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Medical

DRUG ABUSE TESTING PROGRAM (PA)



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This instruction implements AFI 44-120, *Drug Abuse Testing Program*, and establishes a program that provides commanders objective evidence of drug abuse involving members under their command. It assigns duties and responsibilities for implementation and control of the program at MacDill Air Force Base (AFB). Failure to perform the duties imposed by this instruction constitutes a violation of Article 92(b) (3), Uniform Code of Military Justice (UCMJ), for dereliction of duty. Where punitive actions are contemplated, the 6th Air Mobility Wing, Staff Judge Advocate (6 AMW/SJA), should be consulted. This instruction applies to active duty military personnel assigned to MacDill AFB. Refer recommended changes and questions about this publication to the Office of Primary Responsibility (OPR) using the AF IMT 847, **Recommendation for Change of Publication**; route AF IMT 847s from the field through the appropriate functional's chain of command. Ensure that all records created as a result of processes prescribed in this publication are maintained in accordance with AFMAN 37-123 (will convert to AFMAN 33-363), *Management of Records*, and disposed of in accordance with the Air Force Records Disposition Schedule (RDS) located at <https://afrims.amc.af.mil/>. This instruction requires the collection and maintenance of information protected by the Privacy Act of 1974. The authority to collect and maintain the records prescribed in this instruction is found in 10 U.S.C. 8013 and 10 U.S.C. Chapter 55, Privacy Act Statements, and AFI 33-332, *Air Force Privacy Act Program*.

SUMMARY OF CHANGES

This document has been substantially revised and must be completely reviewed. Major changes include updating responsibilities for oversight and administration of the Air Force Drug Testing Program (AFDTP) to ensure deterrence and forensic value. It also mandates the use of the AFDTP for random selection of personnel and testing days. Deletes Reference paragraph, adds references to new **Attachment 1**, and renumbers remaining paragraphs accordingly. Adds requirement for the Commander, Medical Treatment Facility (MTF), 6th Medical Group (6 MDG) appoint in writing licensed physicians to serve as medical review officer (paragraph **3.2.4.**); changes paragraph **3.3.4.** to reflect non-active duty population; adds requirement that the Drug Testing Program Administrative Manager (DTPAM) coordinate all drug

testing activities with the Drug Demand Reduction Program Manager (DDRPM) (paragraph 3.4.1.); adds use of AFDTP software for random testing (paragraph 3.4.5.); adds Random Inspection Testing and Unit Testing to Categories of Testing (paragraph 4.); adds requirement that individual report to Ambulance Services after duty hours (paragraph 5.1.5. and 6.2.); and deletes “unless basis for testing is “Leave/TDY” in Attachment 2. A bar (|) indicates changes since the last edition.

1. Purpose. The purpose of this instruction is to ensure compliance with AFI 44-120, identify responsibilities and procedures, and to provide guidelines for the overall management of the program. This instruction applies to all active duty military personnel in the random testing pool at MacDill AFB.

2. Program Objectives.

- 2.1. Deterrence: Deter members from drug and substance abuse.
- 2.2. Identification: Identify members who need treatment and rehabilitation services.
- 2.3. Data Collection: Obtain data on the prevalence of drug abuse.
- 2.4. Rehabilitation Support: Provide drug testing for rehabilitation.
- 2.5. Disciplinary Action Support: Develop evidence in support of administrative, rehabilitation services, separations, and actions under the UCMJ.
- 2.6. Commander Support: Design flexible testing programs that meet the above goals and help commanders maintain the morale, welfare, and health of their commands.

3. Responsibilities.

- 3.1. The Commander, 6th Air Mobility Wing (6 AMW/CC):
 - 3.1.1. Ensures cross-functional oversight of the installation drug testing program.
 - 3.1.2. Ensures activities of medical, SJA, Security Forces Squadron, Air Force Office of Special Investigations (AFOSI), Chaplain, and other agencies involved in drug abuse control programs are coordinated to ensure program objectives are met, including conduct of drug testing.
 - 3.1.3. Ensures random inspection testing is the predominant test used and the test levels and type of tests are appropriate to the local threat and consistent with Air Force policy.
 - 3.1.4. Ensures all personnel in the random testing pool are subject to random inspection testing, regardless of grade, status, or position.
 - 3.1.5. Ensures commanders and supervisors understand the program and staff agencies support the program.
 - 3.1.6. Ensures testing is used in conjunction with investigation and law enforcement as a counter-measure to drug abuse.
 - 3.1.7. Ensures commanders refer for drug testing all incidents of known or suspected drug abuse or indication of deterioration of duty performance or behavior such as aggressive behavior, destruction of government/personal property, and failure to obey orders.
 - 3.1.8. Develops procedures to test individuals who are assigned to this base but physically reside in a geographically separated unit.

- 3.1.9. Ensures adequate facilities are provided for the drug testing program.
- 3.2. Medical Treatment Facility (MTF) Commander:
 - 3.2.1. Serves as the office of primary responsibility for the installation drug testing program.
 - 3.2.2. Appoints a Drug Demand Reduction Program Manager (DDRPM).
 - 3.2.3. Appoints a Drug Testing Program Administrative Manager (DTPAM) and assistant.
 - 3.2.4. Appoints, in writing, licensed physicians to serve as primary and alternate medical review officers (MRO) for the military drug testing program. (See AFI 44-120, paragraph 4.7.2.1.2.)
- 3.3. The DDRPM:
 - 3.3.1. Briefs unit commanders, first sergeants, and supervisors on the drug abuse testing program.
 - 3.3.2. Supervises, directs, and assists with the military drug testing program.
 - 3.3.3. Distributes minimum testing allocations to base level units according to Air Staff and major command guidance.
 - 3.3.4. Ensures prevention and education outreach efforts are provided for non-active duty population (i.e., dependents, retirees).
 - 3.3.5. Takes appropriate actions to ensure less than one percent of specimens are untestable by the laboratory.
- 3.4. The DTPAM:
 - 3.4.1. Coordinates all drug testing activities with the DDRPM.
 - 3.4.2. Ensures specimens are collected, packaged, and transported to the testing laboratory according to the requirements of this instruction.
 - 3.4.3. Monitors rate of untestable specimens and ensures it remains at minimum levels.
 - 3.4.4. Verifies results are received for every specimen sent for testing.
 - 3.4.5. Uses the AFDTP software for inspection (random) testing. Failure to use the software does not invalidate any test results on specimens collected and tested.
 - 3.4.6. Ensures drug testing is conducted on randomly selected days unknown by the tested population prior to notification. A minimum of 8 testing days per month is required.
- 3.5. Unit Commanders:
 - 3.5.1. Provide credible observers who are noncommissioned officers or above who have not been selected for testing in the same session as the one in which they are observers, when requested by the DTPAM.
 - 3.5.2. Ensure all unit members are subject to inspection testing.
 - 3.5.3. Ensure unit members selected for drug testing are notified in writing as soon as possible of the time and place of urine collection, and the need to present a valid military identification card (ID) or other picture ID (that contains social security number) at the time of urine collection. Members on crew rest or otherwise unavailable due to mission requirements (e.g., flying) will be rescheduled immediately after completing crew rest or becoming available for testing.

3.5.4. Ensure that all members who are selected for testing report for specimen collection within two hours of the member's notification. Members who are in temporary duty (TDY) or leave status will be tested within two hours of member's notification upon their return to duty, using the automated tracking provisions in the drug testing program software.

3.5.5. Take appropriate administrative or UCMJ action on personnel who fail to attend testing without a valid reason, such as TDY or leave.

3.5.6. Ensure individuals who have submitted samples determined to be untestable, unfit for testing, or not consistent with human urine by the testing lab due to adulteration or dilution, are retested as an inspection either by consent or by direction of the commander.

3.5.7. May order commander-directed drug testing. Commander-directed testing should be used as a last resort since the results cannot be used in actions under the UCMJ, or to characterize a member's service either as general or under other than honorable conditions if the member is administratively separated. Commanders should attempt to obtain the member's consent or consult with the SJA to determine whether there is probable cause to direct a drug test before ordering a commander-directed test.

3.6. The SJA:

3.6.1. Ensures compliance with chain-of-custody collection procedures at base level under applicable Department of Defense (DoD) directives and Air Force policy.

3.6.2. Advises commanders, the DDRPM, and other base officials and agencies regarding legal aspects of the drug testing program.

3.6.3. Coordinates on all requests for drug urinalysis inspections, commander-directed examinations, and searches and seizures.

3.6.4. Receives copies of all requests by service members for independent retest.

3.6.5. Notifies the appropriate Air Force, Army Drug Testing Laboratory or other certified laboratory to retain the specimen when a positive specimen needs to be retained beyond 60 calendar days for discharge or administrative action.

4. Categories of Testing.

4.1. Random Inspection Testing: Random testing is utilized in order to determine and ensure the security, military fitness, good order, and discipline of the unit, organization, and installation. It is also used as a screening procedure to deter drug abuse. Individuals are selected at random using the AFDTP computer software (a non-biased selection process).

4.2. Inspection Testing: Inspection testing is used when a member has a positive result from a random urinalysis test, including unit sweeps, or who is absent without leave for more than 8 hours. The primary purpose of this testing is to determine and ensure security, military fitness, good order, and discipline for active duty personnel. It is also directed to determine and to ensure that the command is functioning properly, maintaining proper standards of readiness, airworthiness, and that personnel are present and ready for duty.

4.3. Unit Testing: Unit testing may be conducted to determine if the command is functioning properly, ensuring that proper standards of readiness are maintained, and personnel are fit and ready for duty. Individual members may not be singled out. An entire unit or a part of the unit may be inspected.

The commander directing the unit testing must coordinate with SJA and the DDRPM (ext 8-3051) who ensures through the major command that the servicing laboratory can accomplish the associated work load in a reasonable period of time.

4.4. Command-Directed Testing: A command-directed test is appropriate when the member displays aberrant, bizarre, or unlawful behavior or when the commander suspects or has reason to believe drugs may be present and probable cause does not exist. Results obtained through commander-directed testing can be used as a basis for administrative discharge action (honorable discharge only) or to support administrative actions such as letters of reprimand. Test results cannot be used to take UCMJ action (court-martial, Article 15) or to characterize an administrative discharge adversely.

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

4.6. Probable Cause Testing: Probable cause testing requires a search and seizure authorization from the appropriate commander to seize a urine specimen. Probable cause exists when there is reasonable belief that drugs will be found in the system of the member to be tested. Consult with the SJA regarding procedures for determining whether there is probable cause. Results may be used for UCMJ or to characterize an administrative discharge.

4.7. Consent Testing: Prior to a probable cause or command-directed test, first ask the member if he or she will consent to a urine 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 action, including adverse characterization of administrative discharge.

4.8. Incident to Medical Care: A urine specimen collected as part of a patient's routine or emergency medical treatment, including routine physical examinations, may be subjected to urinalysis drug testing. Results may be used for UCMJ or administrative actions, including adverse characterization of administrative discharge.

5. Selection and Notification Procedures.

5.1. Inspection Testing: The AFDTP software will be used for the selection process for all base and unit inspection testing (except in the event that the software or computer system becomes inoperable). Utilizing this software allows for the random selection of personnel and testing days.

5.1.1. The DTPAM will notify the trusted agents (i.e., unit commanders, First Sergeants) of personnel selected for testing via E-mail the afternoon prior to testing.

5.1.2. Trusted agents must notify in writing all personnel selected for testing. These personnel must report to the designated testing site within two hours of notification.

5.1.3. Unit commanders, first sergeants, or trusted agent must notify the DDRPM or the DTPAM of personnel unavailable for testing on the testing day.

5.1.4. The DDRPM or DTPAM will notify the unit commander of personnel who do not report for testing ("No Show"), or personnel who fail to report within the two-hour time limit.

5.1.5. Personnel who are notified after closing of the testing site (for valid reasons such as shift work) will report for testing at the 6th Medical Group laboratory during normal duty hours, or to the Ambulance Services section after normal duty hours.

5.2. Command-Directed, Probable Cause, Consent Testing: Individuals will be directed in writing by the unit commander to report for testing. Individuals must report immediately upon notification to the DDRP in Building 48, if during duty hours. After duty hours, the individual must report to the Ambulance Services section in Building 711. The individual must be accompanied by an escort provided by the unit commander. The escort will carry the paperwork (see [Attachment 2](#), Basis for Urinalysis Memorandum) and will present it to the ambulance services personnel prior to testing.

6. Collection and Transportation Procedures.

6.1. Urine specimens are collected under direct supervision in any type of testing. Members are required to provide 30 ml of urine. If the member is unable to supply the required quantity, he or she will be retained in the collection facility until 30 ml of urine can be produced in a single attempt.

6.2. The DTPAM, observers, monitors, and laboratory technician will follow all collection procedures as outlined in SGOHA Operating Instruction 40-01 to ensure the chain of custody is maintained.

6.3. All specimens collected will be sent to Armstrong Drug Testing Laboratory, Brooks AFB TX. The DTPAM will follow the shipping procedures as outlined in SGOHA Operating Instruction 40-01.

6.4. 6 MDG Ambulance Services is responsible for the collection of random samples from shift workers or personnel notified after closing of the testing site.

7. Test Results.

7.1. Armstrong Laboratory will notify the Director of Base Medical Services (DBMS) of any positive results via electronic message.

7.2. The DBMS will notify the DDRPM or DTPAM. The DDRPM or DTPAM is responsible for notifying AFOSI and the SJA of any MRO-verified positive results.

7.3. The DDRPM will notify the unit commander of any untestable results. The unit commander will direct the member to be re-tested as an inspection test.

TIMOTHY S. SMITH, Colonel, USAF
Commander

Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References

AFI 33-332, *Air Force Privacy Act Program*

AFMAN 37-123, *Management of Records*

AFI 44-120, *Drug Abuse Testing Program*

DODD 1010.1, *Military Personnel Drug Abuse Testing Program*

Attachment 2

BASIS FOR URINALYSIS TESTING MEMORANDUM

DATE:

MEMORANDUM FOR 6 MDOS/SGOHA

FROM: (Unit) _____

SUBJECT: Basis for Urinalysis Testing

1. On this date, I have instructed or requested the following person to report to Building 48, drug testing site (hours 0730-1130 and 1300-1530). If he/she was told to report to the medical treatment facility after duty hours, then he/she should be accompanied by an escort.

Name: _____

SSAN: _____

2. The basis for the authority to conduct this test is(check one)

_____ Probable Cause - search authorization procured from the commander after coordination with JA and SPOI.

_____ Consent of the member who was told he/she did not have to consent and that he/she did not have to report to the hospital, and after coordination with JA.

_____ Command - Directed.

_____ Mishap Investigation

_____ Inspection Testing

Requestor's Signature

(Place signature block below)

Time Notified: _____ Time Reported to Building 48/Lab: _____ Time Collected: _____

Signature of personnel verifying that testing was completed: _____

CC: Provide this memo to the escort.

Escort: Provide this memo to the lab personnel

Lab: Keep this memo - a photocopy of this memo may be given upon request.

After-hour Ambulance Service: Keep this memo – a photocopy of this memo may be given upon request

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