO—Consent Testing

Terms

Adhesive Tape—Includes: masking tape, gummed paper tape, strapping tape, package sealing tape.

Collector—General designation referring to the DTPAM.

Community Outreach—Defined as on and off base prevention, drug education/awareness and deterrence activities targeted to DoD family members, retirees, civilians and contractors.

Consent Testing—Prior to a probable cause or commander-directed urinalysis test, first ask the member if he or she will consent to a urinalysis test. Commanders are not required to give Article 31, UCMJ, rights prior to asking for consent; however, evidence that a member was read these rights may be used to help demonstrate the member's consent was voluntary. Results may be used for UCMJ or administrative actions, including adverse characterization of administrative discharges. Consent is not valid if it is mere acquiescence to authority. See Military Rule of Evidence (MRE) 314(e). While not required, it is best to obtain the member's consent in writing.

Drug—Any controlled substance included in Schedules I, II, III, IV, and V in 21 U.S.C. 812, including anabolic or androgenic steroids, or any intoxicating substance other than alcohol, that is inhaled, injected, consumed, or introduced into the body in any manner to alter mood or function.

Drug Abuse—The wrongful use, possession, distribution, or introduction onto a military installation, or other property or facility under military supervision, of a controlled substance, prescription medication, over-the-counter medication, or intoxicating substance (other than alcohol) .

—Wrongful means without legal justification or excuse, and includes use contrary to the directions of the manufacturer or prescribing healthcare provider, and use of any intoxicating substance not intended for human ingestion. (For purposes of this Instruction, drug abuse also includes inhalant abuse (sometimes referred to as **—**huffing) and steroid usage other than that specifically prescribed by a competent medical authority.) For prescription medication, the mere passage of time does not necessarily render the use or possession of an otherwise validly prescribed medication wrongful. Violators are subject to punitive action under the UCMJ and/or adverse administrative actions.

Drug Demand Reduction Program Manager (DDRPM)—Individual hired or appointed by the installation commander or equivalent to be responsible for oversight of the military and civilian drug testing programs and drug outreach, education, and prevention. Also responsible for training and certifying assigned DTPAMs for specimen collection.

Drug Testing Program Administrative Manager (DTPAM)—Individual hired or appointed by the installation commander or equivalent to administer collection, processing, and shipping of specimens and safeguarding of applicable information pertaining to the drug testing program.

EXODUS testing—Testing of technical students returning from the Christmas/New Year's holiday break.

Field Testing—Any drug urinalysis testing which is performed outside of the Air Force Drug Testing Laboratory, a DoD certified drug testing laboratory, or a Department of Health and Human Service (HHS) drug testing laboratory, employing methodology which is defined as a rapid screening test.

Geographically Separated Unit (GSU)—Units that physically reside outside of the host unit.

GSU DTPAM—An individual appointed by the senior officer at a GSU entrusted to safeguard and manage the collection and shipping aspects of the drug urinalysis program.

Inspection Testing—Random inspection testing is the best deterrent presently available against drug abuse. Urine specimens may be ordered as part of an inspection under Military Rule of Evidence (MRE) 313(b). Inspections may be conducted to determine: if the command is functioning properly; if proper standards of readiness are maintained; and if personnel are present, fit and ready for duty. Individual members may not be singled out. An entire unit or a part of the unit may be inspected or may be an installation-wide random selection process. Results may be used for UCMJ or administrative actions, including adverse characterizations of administrative discharges. In the case of *United States v. Bickel*, 30 MJ 277 (CMA, 1990), a properly conducted random urinalysis constitutes an inspection under MRE 313 in an effort to determine/ensure the security/fitness, good order, and discipline of a unit. In *Bickel*, the Court of

Military Appeals (now the Court of Appeals for the Armed Forces) held that properly conducted "follow-up" urinalyses after an initial positive result are simply an extension of the original urinalysis; thus, all succeeding positive results are part of the same original random inspection.

Operating Instruction (OI)—Technical and policy procedures generated and used by the drug testing laboratory governing specific aspects of specimen analysis.

Observer—A service member assigned duty to observe the collection of urine specimens from service members.

Probable Cause—Requires a search and seizure authorization from the appropriate commander to seize a urine specimen. Probable cause exists when there is a reasonable belief that drugs will be found in the system of the member to be tested. See MRE 315(f) and consult with the SJA regarding procedures for determining whether there is probable cause. Results may be used for UCMJ or to characterize administrative discharges.

Rehabilitation Urine Testing—Rehabilitation testing is a form of commander-directed testing. A member in drug rehabilitation will be urine tested on a no-notice basis. The unit commander may discontinue rehabilitation urine testing once a courts-martial or separation action is initiated on a member in rehabilitation.

Secure Storage—Secure storage is an area used to store all materials and specimens that hold the potential of being useful as evidence in a court proceeding or administrative hearing. Its level of security must be on par with evidence storage security used by law enforcement. At a minimum, a secure storage area must be maintained with access limited and controlled by

appropriate procedures and the two layers of locks or other devices to prevent unauthorized access.

Trusted Agent—An individual appointed by unit commanders to receive and maintain rosters of individuals (notification letter from the collector) selected for urinalysis testing. The Trusted Agent is responsible for notifying, via commander's order, individuals selected for urinalysis testing and identifying those individuals unavailable for testing.

Attachment 2

SAMPLE FORMAT – INSTALLATION LEVEL TRAINING MANUAL

A2.1. An identifiable mission statement.

A2.2. Detailed job description that clearly defines areas of responsibilities.

A2.3. Detailed training plan for orientation of new personnel to the functional roles and responsibilities of the Drug Demand Reduction Program Manager and the Drug Testing Program Administrative Manager positions. The training plan must include a systematic process ensuring appropriate review and comprehension of supportive program documentation.

A2.4. Appropriate documents essential for providing program continuity to include but not limited to:

a. AFI 90-507, *Military Drug Demand Reduction Program*
b. DoDD 1010.1, *Military Personnel Drug Abuse Testing Program*
c. DoDI 1010.16, *Technical Procedures for the Military Personnel Drug Abuse Testing Program*
d. DoDD 1010.4, *Drug and Alcohol Abuse by DoD Personnel*
e. DoDD 1010.9, *DoD Civilian Employee Drug Abuse Testing Program*
f. Standard Operating Procedures Manual for Processing and Testing Urine Specimens at Department of Defense Certified Forensic Drug Testing Laboratories
g. Air Force Civilian Drug Testing Plan
h. Guidance memoranda from Higher Headquarters relevant to the Drug Demand Reduction Program
i. MAJCOM, installation or unit supplements to AFI 90-507
j. AFMAN 91-223, *Aviation Safety Investigations & Records*

A2.5. Maintenance of appropriate statistics

A2.6. Copies of quarterly SJA assessments

A2.7. Copies of HSI/AAAHC/JCAHO evaluations

A2.8. Copies of relevant briefings, talking papers, etc.

A2.9. Initial and quarterly completion of interactive training

A2.10. Action plans and timetables for resolution of problems identified by either statistical analysis or program review processes.

Attachment 3

SAMPLE COLLECTION SITE CHECKLIST

A3.1. Verify the identification of each individual through a valid military identification (ID) card. Maintain possession of the individual's military card until the collection process is completed.

A3.2. Enter the following information in the urine drug testing ledger or register: Month, day, and year of collection; BIDN, batch number, and specimen number; the individual's complete social security number (SSN); the individual's rank; individual's initials and printed name; time the member provided his/her specimen.

A3.3. Ensure that specimen bottles are clean and do not have holes. If a pre-printed bottle label is not available, ensure the following information is annotated on the bottle: collection month, day, and year; BIDN; and the individual's complete SSN.

A3.4. Hand the empty specimen bottle to the individual. Have the individual inspect the bottle in the presence of the designated same-gendered observer to make sure it is clean and free of debris. Instruct the individual to carry the specimen bottle so that it is in the view of the observer at all times. For GSUs, break the seal of the STK in the presence of the individual.

A3.5. Direct the individual providing the specimen to remove bulky outer garments (e.g., ABU/BDU blouse), if direct observation by the observer may be impeded. Also, have the donor remove any genital piercing jewelry and thereafter wash hands with water only.

A3.6. After the individual and observer return, receive the urine specimen from the individual, visually check for adulteration, and ensure the urine volume is a minimum of 30 milliliters. (If contamination or adulteration is suspected, or the individual provides insufficient quantity, direct the individual to remain in the area until an acceptable sample is collected). In the event the individual provides an insufficient volume, the DTPAM will void the bottle (with the label) and the entry in the ledger or register. The DTPAM will annotate the logbook as Quantity Not Sufficient or QNS. The DTPAM in turn will direct the individual to discard the specimen. The observer must witness the discarding of the specimen by the individual. The bottle will be returned to the DTPAM who will dispose of it IAW Occupational Safety and Health Administration (OSHA) guidelines.

A3.7. Have the individual initial and sign (payroll signature) by their printed name in the ledger after verifying that the SSN annotated on the bottle label matches the entries in the ledger or register.

A3.8. If sufficient volume is collected, the DTPAM will in the presence of the individual apply tamper-resistant tape (conforming to the shape of the bottle to minimize tearing) extending from approximately halfway down and over the gummed label (not obliterating any identifying information), across the bottle cap, and to an approximate midpoint on the other side of the specimen bottle.

A3.9. Have the individual initial and date the bottle label to certify the SSN and other identifying information on the specimen bottle is correct, that the member witnessed the application of the tamper-resistant tape, and that the specimen in the bottle is the individual's.

A3.10. Have the observer date and initial the bottle label on the line marked OB INIT to certify the integrity of the collection process and that the urine is the individual's.

A3.11. Have the observer print his/her name where designated in the ledger, initial, and sign his/her payroll signature next to the individual's entry.

A3.12. Maintain line-of-sight custody of collected specimens during the collection process or place the specimen in secured storage with proper chain of custody entries (on DD Form 2624).

Attachment 4

SAMPLE LETTER – DRUG TESTING OBSERVER'S BRIEFING

PRIVACY ACT STATEMENT: Warning: This document may contain FOR OFFICIAL USE ONLY (FOUO) and/or Privacy Act information exempt from mandatory disclosure under the Freedom of Information Act. If so, exemption 5 U.S.C. 552 (b)(6) applies. This document may also contain personal information that is protected by the Privacy Act of 1974 as amended, which must be protected IAW DoD 5400 - 11R, and/or sensitive information that is being e-mailed as the most convenient method of transacting business. As such, it must be safeguarded from unauthorized disclosure. This information may be provided to appropriate Government agencies when relevant to civil, criminal or regulatory investigations or prosecutions. The Social Security Number, authorized by Public Law 93-579 Section 7 (b) and Executive Order 9397, is used as a unique identifier to distinguish between employees with the same names and birth dates and to ensure that each individual's record in the system is complete and accurate and the information is properly attributed.

A4.1. You must be of the same sex as the member being observed and you must not be scheduled to provide a sample on the same date that you are to observe specimen collection.

A4.2. You may not be an observer if you have an unfavorable information file or if an action under the UCMJ or an adverse administrative action is pending against you. Nor may you be an observer if you have a recent record (within five years) of conviction by courts-martial or civilian criminal court for matters not involving dishonesty, fraud, or drug abuse. Additionally, you are ineligible if you have a record of conviction by courts-martial or civilian court or have received non-judicial punishment under Article 15, UCMJ, or a Letter of Reprimand or similar administrative action (Letter of Admonishment, Letter of Counseling) for misconduct involving dishonesty, fraud, or drug abuse (including use, possession, or distribution).

A4.3. You may not be an observer if you are within six (6) months of either separation or retirement from RegAF. In the case of the Air National Guard and Air Force Reserve members, you may not be an observer if you are within one (1) year of either separation or transfer from an active participation status.

A4.4. You may not be an observer if you are on a medical profile that will prevent you fromperforming your assigned duties as an observer.

A4.5. You must observe the member receive the empty specimen bottle from the drug testing monitor and you must enter the rest room with the member. You must direct the member to wash his/her hands with only water then dry them prior to providing a specimen (they may wash their hands with soap and water after providing a sample and securing the lid on the bottle). You must observe the member urinating directly into the labeled specimen bottle and capping it. If a female chooses to use the optional wide-mouthed sterile collection cup, you must directly observe the member providing the specimen, pouring the urine into the labeled specimen bottle and capping it. As an observer, you are required to ensure that the specimen provided is not contaminated or altered in any way.

A4.6. You will stay with the member until ready to exit the bathroom. Neither the member nor the specimen bottle can be out of your sight at any time. You will observe the member carry the specimen bottle out of the bathroom and hand it to the drug testing monitor. You will observe

the member initial and date the specimen bottle label. You will then initial and date the bottle label. **NOTE:** DO NOT HANDLE THE SAMPLE AT ANY TIME UNTIL IT IS TIME TO INITIAL THE LABEL.

A4.7. You will print your name where designated in the ledger. Initial and sign your payroll signature next to the member's entry.

A4.8. You will observe the drug testing monitor apply the tamper-proof tape to the bottle and print and sign your name and initials on the log.

A4.9. You will report all incidents of suspected abuse, adulteration, or unusual behavior, by the member being tested to the DTPAM or DDRPM, and the legal office immediately. You will be required to document your report in a memorandum for record.

A4.10. Provide your signature and other information below acknowledging that you have read and understand your duties as an observer and may be called upon to testify as a witness in legal proceedings.

DATE PRINTED

NAME	RANK	SSN	SIGNATURE	INITIALS

Attachment 5

SAMPLE LETTER – COMMANDER'S NOTIFICATION OF SELECTION TO PROVIDE URINE SPECIMEN

[DATE]
MEMORANDUM FOR [RANK, FIRST NAME, LAST NAME]

FROM: **/CC

SUBJECT: Notification of Selection to Provide a Urine Specimen – Inspection Testing

1. You have been selected to provide a urine specimen for drug testing purposes. Compliance with AFI 90-507 requires that you:

a. Report to (building, room, time, and date for test) with this notification letter and Military ID card.
b. Surrender your military identification (ID) card upon arrival at the testing location and remain at the testing location until you have provided your urine specimen. When your ID card has been returned, you have been given permission to leave.
c. Remove bulky outer garments (e.g., ABU blouse) to prevent direct observation by the observer from being impeded.
d. Remove all genital body piercing jewelry.
e. Wash your hands (with water only) after removal of any genital body piercing jewelry.
f. No hats, purses, bags, briefcases, or other baggage may be brought into the collection room.
g. Be observed urinating directly into the bottle, or other receptacle, provided to you for collecting the urine specimen.
h. Avoid contaminating the specimen. Fill the bottle, or other receptacle provided to you, with a minimum of 30 milliliters of your urine.

2. Failure to comply with these instructions in any way may result in disciplinary action against you under the Uniform Code of Military Justice (UCMJ). You will acknowledge that you have read this notification and understand it by signing below.

RICHARD J. ANYBODY, Col, USAF
Commander

1st Ind, (Rank, First Name, Last Name)
TO: **/CC
I have read and understand this notification. I further understand that failure to comply with this notification in way may result in disciplinary action under the UCMJ.

Date/Time Notified:

_____
(First Name, Last Name, Rank

Attachment 6

SAMPLE LETTER – REQUESTING STEROID TESTING

DATE

MEMORANDUM FOR AFMOA/SGHW

FROM: (REQUESTING UNITS' COMPLETE MAILING ADDRESS)

SUBJECT: Request for Steroid Testing

1. Request approval to be granted for the testing of [specify number] specimens for the presence of steroids.

2. [Provide justification to include the member's SSN and gender.]

3. [Indicate POC and phone number.]

Signature Block of DDRPM

PERSONAL DATA – PROTECTED UNDER THE PRIVACY ACT OF 1974 (5 USC, 552a). FOR OFFICIAL USE ONLY

Attachment 7

ORDERING BOTTLE LABELS

Ordering Bottle Labels

Order Form required for ordering bottle labels via fax or e-mail:

Installation ID #_____
Beginning Batch-Specimen # Ending Batch-Specimen #_____
Note: Use even one hundred numbers for the ending numbers, i.e., 100, 200, 300, etc.
Active Duty Units: Labels ordered should last at least 6 months. Reserve Units: Labels ordered should last 1 year.

Ship bottle labels to us by: (DD MM YY)_____
Name/Grade of person making this order:_____
Organization:_____
Address:_____
City/State/AFB/Zip Code + 4: DSN #/Commercial#:_____
_____
Send the completed form to: AFDTL.info@us.af.mil or call 210-292-3309.

The address for the Web Reporting Portal is: https://iftdtl.amedd.army.mil/

NOTE: SEND ORDERS 6 WEEKS IN ADVANCE

Attachment 8

DRUG URINALYSIS SPECIMEN PACKAGING/SHIPPING CHECKLIST

Drug Urinalysis Specimen Packaging/Shipping Checklist

A8.1. In order to absorb leakage and prevent damage, place a sufficient amount of flat absorbent pads (NSN 6530-01-304-9754 or equivalent) in the box prior to sealing.

A8.2. Place the specimen bottles into the unused specimen box (NSN 6640-00-165-5778) ensuring that the tamper-proof tape is intact.

A8.3. Complete and sign the DD Form 2624 ensuring that the specimens listed on the form match the bottles that are in the box.

A8.4. Place the DD Form 2624 and any Memorandum for Records (MFRs) inside a sealed leak-proof plastic bag within the box.

A8.5. Seal all sides, edges, and flaps of the box with adhesive tape. Apply one piece of tape around the center opening of the box so that it covers the opening flap on the top and bottom of the box and completely encircles the box. Tape must also encircle each end of the box that has an opening so that the edges are completely covered and sealed.

A8.6. Sign payroll signature across the tape once on the top and once on the bottom of the box. The payroll signature must cross from the tape to the box in at least one location on each the top and bottom. The manufacturer's tape on a specimen box is considered part of the box. The manufacturer's tape is not considered part of the tape that must be placed completely around the box.

A8.7. Place the sealed box in a leak preventive mailing pouch (NSN 6530-01-304-9762 or equivalent). The sealed pouch must be wrapped in postal mailing paper if not placed in a second container.

A8.8. Address the package to: HQ Air Force Drug Testing Laboratory (AFMOA/SGBD) 2480 Ladd Street, Bldg 3750, Lackland AFB, TX 78236-5310

A8.9. Ship the package within two duty days of collection date. (Failure to ship within two duty days will not result in an untestable discrepancy; however, proper chain of custody must be maintained). Specimens not mailed within two working days will require a MFR explaining the reason for the delay. The MFR must be forwarded to the servicing SJA, and a copy of the MFR must be retained on file for 3 years.

A8.10. Mail in accordance with section 8 (Acceptable Modes of Transportation).

Attachment 9

TABLE A9.1 ADOD DISCREPANCY CODES

Table A9.1. ADOD Discrepancy Codes.

CODE	CODE
Bottle	
BA	Bottle / container unauthorized
BK	Bottle / bottles leaked in shipment
BC	Bottle leaked in shipment, quantity not sufficient to test
BD	Bottle - broken seal
BE	Bottle - no seal
BF	Bottle - two seals, no explanation
BU	Bottle empty
BZ	Bottle discrepancy - TESTED
BY	Bottle discrepancy - NOT TESTED
Specimen	
SA	Specimen appears to be adulterated - NOT TESTED
SB	Specimen appears to be adulterated - TESTED
SC	Specimen quantity not sufficient to test
SE	Specimen volume < 30 mL
SZ	Specimen discrepancy - TESTED
SY	Specimen discrepancy - NOT TESTED
Custody Form	
FA	Form - UIC or installation/area code discrepant* / does not match bottle
FE	Form - submitting unit address / service info missing
FH	Form - date specimen collected discrepant* / does not match bottle
FJ	Form test basis / information (block 10) discrepant*
FK	Form type incorrect
FL	Form not received
FM	Form received separately from bottle
FN	Form chain of custody entries (Blocks 12a-d) discrepant*
GG	Form listed specimen, no bottle received
FP	Form did not list specimen, bottle received
FR	Form on two pieces of paper - no linking identifiers
FT	Form - SSN discrepant*
FY	Form - means of shipment discrepant*
GC	Form - specimen number discrepant*
GP	Form or other document contains service member's name / signature
GR	Form marked void for received specimen
GZ	Form discrepancy - TESTED

CODE	CODE
GY	Form discrepancy - NOT TESTED
Package	
PA	Package - no seal
PB	Package - broken seal
PD	Package missing signature/date
PZ	Package discrepancy - TESTED
PY	Package discrepancy - NOT TESTED
Label	
LA	Label missing/blank
LD	Label over label
LE	Label - UIC or installation/area code discrepant*
LF	Label - collection date discrepant*
LJ	Label - member initials discrepant*
LL	Label - collector or observer's initials discrepant*
LN	Label - SSN does not match form
LQ	Label has service member's name/signature
LT	Label - specimen number does not match form
LU	Label - batch / specimen number discrepant*
LX	Label - SSN discrepant*
LZ	Label discrepancy - TESTED
LY	Label discrepancy - NOT TESTED
Other	
OZ	Laboratory technical discrepancy - TESTED
OY	Laboratory technical discrepancy - NOT TESTED
***DISCREPANT=**	***Incorrect, Incomplete, Illegible, Missing, Overwritten, Not Original Or Not**

Attachment 10

SAMPLE DD FORM 2624, SPECIMEN CUSTODY DOCUMENT DRUG TESTING

SPECIMEN CUSTODY DOCUMENT - DRUG TESTING

1. SUBMITTING UNIT: 123 MG SGXX, 4 First St, The AFB, XY 789, 0 Enter DRPM or Designee's Name and Phone Number
2. ADDITIONAL SERVICE INFORMATION (Second Echelon)
3. BASE/AREA CODE: X100
4. UNIT IDENTIFICATION CODE:
5. DOCUMENT/ BATCH NUMBER: 001
6. DATE SPECIMEN COLLECTED YYYY: 2008 MM: 01 DD: 18

A. LABORATORY CONDUCTING DRUG TESTING: AFMOA/SG3OO, 2730 Louis Bauer Drive, Bldg 930, Brooks City Base, Texas 78235-5132

B. BATCH NUMBER

C. REPORT OF RESULT (OTG/Serial No.)

D. DRUGS TESTED

7. SPECIMEN NUMBER	8. COMPLETE SSN	9. TEST BASIS	10. TEST INFO	11. PRESCREEN	E. DISC CODE	F. ACCESSION NUMBER	G. RESULT
123	198-22-5555	IR					
456	267-33-4444	IR					
789	988-77-2222	IR					
LAST ITEM							

H. CERTIFICATION. I certify that I am a laboratory certifying official, that the laboratory results indicated on this form were correctly determined by proper laboratory procedures, and that they are correctly annotated

(1) SIGNATURE

(2) DATE SIGNED

(3) CERTIFYING OFFICIAL (Printed Name and Title)

DD Form 2624, FEB 1998

Previous Edition may be used

12. CHAIN OF CUSTODY		LAN	THRU
DATE (YYMMDD) a	RELEASED BY b	RECEIVED BY c.	PURPOSE OF CHANGE/ REMARKS d.
(1) 080118	SIGNATURE Original Signature NAME John Doe	SIGNATURE Original Signature NAME Tim Smith	Prepare for Shipment to AFDTL
(2) 080118	SIGNATURE Original Signature NAME Tim Smith	SIGNATURE NAME	Ship to AFDTL via First Class Mail
(3)	SIGNATURE NAME	SIGNATURE NAME	
(4)	SIGNATURE NAME	SIGNATURE NAME	
(5)	SIGNATURE NAME	SIGNATURE NAME	
(6)	SIGNATURE NAME	SIGNATURE NAME	
(7)	SIGNATURE NAME	SIGNATURE NAME	
(8)	SIGNATURE NAME	SIGNATURE NAME	
(9)	SIGNATURE NAME	SIGNATURE NAME	
(10)	SIGNATURE NAME	SIGNATURE NAME	

DD Form 2624, FEB 1998 (Back)

INSTRUCTIONS

	BLOCK	USA	USN/MC	USAF
1	SUBMITTING UNIT	Message address of unit submitting urine samples		
2	ADDITIONAL SERVICE INFORMATION (SECOND ECHELON)	Do not use	Message address of second echelon commander to whom submitting unit reports administratively.	Optional. May be used to identify the base POC.
3	BASE / AREA CODE	Service Code Area	Leave blank for future use.	Four character Base Identification Code (Ex.: F123). Comprises the first four characters of the full 10-character Base Identification Number (BIDN).
4	UNIT IDENTIFICATION CODE	Unit Identification Code (UIC or RUC) of unit submitting urine sample.		Do not use
5	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.	3-digit batch number common to all specimens in the shipment (Ex: 501). Comprises the middle part of the full 10-character BIDN assigned to each specimen
6	DATE SPECIMEN COLLECTED	Enter the four-digit year, two-digit month, and two-digit day that samples were collected by submitting unit.		
7	SPECIMEN NUMBER	Use number pre-printed on form to itemize bottle.		Enter 3-digit sequential specimen number (last 3 characters of full BIDN).
8	COMPLETE SSN	Full SSN of person from whom sample obtained.		
9	TEST BASIS	Indicate the testing premise to conduct the collection.		
10	TEST INFORMATION	Military: A = E1 - E4; B = E5 - O10; Civilian only: C = TDP Aviation; D = TDP Guard/Police; E = TDP PRP; F = TDP; ADAPCP Staff: G = other TDP; H = other non-military	Leave blank	Entry required only if additional testing is requested: F = Full Panel; S = Steroids; O = Other drugs. Provide clarification in attached message.
11	PRESCREEN	If screened (field tested) prior to submission and found positive, indicate P for positive or N for negative for drug(s) pre-screened. Leave blank if not screened prior to submission to lab.		Not used

12. CHAIN OF CUSTODY (LINE (1)):

a. DATE - Date of collection/shipment

b. RELEASED BY - Signature and printed or typewritten name of the urinalysis coordinator having custody of the samples.

c. RECEIVED BY - Use only if physical change of custody is occuring prior to shipment. Otherwise leave blank.

d. PURPOSE OF CHANGE/REMARKS - Specify the mode of accountable transportation/system utilized to ship specimens to the lab.

NOTE: Whenever custody of specimens changes other than for shipment (unless hand carried to lab), each change of custody requires line number signature in the (b) RELEASED BY and (c) RECEIVED BY blocks to document changes in custody with comment in block (d). If a continuation sheet is necessary, it must contain information/signatures of blocks (a) - (d).

13. DAMAGE TO SHIPPING CONTAINER/DISCREPANCIES

Attachment 11

SPECIMEN PACKAGING (BOX OF 12)

NOTE: These guide photos relate to Section 5 (Packaging and Shipping of Specimens)

Figure A11.1. Specimen Packaging.

Place the specimen bottles (maximum of 12) into the specimen box ensuring that the tamper evident tape is intact. (T-3) Place the completed DD Form 2624 and any MFRs inside the specimen box in a sealed leak-proof plastic bag. (T-3) Ensure that the specimens listed on the DD Form 2624 match the bottles that are in the box. (T-3) Place a sufficient amount of flat absorbent pads inside the box to absorb leakage and prevent damage. (T-3) (Not shown in photo.)

Figure A11.2. Specimen Packaging.

One piece of tape must be applied around the center opening of the box so that it covers the opening flap on the top and bottom of the box and completely encircles the box. (T-3)

Figure A11.3a. Specimen Packaging.

Tape must encircle each end of the box that has an opening so that the edges are completely covered. (T-3)

Figure A11.3b. Specimen Packaging.

Tape must encircle each end of the box that has an opening so that the edges are completely covered. (T-3)

Figure A11.4. Specimen Packaging.

Taping complete with all opening and edges of the box sealed.

Figures 11-5a-d. Packager (collector) must sign his or her payroll signature across the tape once on the top and once on the bottom of the box. (T-3) The payroll signature must cross from the tape to the box in at least one location on each the top and bottom. (T-3) The manufacturer's tape on a specimen box is considered part of the box. The manufacturer's tape is not considered part of the tape that must be placed completely around the box. Some examples: (T-3)

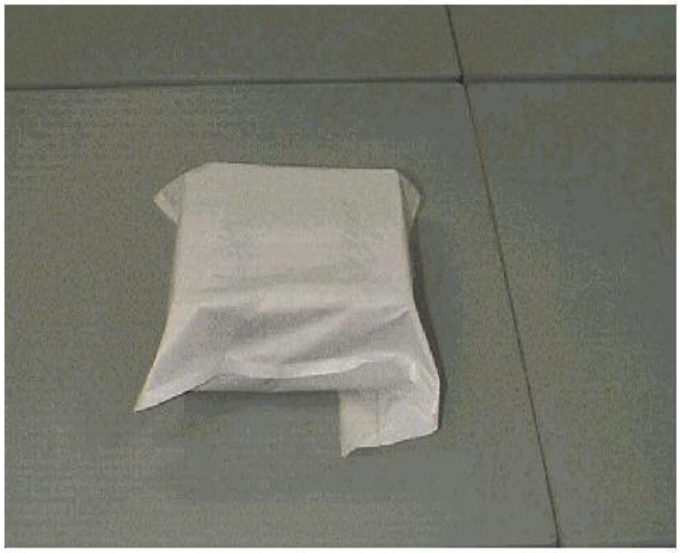
Figure A11.5a.

Figure A11.5b.

Figure A11.5c.

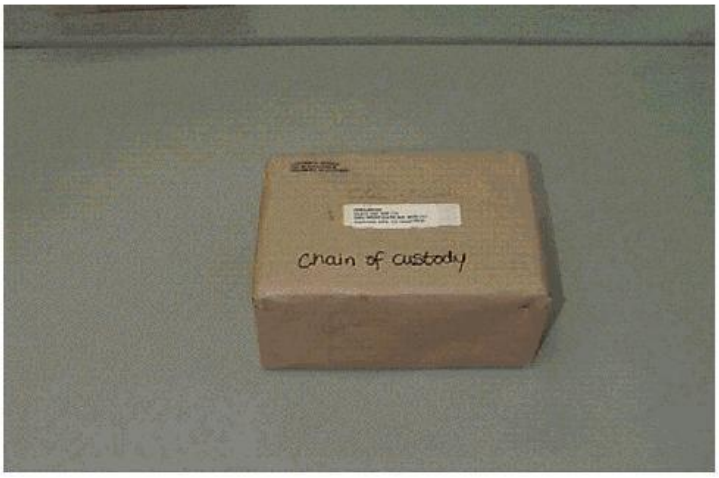
Figure A11.5d.

Figure A11.6.



Place the sealed box in a leak preventive mailing pouch.

Figure A11.7.



Completed standard specimen package. Consult the shipping carrier for shipping requirements and guidelines before shipping. (T-3)

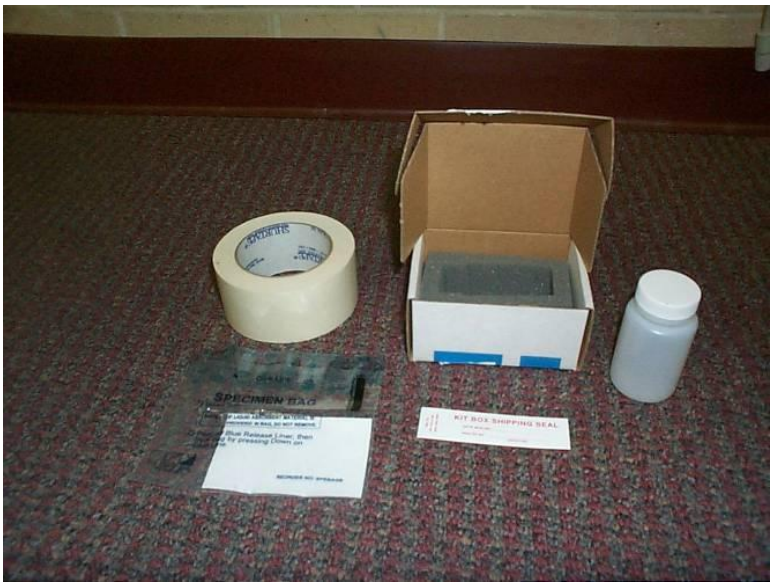
Attachment 12

SINGLE TEST KIT (STK) PACKAGING

NOTE: These guide photos relate to Section 9 (Packaging and Shipment of STK Specimens)

Figure A12.1. STK box unopened prior to collection.

Figure A12.2.

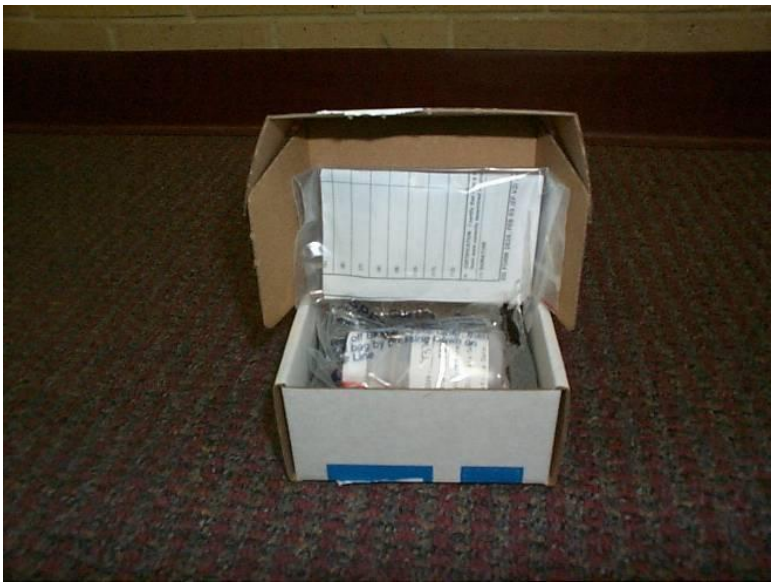


STK contents and tape.

Figure A12.3.

Place collected specimen and absorbent in the specimen pad provided in the STK.

Figure A12.4.

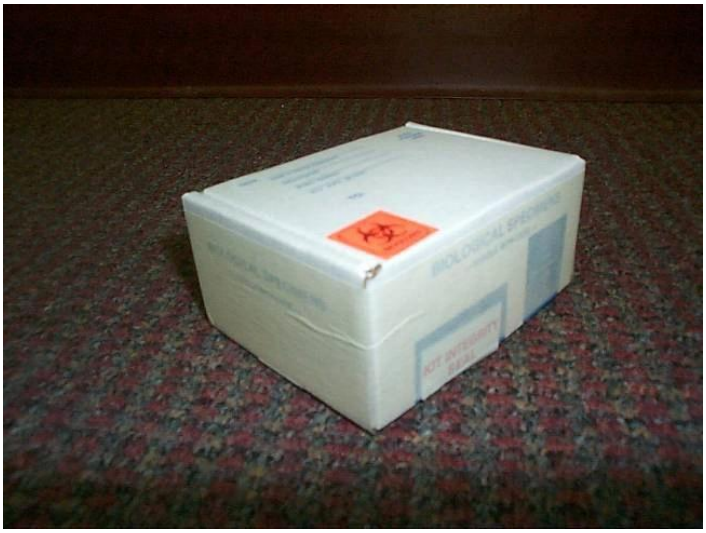


Place specimen bag with bottle and absorbent in the STK box. Place the plastic bag containing the DD form 2624 and any MFR's in the STK box.

Figure A12.5.

Apply tape one time completely around the sides of the box so tape overlaps.

Figure A12.6.



Taping Complete.

Figure A12.7.

Sign, with payroll signature, and date the kit box seal provided with the test kit prior to applying it to the mailer box.

Figure A12.8.

Apply the provided kit box seal to the mailer box ensuring a portion of the date and signature is across the open edge of the box.

Figure A12.9.

Taping complete with kit box seal correctly attached.

Attachment 13

SAMPLE LETTER – CERTIFICATION STATEMENT FOR INDIVIDUAL

I, _____, _____, _____, hereby state
(Printed Name) (Unit) (SSN) that I have been clinically evaluated and it has been medically determined that I have a condition known as shy bladder. I have provided to you the appropriate medical documentation certifying this condition, as well as the name and phone number of the medical professional who examined me. I request a waiver to the direct observation requirement of AFI 90-507, *Military Drug Demand Reduction Program,* and agree to abide by the requirements for alternative urine collection testing as set forth in AFI 90-507. I understand my request can be granted only for the present ordered test. Further, I understand that I must again furnish all required medical documentation should I be selected in the future for Drug Abuse Program testing. Additionally, I understand that my request for waiver may be denied based on insufficient documentation or by the inability of the testing monitor (collector) to validate or substantiate my claim.

I hereby affirm that this is a true and accurate statement (to the best of my knowledge) of my present medical condition, and that I have provided the required documentation of my condition to the installation testing monitor (collector). I understand that I am subject to the Uniform Code of Military Justice (UCMJ) and any violations I commit may result in punitive actions taken against me through my chain of command.
This letter expires on: _____.

PERSONAL DATA – PROTECTED UNDER THE PRIVACY ACT OF 1974 (5 USC, 552a)

_____ _____
Signature of the Individual Requesting Waiver Date

_____ _____
Signature of the Unit Commander (or Acting Commander) Date
Or Unit First Sergeant

_____ _____

Signature of Collector Date

Attachment 14

SAMPLE LETTER DDRPM UNTESTABLE DISCREPANCY REPORT

[Date]

MEMORANDUM FOR MAJCOM/SG ATTN: [MAJCOM DDRPM]

FROM: (Installation Demand Reduction Office symbol)

SUBJECT: Untestable Specimen Action Plan

1. The purpose of this letter is to update you on our recent untestable discrepancy and corrective actions.

2. Installation X recently received twelve untestables on 6 May 2004 from Air Force Drug Testing Lab. The specimen numbers were: F5310000000, F5310000000, F531000000, F5310000000, F5310000000, F5310000000, F5310000000, F531000000, F5310000000, F5310000000, F5310000000, and F531000000. The untestable discrepancy code was PA. The photocopy received from Brooks indicates an obvious straight cut on the seal of the box. Since we double tape, this cut could not have been made by tearing open the box. Sample F531000000 was identified SC (quantity not sufficient).

CODE	PROBLEM	CAUSE	SOLUTION
PA (12)	Package was received unsealed or with a broken seal.	Damage during shipment	All samples receive two person QC (2 Times) prior to leaving the installation. I personally QC'd these particular samples. These samples were intact when they left this facility. This site will continue to a double 2-person QC.
SC (1)	Specimen received with insufficient Quantity	Unknown / Possible evaporation	We currently utilize a specimen bottle containing 30 ML to ensure level is accurate. We will utilize the 45 ML as the guide from now on.

3. The MAJCOM/SGOC has authority to remove untestable discrepancies from the installation untestable statistics. [Installation Demand Reduction office symbol] requests MAJCOM/SGOC remove the 12 (PA) untestables from our untestable statistics based on the premise we have no control over samples once they leave our facility. We will retest members based on the factor that the samples were not tested at the Air Force facility. The one sample of Insufficient Quantity should remain an untestable due to our error. Please initial your decision and send to Fax: DSN 975-0999.

APPROVE REMOVAL

DISAPPROVE REMOVAL_____

4. Should you have any questions, please contact me at DSN 975-5000.

[DDRPM/DTPAM NAME]

Drug Demand Reduction Program Manager

cc: AFMOA/SGHW

Attachment 15

GUIDELINES FOR FORENSIC DOCUMENTATION

A15.1. Overview. All documents created during urine specimen collection testing are considered forensic documents. Chain-of-custody (CoC) documentation provides a legal record of all personnel who handled the specimen from the time of collection until the specimen is destroyed. This set of guidelines provides procedures for correcting forensic documents and guidelines for preserving and disposing of these documents.

A15.2. External/Collection Chain-Of-Custody. The external chain-of-custody document is the DD Form 2624. The DD Form 2624 documents custody from the time of urine collection and shipment to receipt at the laboratory. The external chain-of-custody contains specimen identification information, social security number, submitting unit identification, date of collection and type of collection. Changes in custody are documented using the z type format. The z type format requires a *Received By* and *Released By* annotation for each transfer of custody. (T-2) The reason for the change of custody or action performed is documented in the *Purpose of Change/Remarks* column.(T-2)

A15.3. Forensic Corrections. Forensic documents are subject to errors like any other document. However, procedures used to correct errors on forensic documents are different than normal documents. Corrections to forensic documents must be clear, concise, and consistent. (T-3) Forensic corrections should document the nature of the correction, not eliminate evidence that an error or omission occurred. (T-3) To accomplish this, corrections should be made so that the original entry is preserved, that the correct data is readily apparent, and that the identity of the individual who made the correction and the date of the correction are clear. (T-3) In some cases a memorandum for record (MFR) may be necessary to clarify any uncertainty relating to the correction.

a. Strike out corrections. (T-3) Correction fluid (whiteout), erasures, or write-overs are not acceptable methods for correcting forensic documents.

1. Draw a single line through the incorrect data and record the correct information as close as possible to the incorrect entry (typically above or beside the line in question). (T-3) If multiple lines need to be corrected, draw the strike out line in a manner such that it is continuous. (T-3) A diagonal line from one end of the correction to the other end may be used. A continuous line employing a curve from one line to the next is also acceptable.

2. Initial and date the correction.(T-3)

3. This type of correction can be used for incorrect entries, illegible entries, and other similar types of minor errors. Corrections to chain-of-custody entries not made by the end of the same shift of the following business day may require an MFR.

b. Omission corrections. Forensic documents that are missing a required entry require a special type of forensic correction. (t-3) It is important to provide the correct information and reflect that the entry was made after the fact.

1. Verify that the task was originally completed correctly and that only the required entry was missing. (T-3) Make the appropriate entry as it would have been made originally (e.g., name stamps, dates, entries in the remarks column, etc.). (T-3)

2. Draw a circle around the entry and add your initials and the date of the correction.(T-3)

c. Corrections to forensic corrections. Occasionally an error is made while making a forensic correction. Use the same techniques described above to correct the error. (T-3)

1. Correct a forensic correction only once. If on the correction to a forensic correction an additional error is made, do not attempt to correct it again. (T-3) In these cases an MFR should be written describing what the correct information was supposed to be. (T-3)

d. Corrections performed after the fact or by other individuals. The person who made the original entry should make forensic corrections on errors or omissions. Corrections made after the fact by the person who made the original entry do not require a MFR if the situation can be readily interpreted from the available documentation. If it is impossible or impractical for that individual to make the correction, a supervisor/production leader or LCO can make the correction if the nature of the error and the appropriate correction are clear and unmistakable (e.g. can be verified from the document itself). Simple corrections that satisfy these requirements do not require an MFR.

e. Corrections best made by MFR. If the nature of the error and the appropriate correction is not clear or easily understood, an MFR is the best tool to use to provide a more thorough explanation. The individual involved in the original error, the supervisor/production leader, or an LCO making the forensic correction can write the MFR. MFRs are normally the best tool to use when the nature of the error and/or the forensic correction is such that it could raise questions about the reliability of the procedures employed.

A.15.4. Memorandum For Record (MFR).

a. An MFR is an official record prepared to document and clarify situations, irregularities, or deviations from the standard operating procedures that based on the document and corrections alone would not be apparent or explainable. MFRs are written or adopted as true and accurate by the person who signs the MFR. An MFR becomes a permanent part of the original documentation and will be included in any urinalysis report for affected specimens.

b. MFRs should be clear, concise, typewritten, and reflect the same care in preparation that is typically applied to all other activities within the laboratory. (T-3) Elements of a helpful MFR include:

1. Which sample or samples were affected?

2. What happened? Be concise, thorough and to-the-point.

3. When did the incident happen? Include the date of the incident and the date the MFR was prepared.

4. Where did the incident happen? Where refers to the section of the laboratory or room number.

5. How was the problem resolved?

6. Who was involved?

c. MFRs must be signed in writing. (T-3) Use of signature stamps or signature replacements (e.g.: //SIGNED//) is prohibited.(T-3)

Attachment 16

GUIDELINES FOR DRUG DEMAND REDUCTION PROGRAM (DDRP) FACILITIES

A16.1. Overview. The installation commander or equivalent must ensure the Drug Demand Reduction Program is given adequate, appropriate, and dedicated space for collection operations, administration, storage of supplies and secure storage of specimens. (T-3) Adequate space enables efficient collection operations, improves the forensic soundness of specimen collection and shipment, and builds confidence in the Program by service members. These factors enhance the program's effectiveness at deterring drug abuse.

A16.2. Space Requirements. These guidelines are based on a tested population of approximately 2,000. Actual space required will need to be adjusted based upon the actual population at specific installations. (T-3) Other factors to be considered are the testing hours, number of collectors and number of observers. The Installation Civil Engineer should be able to assist in developing a more fine-tuned standard.

a. Two Administrative Offices. DDRPM Office: Approx. 120 SF; DTPAM Office: Approx. 120 SF. These offices need to be secure for computer equipment, fax machine, and sensitivity of drug testing related data, information, and files. (T-3)

b. Drug Testing Waiting Space: Approx. 300-400 SF. Needs to be relatively close to the offices and restrooms with enough space to accommodate at least 50 people. (T-3)

c. Secure Storage Space: Approx. 100 SF. It is essential for the drug testing program to have secure storage space for drug testing supplies. Secure storage is an area used to store all materials and specimens that hold the potential of being used as evidence in a court proceeding or administrative hearing. Its level of security must be on par with evidence storage security used by law enforcement. (T-3) At a minimum, a secure storage area must be maintained with access limited and controlled by appropriate procedures and the two layers of locks or other devices to prevent unauthorized access. (T-3) Storage space required for drug abuse prevention supplies, outreach-related materials, and administrative office supplies is also needed.

d. Restrooms: Male: 3 urinals, 1 stall; Female: 2 stalls. Restrooms need adequate space between urinals allowing donors and required observers to be in the restrooms simultaneously to facilitate collections. If there are no secured restrooms, these restrooms would need to be closed off for public use during testing times. (T-3) Automatic flushers, water faucets, and towel dispensers (or air dryers) would facilitate cleanliness and program integrity.

e. Training/Briefing Room: Approx. 240 SF. Need space to hold drug testing related trainings such as Trusted Agent, Observer, and Drug Free Workplace Briefings/Training. (T-3)

f. Parking: Relatively close to the building for approx. 20 vehicles.

Attachment 17

SAMPLE LETTER – DDR QURATERLY INSPECTION MEETING

15 October 2013

MEMORANDUM FOR XX/CV

FROM: DDRPM/DTPAM

SUBJECT: Quarterly DDR Inspection and Meeting

1. A review and inspection of the installation base and civilian Drug Abuse Testing Programs was conducted on 17 September 2013. All aspects of the program were found to be in compliance with established AFIs, DoD directives, local policies and practices.

2. No corrective action required. The next meeting & inspection will be held next quarter.

3. If you have any questions please contact me at DSN XXX-XXXX.

JOHNNY M. DOE
DDRPM or DTPAM

Attachment:

1. SJA Quarterly Inspection Checklist

cc:
Mrs. Dolly Madison, DTPAM

1st Ind, XX/CV

MEMORANDUM FOR XX MDOS/SGOM (DDRP)

Approved as written

FRED E. FLINTSTONE, Colonel, USAF
Commander