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Medical

MILITARY DRUG DEMAND REDUCTION PROGRAM



#### COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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(Brigadier General Thomas W. Harrell)

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This Department of the Air Force Manual (DAFMAN) implements Air Force Policy Directive 44-1, Medical Operations. The DAFMAN applies to Department of the Air Force (DAF) military personnel that includes the Regular Air Force (RegAF), United States Space Force (USSF), Air Force Reserve (AFR), and Air National Guard (ANG). This DAFMAN also applies to any applicants or new accessions into the RegAF, USSF, ANG, and AFR (see paragraph 4.2 for further clarification). It assigns responsibility for carrying out the DAF drug testing program at the installation level. This DAFMAN sets forth standards and procedures regarding Drug Demand Reduction (DDR) activities of DAF military personnel. Failure to observe the prohibitions and mandatory provisions of this DAFMAN may result in administrative disciplinary action. Violations may result in enhanced punishment under Article 92(1) of the Uniform Code of Military Justice (UCMJ), and members may be found to have violated Article 92(1) regardless of their knowledge of the requirements established by this publication. Failure by military members to obey the provisions in paragraphs 1.2.1, 1.2.1.1, 1.2.1.2, 1.2.1.3, 1.2.1.4, 1.2.1.5, 1.2.2, 1.2.2.1, **4.1.5.3, 4.3.2, 4.3.3, and 4.3.10** of this publication is a violation of Article 92(1), UCMJ – failure to obey lawful order or regulation. Article 92(1) of the UCMJ does not apply to members of the ANG while in Title 32 status (that is, activated for state duty under state command), but ANG members may be subject to an equivalent article under a state military justice code. Refer recommended changes and questions about this publication to the Office of Primary Responsibility (OPR) using the DAF Form 847, Recommendation for Change of Publication. Route DAF Forms 847 from the field through the appropriate functional chain of command. 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 DAFMAN 90-161, Publishing Processes and *Procedures*, 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 requestor's commander for non-tiered compliance items. The waiver approval authority for non-tiered compliance items is the Air Force Medical Readiness Agency (AFMRA/SG3L). The AFR and ANG will have Tier 2 (T-2) waiver authority, similar to that of a Major Command (MAJCOM) for approving Tier 2 (T-2) exception requests. 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 DAFMAN requires the collection and or maintenance of information protected by the Privacy Act of 1974 authorized by Title 10 United States Code, Section 9013, Secretary of the Air Force and 9081 The United States Space Force. The applicable SORN F044 AF SG I, Air Force Drug Testing Program, is available at: http://dpcld.defense.gov/Privacy/SORNs.aspx. Ensure all records generated as a result of processes prescribed in this publication adhere to AFI 33-322, Records Management and Information Governance Program, and are disposed in accordance with the Air Force Records Disposition Schedule, which is located in the Air Force Records Information Management System. The use of the name or mark of any specific manufacturer, commercial product, commodity, or service in the publication does not imply endorsement by the DAF.

#### SUMMARY OF CHANGES

This manual has been substantially revised in its entirety and should be completely reviewed. Changes include expanding applicability to include the USSF. It updates the prohibition on the use and ingestion of hemp products, including but not limited to cannabidiol (CBD). It also mandates the use of the annual compliance tool to achieve the required annual testing rate; updates the training requirements for ANG Medical Review Officers; and updates DDR collections procedures and staffing requirements.

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#### Chapter 1

#### PROGRAM OVERVIEW

- **1.1. Overview.** The Drug Demand Reduction Program (DDRP) directly impacts mission readiness. The presence in the military environment of persons who engage in drug abuse seriously impairs accomplishing the military mission and is a threat to the health, safety, security, and welfare of the total force. The success of this long-standing program is the product of strong command support at all levels. The DAF does not tolerate the illegal or improper use of drugs by DAF personnel. Such use:
  - 1.1.1. Is a serious breach of discipline.
  - 1.1.2. Is not compatible with service in the DAF.
  - 1.1.3. Automatically places the member's continued service in jeopardy.
  - 1.1.4. Can lead to criminal prosecution resulting in a punitive discharge or administrative actions, including separation or discharge under other than honorable conditions.

### 1.2. DAF Regulations Regarding Illicit Drug Use and Substance Abuse by Military Personnel.

- 1.2.1. The knowing use of any intoxicating substance, other than the lawful use of alcohol or tobacco products, introduced into the body in any manner to alter mood or function is prohibited. The possession of any intoxicating substance described in this paragraph, if possessed with the intent to use in a manner that would alter mood or function, is also prohibited. Failure by military members to obey the mandatory provisions of this paragraph is a violation of Article 92, UCMJ. Violations of this paragraph may result in disciplinary action under the punitive articles of the UCMJ (e.g., Article 112a, UCMJ). Violations may also result in adverse administration action; criminal prosecution under federal or state laws; or, for ANG members, adverse action under the state military code. These substances include, but are not limited to:
  - 1.2.1.1. Controlled substance analogues and designer drugs that are not otherwise controlled substances.
  - 1.2.1.2. Inhalants, propellants, solvents, household chemicals, and other substances used for "huffing."
  - 1.2.1.3. Prescription or over-the-counter medications when used in a manner contrary to the prescribing medical provider's instructions, the manufacturer's instructions, or the intended medical purpose or in excess of the prescribed dosage.
  - 1.2.1.4. Naturally occurring intoxicating substances (e.g., salvia divinorum).
  - 1.2.1.5. Anabolic steroids, performance enhancing drugs, and other substances found in the *DoD Prohibited Dietary Supplement and Ingredient List*, referenced in DoDI 6130.06, *Use of Dietary Supplements in the DoD (link to the updated list is provided in this DoDI)*, unless authorized by a DoD Healthcare provider.

- 1.2.2. While some jurisdictions have legalized the use of marijuana and marijuana extracts for recreational or medical purposes, the wrongful use, possession, manufacture, distribution, and introduction onto a military installation of marijuana remains prohibited and punishable under Article 112a, UCMJ. Exception: Service members are permitted to use prescription cannabinoid formulations, such as dronabinol (brand names Marinol® and Syndros®) and Epidiolex®, when the medication has been approved by the United States Food and Drug Administration and the service member has a valid prescription for the medication. Failure by military members to obey the mandatory provisions of this paragraph is a violation of Article 92, UCMJ. Violations of this paragraph may result in disciplinary action under the punitive articles of the UCMJ (e.g., Article 112a, UCMJ). Violations may also result in adverse administration action; criminal prosecution under federal or state laws; or, for ANG members, adverse action under the state military code.
  - 1.2.2.1. The ingestion of products containing or derived from hemp, including but not limited to delta-8-tetrahydrocannabinol (Delta-8 THC) and cannabidiol (CBD), is prohibited. Failure by military personnel to comply with this provision constitutes a violation of Article 92(1), UCMJ, and may also constitute a violation of Article 112a, UCMJ.
  - 1.2.2.2. This order does not prohibit use: (1) pursuant to legitimate law enforcement activities; (2) by authorized personnel in the performance of medical duties; (3) when the individual did not reasonably know the substance was made or derived from hemp (including CBD); or (4) when approved and prescribed for medical use by the Food and Drug Administration (FDA) (and the user has a valid, current prescription).

#### 1.3. Drug Demand Reduction Program Goals and Objectives.

- 1.3.1. 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 and the Department of Defense (DoD).
- 1.3.2. Participate in community outreach. Community outreach is defined as on and off-base prevention, drug education/awareness and deterrence activities targeted to DoD family members, retirees, civilians, and contractors.
- 1.3.3. Maintain the health and wellness of a fit and ready fighting force as well as a drug-free DAF community.
- 1.3.4. Deter military members, including those members on initial entry to the DAF after enlistment or appointment, from using illegal drugs and abusing controlled substances.
- 1.3.5. Assist commanders in assessing the security, military fitness, readiness, and good order and discipline of their commands.
- 1.3.6. Detect and identify those members who abuse illegal drugs and other prohibited/controlled substances.
- 1.3.7. Provide a basis for action against a service member who tests positive for illicit drug
- 1.3.8. 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.

- 1.3.9. Ensure that all DAF military specimens are tested by a DoD-certified drug testing laboratory. **Note:** Field testing using rapid screening methods at the site of collection is not authorized. (**T-0**) Re-tests may be sent to a DoD-certified laboratory, the Armed Forces Medical Examiner System (AFMES), or a Department of Health and Human Services-certified laboratory.
- 1.3.10. Inform and educate DAF personnel on the ramifications or consequences of abuse of anabolic steroids, controlled substances, and other substances as discussed in **paragraph 1.2** of this DAFMAN. DAF members must know drug abuse is an offense under the UCMJ. ANG members in Title 32 status must know abuse makes them accountable to their State Code of Military Justice.
- 1.3.11. Ensure that DAF members serving in joint-service commands, operations, and schools are tested following guidance in this DAFMAN. (**T-1**) Host commanders may, at their discretion, test temporary duty (TDY) personnel assigned to their units following guidance and procedures outlined in this DAFMAN. Urine specimen collection of other service personnel may be performed using DAF DDR resources, provided drug testing is covered under the Host-Tenant Support Agreement or 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. (**T-1**)
  - 1.3.11.1. The supporting component at joint bases will conduct the drug testing program for all military personnel assigned to the joint base and any affiliated geographically separated units (GSUs) and detachments. (T-1) The supporting component will accomplish all testing following guidance in each supported component's respective regulations and procedures for selection, collection, packaging, shipping, and testing. (T-1) Supported component personnel are likely required to augment the supporting component's staff to oversee the testing and enhance confidence in the compliance and administration of the supported component's regulations and procedures.
  - 1.3.11.2. Foreign/International students will be tested using the same standard as United States military members only when authorized by international agreement or other legal authority. (**T-1**) Authorization will be documented in an MOU or MOA with other countries sending students to any DAF training platform (e.g., the United States Air Force Academy). (**T-1**)

#### Chapter 2

#### **ROLES AND RESPONSIBILITIES**

- **2.1.** Secretary of the Air Force for Manpower and Reserve Affairs (SAF/MR). Is responsible for execution of the DAF Drug Testing Program and enforcing compliance requirements.
- 2.2. Air Force Surgeon General (AF/SG).
  - 2.2.1. Serves as the OPR for the delivery of regulations and guidance for implementation of the DAF DDRP.
  - 2.2.2. Ensures program regulations and guidance meet the requirements established by the Office of Drug Demand Reduction (ODDR) Under Secretary of Defense for Personnel and Readiness and SAF/MR.
- 2.3. Department of the Air Force Drug Testing Program Manager (AFMRA/SG3L).
  - 2.3.1. Oversees the DAF DDRP, comprised of the DAF Office of Drug Demand Reduction (ODDR) and the Air Force Drug Testing Laboratory (AFDTL), and ensures regulations, guidance and procedures are in compliance with those established by DoD and DAF agencies.
  - 2.3.2. Oversees programming of the DAF drug demand reduction program budget.
  - 2.3.3. Identifies, monitors, and assesses drug abuse trends and emergent drug abuse threats in order to maintain an agile DAF Drug Testing Program.
  - 2.3.4. Participates as needed in quality assurance inspections of the AFDTL and other DoD drug testing laboratories. The quality assurance inspections assess the performance of the laboratory, and its adherence to the requirements as outlined in DoD Instruction (DoDI) 1010.16, *Technical Procedures for the Military Personnel Drug Abuse Testing Program (MPDATP)*.
  - 2.3.5. Monitors performance on external proficiency programs conducted by the AFMES to ensure continuous accuracy in test results.
  - 2.3.6. Serves as the DAF voting member on the DoD Biochemical Testing Advisory Board. **Note:** In the absence of the DAF Drug Testing Program Manager, an alternate voting member will be designated by the AF/SG.
  - 2.3.7. Serves as the DAF technical representative for developing specifications and awarding contracts at the DoD and DAF levels.
  - 2.3.8. Oversees an effective Medical Review Officer (MRO) training program.
  - 2.3.9. Ensures that qualified personnel review MRO interpretations of reported drug test results in the Internet Forensic Toxicology Drug Testing Laboratory (iFTDTL) Portal.

## 2.4. Department of the Air Force Drug Demand Reduction Program Collection Manager (AFMRA/SG3L).

2.4.1. Serves the DAF Drug Demand Reduction Program as the point of contact for collection operational guidance to MAJCOM Drug Demand Reduction Program Managers (DDRPMs).

- 2.4.2. Monitors testing rates to evaluate compliance of DAF collection sites with DoD-mandated testing rates. Monitors statistical data to evaluate collection trends to include untestable rates, discrepancy code assignments, and missing MRO calls. Engages with MAJCOM DDRPMs whose installations are not meeting policy requirements.
- 2.4.3. Develops standardized DAF training for personnel assigned to the DDRPM and Drug Testing Program Administrative Manager (DTPAM) functions and provides this training to MAJCOM DDRPMs responsible for ensuring collection training is provided to collection site personnel.
- 2.4.4. Reviews and provides instruction, as needed, for MAJCOM corrective action plans for discrepancies.
- 2.4.5. Forwards all DDR drug testing correspondence received from DoD and DAF agencies to the MAJCOM DDRPMs.

#### 2.5. Air Force Drug Testing Laboratory (AFDTL, AFMRA/SG3L).

- 2.5.1. Provides urinalysis drug testing to deter and detect drug misuse among service members in support of DoD and DAF objectives to provide a workplace free of illicit drug use.
- 2.5.2. Processes, maintains, and reports results of drug urinalysis specimens in support of the DAF and other DoD DDRPs.
- 2.5.3. Ensures the control and security of all specimens while they remain in possession of the laboratory.
- 2.5.4. Ensures accurate and timely processing and reporting of results, both positive and negative.
- 2.5.5. 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.
- 2.5.6. Ensures release of information or analytical results complies with the DAF and DoD guidance.
- 2.5.7. Provides consultation services to installation legal officials and health officers on drug testing procedures and regulations and ensures expert witness competency to provide testimony at DAF administrative boards and courts-martial.
- **2.6. 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, TDY, etc.) for military personnel involved in, or identified for, illegal drug use.

#### 2.7. Air Force Office of The Judge Advocate General (AF/JA).

- 2.7.1. Assists the AF/SG, AFMRA/SG3L, and MAJCOM/field operating agencies/direct reporting units in managing legal aspects of the drug testing program.
- 2.7.2. Provides advice regarding legal requirements.
- 2.7.3. Provides a legal representative and advisor to the AFDTL.

#### 2.8. Legal Advisor to the Air Force Drug Testing Laboratory.

- 2.8.1. Serves as advisor to the DAF ODDR and HQ AFDTL on all legal issues relating to DDR and drug testing at the laboratory.
- 2.8.2. Manages and facilitates training, provides litigation support, and assists DoD trial counsel in producing materials as necessary for litigation.

#### 2.9. Major Command Surgeon General (MAJCOM/SG).

- 2.9.1. Serves as the OPR for delivery of regulations and guidance for implementation of the DAF DDRP at the command level.
- 2.9.2. Appoints in writing a MAJCOM DDRPM who qualifies as delineated in **Chapter 3** of this DAFMAN to serve as the point of contact for installation-level DDRPMs and DTPAMs in administering the drug testing program. MAJCOM/SG will notify DAF ODDR Collection Manager of MAJCOM DDRPM.
- **2.10. Major Command Staff Judge Advocate (MAJCOM/SJA).** Serves as the MAJCOM OCR, assisting the command surgeon, for management of the legal aspects of the MAJCOM drug testing program.

#### 2.11. Major Command Drug Demand Reduction Program Manager (MAJCOM DDRPM).

- 2.11.1. Serves as the primary MAJCOM point of contact for administering the subordinate installation DDR programs, to include military/civilian DDRPs, and drug abuse prevention, education, and outreach.
- 2.11.2. Ensures adequate training has been provided to personnel assigned to the installation-level DDRPM and DTPAM functions. Responsible for training DDRPM/DTPAMs at installations without a trainer.
- 2.11.3. Ensures that installation-level collection personnel conform to this DAFMAN.
  - 2.11.3.1. Ensures installations accomplish MRO reviews, enter positive results into the iFTDTL Portal, and report positives in a timely manner.
  - 2.11.3.2. Monitors testing rates for installations in their command to ensure the established DAF testing requirement is accomplished.
  - 2.11.3.3. Monitors testing discrepancies for installations in their command to ensure compliance with this DAFMAN.
- 2.11.4. Communicates requested statistical data with the DAF DDRP Office by the last day of the following month.
  - 2.11.4.1. If requested, reviews and may reclassify as "caused by other" the specimen discrepancies listed in DoDI 1010.16 and assigned by the drug testing laboratory.
  - 2.11.4.2. Assists installations in developing corrective action plans when installations are not meeting compliance goals (e.g., testing and untestable rates).
  - 2.11.4.3. Provides final approval for corrective action plans to address discrepancies at installations in their command.
- 2.11.5. Forwards all DDRP correspondence received from higher headquarters to the installation DDRPMs and/or DTPAMs.

#### 2.12. Installation/Wing Commander.

- 2.12.1. Implements local drug testing guidelines and regulations following coordination with the servicing SJA.
- 2.12.2. Establishes guidance and procedures for retaining notification letters and documenting the reason a selected member is not available to test. Establishes guidance and procedures for cancelling testing of these members, or for testing these members at a later date (e.g., "due back testing") when they are not available to test when initially selected.
- 2.12.3. Ensures all compliance requirements are achieved following local guidelines and regulations, this DAFMAN, DoDI 1010.01, and DoDI 1010.16. Conversely, the installation/wing commander is responsible for failures to achieve compliance requirements, and for ensuring appropriate corrective actions are taken when failures do occur.
- 2.12.4. Ensures a training plan is implemented by local DDR personnel that encompasses standardized DAF DDR training and local guidelines and regulations.
- 2.12.5. Ensures testing level and type of test is appropriate to the local drug threat and is consistent with this DAFMAN and any additional DAF guidance.
- 2.12.6. Ensures the untestable specimen rate remains as low as reasonably achievable in order to maximize program value.
- 2.12.7. After Hours Collection: Will establish procedures to periodically collect and secure specimens outside normal duty hours, including weekends and holiday.
- 2.12.8. Conducts a mandatory meeting on a quarterly basis (or more often as required) to assess the status and effectiveness of drug testing program operations. AFR and ANG only: Wing commanders will ensure that a Cross Functional Oversight Committee meeting is held at least annually or more frequently if deemed appropriate.
- 2.12.9. May test DAF personnel assigned to their units on TDY. 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.
- 2.12.10. 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. Facility guidelines are available on the DDR Knowledge Exchange site.
- 2.12.11. Ensures adequacy of personnel resources to meet program administration requirements (e.g., DTPAM(s), observers, collection personnel). This must include backup support to maintain DDRP collection operations when regular DDRP personnel are absent.

- 2.12.12. Appoints in writing a DDRPM and/or a DTPAM who qualifies as delineated in **Chapter 3** of this DAFMAN. If the testing workload 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 one year (two years recommended). It is highly recommended each installation has at least two fully trained DTPAMs available at all times to ensure the DDRP is fully operational. AFR and ANG only: Appoints in writing DDRPMs and/or DTPAMs who qualify as delineated in paragraphs **Chapter 3** of this DAFMAN.
- 2.12.13. Serves as the supervisor or delegates supervision responsibilities of the DDRPM/DTPAM to director of staff (i.e., an individual within the installation commander's staff).
- 2.12.14. AFR and ANG only: Ensures commanders and first sergeants are trained on DDRP, to include their responsibilities, within 60 days of assumption of duty (ANG only: six months). Training may be accomplished by briefings provided by the DDRPM, DTPAM, or computer-based training, if available.

#### 2.13. Installation Staff Judge Advocate (SJA).

- 2.13.1. Advises commanders, DDRPMs, DTPAMs, and other installation officials and agencies regarding legal aspects of the DDRP.
- 2.13.2. Performs and documents periodic inspections of the drug testing program as described in **Chapter 5** of this DAFMAN. The SJA and assistant SJAs must reference the checklist provided by the Legal Advisor to the AFDTL. Recommends and ensures implementation of corrective actions to the DDRPM/DTPAM when necessary.
- 2.13.3. Communicates all observations that negatively impact the integrity of the program through appropriate channels to the MAJCOM SJA representative and to the Legal Advisor to the AFDTL.
- 2.13.4. Advises and coordinates on all requests for urinalysis drug testing other than routine random inspection testing.
- 2.13.5. Evaluates requests by service members for independent retests.
- 2.13.6. Requests, in writing, to the appropriate drug testing laboratory, extensions as needed to retain a positive specimen for administrative or UCMJ actions that will extend beyond one year. The originating agency must specify a defined period of time (e.g., six months) extending no more than one year beyond the specimen's assigned destruction date. A request for indefinite retention will not be honored by the laboratory. At the end of this extension period, the SJA must advise the laboratory every 60 calendar days of the need for further retention. The SJA is responsible for notifying the drug testing laboratory when further retention of the specimen is no longer necessary.
- 2.13.7. Reviews and approves the DDRPM/DTPAM training briefings and sessions for observers on the collection and observation processes for the drug urinalysis program.

#### 2.14. Train the Trainers.

- 2.14.1. Responsible for training current and new trainers within each MAJCOM.
- 2.14.2. Responsible for training DDRPM/DTPAMs at installations without a trainer.

- 2.14.3. Attends mandatory Train the Trainer meetings with the DAF ODDR.
- 2.14.4. Assists DAF ODDR in reviewing and developing training materials.

#### 2.15. Installation/Wing Drug Demand Reduction Program Manager (DDRPM).

- 2.15.1. The installation/wing DDRPM, or where there is no DDRPM, the DTPAM is responsible for the management of all aspects of the installation/wing DDRP to include budget and military/civilian drug urinalysis testing programs, drug abuse prevention, education, and outreach. If needed at certain installations, the MAJCOM DDRPM will manage the budget.
- 2.15.2. Acts as the point of contact for installation/wing drug testing and drug prevention/education issues and ensures that the DDRP is conducted following guidelines in this DAFMAN and DoD requirements.
- 2.15.3. Ensures that commanders and first sergeants are trained on the DDRP, to include their responsibilities, within 60 days of assumption of duty (ANG only: six months). Training may be accomplished by briefings provided by the DDRPM, DTPAM, or computer-based training, if available.
- 2.15.4. Briefs unit commanders, first sergeants, and supervisors on the status of the drug testing program. Depending on available manning, alternative DDR staff may conduct these briefings.
- 2.15.5. Ensures the DTPAM is adequately trained, and competent to perform duties associated with the DAF Drug Testing Program. The DDRPM (or DTPAM trainer) will train, document, and certify the installation backup collectors and GSU DTPAMs. MAJCOM DDRPMs will ensure DTPAMs at installation/wings with no DDRPM are adequately trained.
- 2.15.6. Ensures trusted agents and observers have documented training.
- 2.15.7. Will maintain a current contact listing of all unit commanders, first sergeants, trusted agents, legal office personnel, and MROs.
- 2.15.8. Safeguards the sensitive medical information that testing may generate following guidelines in AFI 33-332, *Air Force Privacy and Civil Liberties Program*.
- 2.15.9. Views all drug testing results within one duty day of the report date and will process positive and invalid results as described in **Chapter 7**.
- 2.15.10. For positives outlined in **paragraph 7.3**, ensures the MRO is notified, in writing, the same day drug testing results are viewed or in the case of AFR and ANG units, as soon as practicable, not to exceed 30 calendar days.
- 2.15.11. Following MRO review as described in **Chapter 7**, inputs the MRO interpretation/findings into the iFTDTL Portal and ensures proper notifications are made.
  - 2.15.11.1. RegAF, USSF and AFR only: notifies the member's commander and/or first sergeant, OSI and/or SFS, and installation SJA of all drug positive results that are not medically excused/explained by the MRO, and results indicating that specimens have been adulterated or are not consistent with human urine. Notifications are provided as described in **Chapter 7**.

- 2.15.11.2. ANG only: The wing-level DDRPM will forward all drug positive results that are not medically excused/explained by the MRO in a final MRO MFR, and results indicating that specimens have been adulterated or are not consistent with human urine, to the wing commander, unit commander, SJA, and OSI and/or SFS on or before the next Unit Training Assembly after initial receipt of positive notification. Wing level DDRPMs will track all open positive results through final disposition. The MAJCOM and ANG DDRPM (NGB/SGOH) will forward all unjustified and illicit drug positive results to the Air Force Indexing Cell no less than monthly.
- 2.15.12. In conjunction with the DTPAM, monitors the monthly rate of untestable specimens (fatal discrepancies) and non-fatal discrepancies. Coordinates with the installation commander to take appropriate action if greater than or equal to one percent of specimens are untestable. **Note:** A current list of discrepancy codes assigned at the AFDTL is available on the DDR Knowledge Exchange site. Untestable discrepancies at GSUs will be used for calculation of the units' untestable rates and will not be included for calculation of the host installations' untestable rates.
- 2.15.13. Uses DoD-approved software to track member(s) unavailable for testing because they cannot be located at the time (e.g., leave, pass, TDY, quarters, flying status, crew-rest, missile duty, or non-duty status etc.). Testing of unavailable members at a later date is at the discretion of the installation commander and is documented in the installation commander drug testing policy or regulation. Although highly recommended, members who are on leave, TDY, or deployed do NOT need to be kept on the due back list, but they must be tested during the fiscal year (FY) to meet the DoD compliance requirement of testing every service member once per year.
  - 2.15.13.1. AFR and ANG see **paragraph 4.3.7** of this DAFMAN for additional guidance regarding testing of unavailable members.
  - 2.15.13.2. ANG only: Uses DoD-Approved software to track open positive test results that are pending review up through final MRO disposition.
- 2.15.14. Maintains an installation level training plan. Requirements found in this DAFMAN and installation level policy/directives/regulations must be included. Standardized DAF training materials must be used during training.

#### 2.16. Installation Drug Testing Program Administrative Manager (DTPAM).

- 2.16.1. Serves as the primary point of contact for administering the installation drug testing program and is responsible for day-to-day urine specimen collection activities, to include the actual urine collection process.
- 2.16.2. Ensures DDRP is conducted following guidelines in this DAFMAN, DoDI 1010.01, DoDI 1010.16., and the installation DDR OIs.
- 2.16.3. Coordinates drug testing activities with the DDRPM and other agencies as applicable. If there is no DDRPM at the installation, then the DTPAM will coordinate with other agencies.
- 2.16.4. Ensures specimens are collected, packaged, and transported to the drug testing laboratory according to the forensic requirements of this DAFMAN and any guidance established by the HQ AFDTL. A sample checklist, which may be used at the collection site, is available on the DDR Knowledge Exchange site.

- 2.16.5. Makes notifications for specimen collection to trusted agents by confidential means. Notifies commanders/first sergeants and SJA when a member does not show for testing after notification by the trusted agent.
- 2.16.6. In conjunction with the DDRPM, monitors the rate of untestable specimens and takes immediate action if greater than or equal to one percent of specimens are untestable over a one-month period.
- 2.16.7. 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. Communicates findings and proposed resolutions to untestable discrepancies to the DDRPM or the DDRPM designated as a point of contact for the installation by the MAJCOM/SG if no installation DDRPM exists.
- 2.16.8. Safeguards the sensitive medical information that testing may generate following guidelines in AFI 33-332.
- 2.16.9. Must maintain an installation level training plan. Requirements found in this DAFMAN and installation level policy/directives/regulations must be included. Standardized DAF training materials must be used during training.

#### 2.17. Group, Squadron, Delta and Detachment Commander.

- 2.17.1. Orders drug testing of service members, including sweep testing, probable cause testing, and commander-directed testing. Any drug testing other than random testing should be coordinated with the SJA.
- 2.17.2. Ensures that all unit military members, regardless of rank or status, are subject to random testing.
- 2.17.3. Is responsible for issuing written and signed selection for testing notification letters to members. Commanders must ensure that notification letters are appropriately and legibly acknowledged, which must include the date and time of acknowledgement as well as the member's signature. A sample notification letter to provide a urine specimen is available on the DDR Knowledge Exchange site.
- 2.17.4. Commanders who choose to appoint a designee for issuing and ensuring member notification will consult with the servicing SJA. Designations must be made in writing.
- 2.17.5. Will appoint a trusted agent and alternate in writing. See **Chapter 3** of this DAFMAN for the qualification requirements.
- 2.17.6. Ensures proper investigation when a member selected for testing cannot be notified of their selection and it cannot be verified that it is due to a legitimate reason. Informs the servicing SJA of the situation, if necessary.
- 2.17.7. Provides observers for the urine specimen collection process who qualify as delineated in **Chapter 3** of this DAFMAN.
- 2.17.8. After consultation with the servicing SJA, OSI and/or SFS, considers appropriate disciplinary action against personnel that are confirmed positive for illicit drug use or drug abuse following guidance in **paragraph 1.2** of this DAFMAN. After any such disciplinary actions are complete, consults the servicing SJA, DAFI 36-3211, *Military Separations*.

2.17.9. Collection will occur on the day of notification. On a case-by-case basis, may postpone notification/testing of a member after coordination with the SJA. Postponing notification/testing of a member must be documented and occur only when unique circumstances arise.

#### 2.18. Trusted Agent.

- 2.18.1. Receives and maintains rosters of members selected for urinalysis testing and must be disposed following guidance in Air Force Record Disposition Schedule located in the Air Force Records Information Management Systems at: <a href="https://afrims.cce.af.mil/afrims/rims.cfm">https://afrims.cce.af.mil/afrims/rims.cfm</a>.
- 2.18.2. Notifies members selected for urinalysis testing no later than two hours prior to the end of the scheduled collection time. AFR and ANG no later than one hour prior to the scheduled collection time.
- 2.18.3. Returns the *Drug Testing Program-Working Copy* roster to the DTPAM with annotations of those members notified and those not notified by the time specified by the DTPAM. For those not notified due to legitimate reasons (e.g., due to leave, pass, TDY, quarters, flying status, crew rest, missile duty, or non-duty status, etc.) a projected available date will be provided.
- 2.18.4. Notifies the unit commander/first sergeant when a selected member cannot be contacted and cannot verify that it is due to a legitimate reason.

#### 2.19. Observer.

- 2.19.1. Escorts the service member selected to provide a urine specimen to the appropriate facility (urinal or toilet) to collect the specimen, maintaining the specimen bottle in sight at all times.
- 2.19.2. Directly observes the urine leaving the member's body and entering the specimen bottle (or collection cup).
- 2.19.3. Directly observes all behavior of the specimen donor to preclude and identify attempts to avoid drug detection through adulteration, contamination, or break in the chain of custody.
- 2.19.4. After a specimen is collected, escorts the member to the DTPAM's/collector's processing station, maintaining the specimen bottle in sight at all times.

# 2.20. Military Treatment Facility Commanders and Air Force Reserve Component (ANG and AFR) Medical Unit Commanders.

- 2.20.1. Appoints in writing licensed physicians to serve as primary and alternate MROs for the DDRP, who qualify as delineated in **paragraph 3.1.11** of this DAFMAN.
- 2.20.2. ANG only: The medical group commander will have oversight of the DDRP and will appoint a physician, physician assistant, or nurse practitioner to serve as the MRO.
- 2.20.3. Ensures an evaluation is conducted to determine the presence of a verifiable medical condition for personnel who claim to be unable to provide a specimen.

#### 2.21. Medical Review Officer (MRO).

2.21.1. Reviews positive drug test messages and reports.

- 2.21.2. Reviews the member's medical, pharmacy, and dental records as well as other appropriate documents to assess and interpret positive test results as justified or unjustified.
- 2.21.3. Consults as needed with a forensic toxicologist at the AFDTL when interpreting drug testing results.
- 2.21.4. May serve as the liaison between DDR and the medical provider tasked with evaluating personnel who claim to be unable to provide a specimen. Reviews medical evaluation findings and advises DDR on evaluation outcome following guidance in **paragraph** 4.4.3.7 of this DAFMAN.

#### Chapter 3

# QUALIFICATIONS, APPOINTMENT, AND TRAINING OF DRUG DEMAND REDUCTION (DDR) PERSONNEL, TRUSTED AGENTS, OBSERVERS, AND MROS

#### 3.1. Qualifications of Personnel.

- 3.1.1. Individuals are ineligible to serve if they have a record of disqualifying civilian adverse action, conviction by courts-martial or civilian criminal court. (**T-1**) Additionally, the individuals are ineligible if they have received non-judicial punishment under Article 15, UCMJ (or, for ANG members, similar actions under the relevant State's code), or a Letter of Reprimand or similar administrative action (Letter of Admonishment, Letter of Counseling) for misconduct involving dishonesty, fraud, or drug abuse. (**T-1**)
- 3.1.2. Cannot have an active Unfavorable Information File following guidance in DAFI 36-2907, *Adverse Administrative Actions*. **(T-1)**
- 3.1.3. Must be an individual possessing unquestionable integrity and trustworthiness. (T-1)
- 3.1.4. Must have no pending UCMJ action (court-martial, Article 15), pending civilian criminal action or disqualifying adverse action, or pending administrative action (Separation, Letter of Reprimand/ Counseling/Admonishment for dishonesty, fraud, or other integrity offenses). (T-1)
- 3.1.5. Must perform their duties without bias and uphold the privacy, respect, and dignity of all participants within the DDRP. (**T-1**)
- 3.1.6. Cannot have a medical or mental health condition that precludes the individual from responsibly performing their assigned duties. (**T-1**)
- 3.1.7. Cannot be six months or less away from either separation or retirement from DAF at the time they are appointed. (**T-1**)

#### 3.1.8. DDRPM/DTPAMs (MAJCOM and Installation):

- 3.1.8.1. It is highly preferable individuals are full-time civilian employees, permanently assigned to serve a minimum term of 12 consecutive months (two years recommended), to ensure a high level of program integrity.
- 3.1.8.2. If military personnel are appointed to serve as DDRPM (MAJCOM and Installation), they must be a commissioned officer or noncommissioned officer at least E-6. Military personnel DTPAMs must be a noncommissioned officer at least E-5 in rank. (T-1) If a commissioned officer or noncommissioned officer at the rank of at least E-6 is not available for DDRPM appointment, a noncommissioned officer at the rank of E-5 may be appointed, but only with the concurrence of the servicing SJA.
- 3.1.8.3. It is highly preferable MAJCOM DDRPMs are full-time civilian employees, funded by the Office of the Under Secretary of Defense, permanently assigned, and dedicated to their DDR duties.

- 3.1.8.4. ANG only: Appointed in writing by the wing commander. The DDRPM/DTPAM may be civilian or contract personnel provided they meet qualifications and receive appropriate training and certification in performing required tasks and duties associated to the installation DDRPM/DTPAM role. (T-2) If the wing commander appoints a military member, the DDRPM must be a noncommissioned officer at least E-6/DTPAM must be a noncommissioned officer at least E-5 in rank and will not be a member of the Guard medical unit. (T-2) Guard members must be in a duty status while performing DDRPM duties and will not be appointed as a DDRPM/DTPAM if they are within one year of separation or transfer from an active participation status. (T-2)
- 3.1.8.5. AFR only: Appointed in writing by the wing commander, primary DDRPMs and/or DTPAMs will be traditional reservists who will fill the DDR Unit Type Code(s) and the corresponding assigned manpower position for a minimum of 18 months. (**T-2**) An Air Reserve Technician may be placed in the DDR Unit Type Code and corresponding Part B manpower authorization if the DDRP is his/her primary duty on Unit Training Assembly drill weekends. (**T-2**) AFR military personnel will not be appointed as a DDRPM/DTPAM if he/she is within one year of separation or transfer from an active participation status. (**T-2**)
- 3.1.9. Train the Trainers personnel:
  - 3.1.9.1. Must be a DDRPM or DTPAM. (**T-1**)
  - 3.1.9.2. Must be a trainer. (**T-1**)
  - 3.1.9.3. Must be knowledgeable on DDR processes, procedures, and guidelines with 3 years' experience in DDR. (T-1)

#### 3.1.10. Observers:

- 3.1.10.1. Should be DAF commissioned officers or noncommissioned officers. In the event of the unavailability of officers or noncommissioned officers to perform observer duties, personnel in the grade of E-4 may be used, but only with the concurrence of the servicing SJA. If a federal civilian employee is used to perform observer duties, he or she must be at least a GS-05 or equivalent. (T-1) USAFA Cadets can be used as observers during Basic Cadet Training. (T-1) At joint installations, other Services' military members may serve in this role to facilitate drug testing of DAF personnel. New accession testing (e.g., members entering Basic Military Training School/Officer Training School/United States Air Force Academy) and DAF active-duty members assigned to ANG bases may use contract personnel as observers provided they have appropriate training and certification in performing these tasks.
- 3.1.10.2. Must not be assigned to work in any legal office. (**T-1**)
- 3.1.10.3. ANG and AFR only: Must not be within one year of either separation or transfer from an active participation status. (**T-1**) Can use contract personnel as observers provided they have appropriate training and certification in performing these tasks.

#### 3.1.11. MROs:

3.1.11.1. Must have appropriate medical training to interpret and evaluate a member's positive test result based on review of information in the member's medical record. (T-1)

- 3.1.11.2. Must be knowledgeable in the medical use of prescription drugs and the pharmacology and toxicology of prescription and illicit drugs. (**T-1**)
- 3.1.11.3. Only individuals holding either a Doctor of Medicine, a Doctor of Osteopathy, Physician Assistant, or Nurse Practitioner degree may serve as MROs. (**T-1**)

#### 3.2. Appointment of Personnel.

- 3.2.1. For military members appointed to serve in DDR, the appointment does not assign additional duties, but instead provides formal acknowledgement that the appointee qualifies to carry out the responsibilities and duties required of the position.
- 3.2.2. Prior to appointing an individual to serve, the appointing authority will review the individual's Personnel Information File (military) or personnel record (civilian). (**T-1**)
- 3.2.3. On a case-by-case basis, the appointing authority can make the determination on whether conduct is dishonest and/or fraudulent and will receive advice from the servicing SJA in situations in which it is unclear as to whether past misconduct is disqualifying. (T-1)
- 3.2.4. The appointed individuals must meet the qualification requirements outlined in paragraph 3.1.
- 3.2.5. Major Command Drug Demand Reduction Program Managers (MAJCOM DDRPMs):
  - 3.2.5.1. Appointed in writing by the MAJCOM/SG as the primary point of contact for administering the installation DDR Programs. (T-1)
  - 3.2.5.2. MAJCOM/SGs will coordinate with local military law enforcement authorities (e.g., SFS, OSI, etc.) and/or the SJA to verify that the selected individual does not have a record of conviction for any offense or history of past misconduct involving dishonesty, fraud, or drug abuse (including use, possession, or distribution). (T-1)
- 3.2.6. Train the Trainers personnel are appointed by the MAJCOM DDRPM to serve a minimum of one consecutive year (two years, or longer, recommended).
- 3.2.7. Installation Drug Demand Reduction Program Managers (DDRPMs):
  - 3.2.7.1. Appointed in writing by the installation commander/wing commander to serve a minimum of one year (two years recommended). DDRPMs are the primary point of contact for administering the installation drug testing program. (**T-1**)
  - 3.2.7.2. In AFR units with one allocated manpower position dedicated to drug testing and outreach, that individual will serve as both the DDRPM and DTPAM. (**T-1**)
- 3.2.8. Installation Drug Testing Program Administrative Manager (DTPAMs) are appointed in writing by the installation/wing commander to serve a minimum of one year (two years recommended). (T-1)

#### 3.2.9. Trusted Agents:

3.2.9.1. A primary and at least one alternate must be appointed in writing by the squadron, detachment, group, delta, or wing commander to serve a minimum of six months (one year recommended). (T-1). Military members appointed as trusted agents must be at least six months away from either separation or retirement from DAF. (T-1)

- 3.2.9.2. Commanders must appoint a trusted agent from within their support staff. (**T-1**) If the commander does not have a commander's support staff, the commander must identify and appoint in writing a trusted agent from within the unit. (**T-1**)
- 3.2.10. Observers are appointed in writing by the group, squadron, delta, or detachment commander. (T-1)
- 3.2.11. Medical Review Officers (MROs), a primary and at least one alternate, must be appointed in writing by the Military Treatment Facility Commanders and Air Force Reserve Component (ANG and AFR) Medical Unit Commanders. (T-1)

#### 3.3. Training of Personnel.

- 3.3.1. Major Command Drug Demand Reduction Program Managers (MAJCOM DDRPMs):
  - 3.3.1.1. Trained by the DAF DDRP Collection Manager to serve as Trainer the Trainers for subordinate personnel within the MAJCOM. (T-1)
  - 3.3.1.2. As a part of training, must attend monthly MAJCOM DDR meetings and quarterly Train the Trainer meetings with the DAF ODDR. (T-1)
- 3.3.2. Train the Trainers personnel:
  - 3.3.2.1. Trained by the MAJCOM DDRPM. (T-1)
  - 3.3.2.2. As part of training, must attend quarterly meetings with DAF ODDR. (T-1)
- 3.3.3. Installation Trainers:
  - 3.3.3.1. Trained by the MAJCOM Train the Trainers. (T-1)
  - 3.3.3.2. Training must be accomplished in person or by means that provide real-time observation and interaction between the trainer and the trainee. (**T-1**)
- 3.3.4. Installation Drug Demand Reduction Program Managers (DDRPMs):
  - 3.3.4.1. Must become a trainer within 12 months of appointment. (T-1)
  - 3.3.4.2. Trained by a trainer or Train the Trainer within the MAJCOM. (T-1)
  - 3.3.4.3. Training must be accomplished in person or by means that provide real-time observation and interaction between the trainer and the trainee. (**T-1**)
- 3.3.5. Installation Drug Testing Program Administrative Managers (DTPAMs):
  - 3.3.5.1. Trained by the installation DDRPM. Installations without a DDRPM, or one in which the DDRPM is not a trainer, can receive training from a trainer or Train the Trainer within the MAJCOM. (T-1)
  - 3.3.5.2. Training must be accomplished in person or by means that provide real-time observation and interaction between the trainer and the trainee. (**T-1**)
- 3.3.6. Trusted Agents:
  - 3.3.6.1. Trained by the installation DDRPM/DTPAM. (T-1)
  - 3.3.6.2. Must have documented training. (T-1)
- 3.3.7. Observers:

- 3.3.7.1. Trained by the installation DDRPM/DTPAM.
- 3.3.7.2. Prior to participating in the collection process, observers must 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 following established guidelines. (**T-1**) These signed briefing forms must be disposed following guidance in Air Force Record Disposition Schedule located in the Air Force Records Information Management Systems at: <a href="https://afrims.cce.af.mil/afrims/rims.cfm">https://afrims.cce.af.mil/afrims/rims.cfm</a>. (**T-1**)
- 3.3.7.3. A briefing remains current for an observer for a maximum of seven calendar days, after which the briefing must be re-accomplished. **(T-1)**
- 3.3.7.4. Must physically observe the process involved in observation and collection of specimens prior to performing the duties. **(T-1)**
- 3.3.8. Medical Review Officers (MROs):
  - 3.3.8.1. Must complete DAF-approved MRO training within four months of appointment as an MRO. (T-1) MRO training documents and exam can be found on the DDR Knowledge Exchange site. Installation DDRPM/DTPAMs can assist in gathering these documents from the DDR Knowledge Exchange site for the MRO.
  - 3.3.8.2. Refresher training must be accomplished at minimum every three years. (T-1)

#### Chapter 4

# GUIDANCE AND PROCEDURES FOR MEMBER SELECTION FOR TESTING, URINE SPECIMEN COLLECTION, AND PACKAGING AND SHIPPING FOR TESTING

## 4.1. Types, Levels, and Frequency of Testing for Department of the Air Force (DAF), and Air Reserve Components (AFR and ANG).

- 4.1.1. The primary goal of military drug testing is deterrence, and this is achieved by maintaining a program that is highly visible and relies on unannounced urine collections. The primary means DAF uses to deter substance abuse is through detection using frequent, random testing in non-deployed settings. Daily random testing is strongly encouraged.
- 4.1.2. DAF installation/wing commanders will ensure compliance with DoD standards for testing all DAF members, at a minimum, once annually. (**T-0**) This is accomplished through random selection of DAF personnel using DoD-approved software or through a combination of random selection and dorm, unit sweeps, and gate sweeps. Installations will use DoD-approved selection software for random selection testing. (**T-0**)
- 4.1.3. Every service member must be tested, at a minimum, once every FY. (T-0) To achieve this requirement, commanders must implement a unique member testing policy in coordination with the servicing SJA and installation DDRPM/DTPAM. (T-1) To assist commanders with implementation, the DoD approved computer program has an untested member pool comprised of members who do not have a testable result in the FY as well as a pool comprised of all installation members (i.e.- "master pool/roster"). (T-1) Collection sites will implement the installation's unique member testing policy by performing selections from both pools at a frequency sufficient to achieve the testing requirement. Installation unique member testing policies must ensure selections are occurring from the master pool/roster each month to maintain the deterrent effect of random drug testing. (T-1) Unique member testing policies that put more emphasis on selections from the untested member pool each month can cause an increase in multiple selections and collections of any one member. It should also be noted, members will not be removed from the untested member pool until a testable result is posted from the laboratory. (T-1) The computer program monthly selection numbers (i.e.- the number of members selected during a random selection) can be adjusted (increased or decreased) for both pools to ensure the annual collection testing requirement is achieved. If a combination of computer-based testing and unit sweeps or gate checks are used, random selection using DoDapproved software must be commensurate with established guidelines. (T-1) At any point during the FY, it is permissible to conduct sweeps of any individuals not tested during the FY to ensure all DAF personnel are tested once annually.
- 4.1.4. 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 and bases with a population of 500 DAF members or less). (T-1) Computer-generated random testing days must occur on at least six days per month (three days at GSUs and bases with a population of 500 DAF members or less). (T-1) The Check Random Testing Day button within the DoD approved computer program must be pushed at least 15 days per month. (T-1) This requirement

is not applicable to AFR and ANG. In the event of a public health emergency as declared by the installation commander, other emergency situation (e.g., a major medical event), or catastrophic event (to include, but not limited to, a natural disaster), the installation commander has the authority to direct the temporary suspension of DDR operations. This authority may not be further delegated. **NOTE:** This waiver authority does not apply to other requirements in this DAFMAN, such as the new accession testing requirements in paragraphs **4.2.4 through 4.2.4.5.** Direct any questions regarding the applicable waiver authority to AFMRA/SG3L.

- 4.1.5. AFR and ANG only: Will conduct random testing during regular scheduled drill days and/or during the member's annual tour. (T-1) Monthly testing is recommended but not required if the annual quota is met, and the program maintains a deterrent effect. It is suggested that drug testing of AFR and ANG members be conducted during the month in order to reduce the demands on limited time available during drills and to enhance the deterrent effect.
  - 4.1.5.1. Random and other forms of inspection testing will be performed at a frequency deemed appropriate by the wing commander to meet the requirements specified in this DAFMAN. (T-0) AFR and ANG units may test at a lower rate only if granted an exception waiver by the ODDR. (T-0) Monthly testing is highly encouraged. AFR and ANG units will make every effort to achieve an equivalent rate of testing as outlined in paragraph 4.1.3 of this DAFMAN. (T-1) Members will be tested using available AFR and ANG resources and constraints on training time. (T-1) AFR and ANG personnel on extended RegAF or USSF (Guard in Federal status or active Reserve personnel) will be tested at the same rate as the RegAF and USSF components. (T-0) RegAF and USSF units are responsible for testing assigned Individual Mobilization Augmentees and AFR and ANG personnel mobilized to federal service. (T-1) Prior to testing ANG members in Title 10 status, units must notify the 201st Mission Support Squadron commander by email of the impending testing at the following address: NGB.CC.201MSS.ADCON.Org@us.af.mil. (T-2) Members in a Title 10 status will receive the 201st Commander Notification letter. (T-2)
  - 4.1.5.2. 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-1**) Notification of selection for testing will not be made until the day of testing. (**T-1**)
  - 4.1.5.3. Once notified, members must report for testing within two hours. (**T-1**) Members 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-1**) AFR and ANG: refer to **paragraph** 4.3.7.
- 4.1.6. The DTPAM at a GSU can run local drug testing software to select testing days and personnel for testing. Alternatively, personnel assigned to GSUs can be included in the drug testing software of the host base DDRP.

- 4.1.6.1. Names of GSU personnel selected by the host base on days that are not designated for testing at the GSU will be held by the 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 will be documented in an MFR by the host base. (**T-1**) In this situation, the GSU will not be required to test four days (so long as all assigned personnel are in the selection pool and are included for selection each time the software is used for making selections).
- 4.1.6.2. ANG only: GSUs will drug test members on a recommended testing schedule of a quarterly basis, which will be provided by the wing commander in coordination with the wing SJA. GSUs may test at a higher monthly rate, but only with wing commander and wing SJA approval. (**T-2**)

#### 4.2. Levels and Frequency of Testing for New Accessions.

- 4.2.1. All new accessions into the DAF will be tested. (**T-1**) The following individuals are required to be tested:
  - 4.2.1.1. New enlisted entrants into the DAF to include officer candidates undergoing initial training in an enlisted status. **(T-0)**
  - 4.2.1.2. Students entering the United States Air Force Academy, United States Air Force Academy Preparatory School, or those entering the Reserve Officer Training Corps. (**T-0**)
  - 4.2.1.3. Foreign or international students entering the United States Air Force Academy will be tested following host country agreements. (**T-0**)
  - 4.2.1.4. Other individuals to whom a commission may be offered following completion of a commissioning program. (**T-0**)
  - 4.2.1.5. Regular and Reserve officers appointed from the civilian sector. (T-0)
  - 4.2.1.6. Prior service applicants for enlistment in the active component with a break in service of more than six months. (**T-0**)
  - 4.2.1.7. Reserve officers entering RegAF or USSF after an educational delay following completion of Reserve Officer Training Corps studies and appointment. (**T-0**)
  - 4.2.1.8. Newly assigned AFR and ANG members who have not yet attended Basic Military Training school, Commissioned Officer Training, Basic Officer Training, etc., and are participating with a unit of assignment, Development and Training Flight, etc. for pay and/or points may be randomly drug tested and will be included in the local AFR and ANG DDRP Drug Testing Database for such purposes. (**T-0**)
- 4.2.2. All new entrants to the DAF will be tested for the same drugs. (**T-1**) The analysis will be conducted at a DoD-certified forensic drug testing laboratory using procedures established by the ODDR as contained in DoDI 1010.16. (**T-0**)

- 4.2.3. New accessions must present a valid photo identification, such as a driver's license, state identification card, passport, or copy of entry orders with photo identification imbedded. (T-1) The member's Social Security number must be verified through possession of a Social Security Card or signed commander's flight roster. (T-1) Such members will not be excluded from providing a specimen for urinalysis testing. (T-1) Situations in which the Social Security number cannot be verified must be handled through the base legal office on a case-by-case basis. (T-1)
- 4.2.4. The timing of drug testing for the new accessions listed above is as follows:
  - 4.2.4.1. Individuals listed above who are required to undergo testing must be tested within 72 hours after initial entry into the DAF. (**T-0**) Initial entry into the RegAF or USSF is the member's first period of full-time duty in the active military service of the United States following enlistment or appointment.
  - 4.2.4.2. Enlisted members must be tested at the Basic Military Training school. (T-0)
  - 4.2.4.3. Officers and officer candidates not covered under paragraphs 4.2.1.2 and 4.2.1.5 must undergo testing during the officer basic courses (e.g., Officer Training School-Abbreviated and Officer Training School). (T-0) If an officer's initial entry into the DAF does not occur at the basic course, testing must be conducted at the officer's permanent duty station within 72 hours of arrival. (T-1)
  - 4.2.4.4. Individuals covered under **paragraph 4.2.1.2** must undergo testing and be evaluated during the physical examination given to the applicant before appointment as a cadet. **(T-1)**
  - 4.2.4.5. Individuals covered under paragraphs **4.2.1.7** and **4.2.1.8** must be tested and evaluated in conjunction with a reentry physical (if conducted), or within 72 hours following reentry at accession locations specified by the DAF (e.g., first duty station). (**T-1**)

#### 4.3. Notification of Department of Air Force Members Selected for Testing.

- 4.3.1. Notification of selection to provide a urine specimen is made by direct contact (physical or by phone) with the selected member, and the trusted agent must be able to verify the selected member received the notification of selection. (**T-1**)
- 4.3.2. When notified of random selection to provide a urine specimen, the selected military member must acknowledge receipt of a written notification by endorsing with his/her signature. (T-1) Failure by military members to obey the mandatory provisions of this paragraph is a violation of Article 92, UCMJ, and may result in criminal prosecution and/or administrative disciplinary action. Violations may result in enhanced punishment under Article 92(1) of the UCMJ. Members may be found to have violated Article 92(1) regardless of their knowledge of the requirements established by this publication. For ANG members, violations may also result in adverse action under the state military code. The signed notification letter must be disposed following guidance in Air Force Record Disposition Schedule located in the Force Records Information Management **Systems** at: https://afrims.cce.af.mil/afrims/rims.cfm. (T-1)

- 4.3.3. Military members selected for random drug testing must report to the designated testing site with their military identification card and the signed written notification. (**T-1**) Situations in which those without a military identification card are selected for testing will be addressed through the servicing legal office on a case-by-case basis. (**T-1**) Failure by military members to obey the mandatory provisions of this paragraph is a violation of Article 92, UCMJ and may result in administrative disciplinary action. Violations may result in enhanced punishment under Article 92(1) of the UCMJ. Members may be found to have violated Article 92(1) regardless of their knowledge of the requirements established by this publication. For ANG members, violations may also result in adverse action under the state military code.
- 4.3.4. Once notified, members selected for testing must report to the testing location within two hours and the specimen must be collected that same day subject to the exceptions listed in paragraphs 4.3.5 and 4.3.6 of this DAFMAN. (T-1) Upon the member's arrival at the testing location, the DDRPM/DTPAM will annotate, on the notification letter, the date and time the member arrived at the collection site. (T-1) The DDRPM/DTPAM will retain the original notification letter in collection site records which will be available upon request during site inspections or audits. (T-1)
- 4.3.5. Commanders will authorize an appropriate amount of time in excess of two hours for personnel who must travel to the collection site as required by distance and/or traffic or weather conditions. (T-1) Any such time extension must be noted in the Notification of Selection to Provide a Urine Specimen. (T-1)
- 4.3.6. Personnel selected to provide a specimen who are shift workers or routinely work alternative or irregular schedules during the regular duty week must report to the testing location within two hours of notification, or as soon as possible upon returning to duty. (T-1) It is imperative that commanders or their designees coordinate with the DDRPM/DTPAM prior to notifying the selected member to minimize the amount of time between a member's notification and ability to report.
- 4.3.7. AFR and ANG only: 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-1)
- 4.3.8. If the trusted agent is unable to notify a member and cannot verify that the member is on leave, pass, quarters, flying status, crew-rest, deployed, TDY, missile duty, or non-duty status, the trusted agent will notify the member's commander. (T-1) The member's commander and/or first sergeant will investigate the member's absence and coordinate with the servicing SJA as necessary. (T-1)
- 4.3.9. Commanders will take appropriate disciplinary action against personnel who fail to report for testing after notification without coordinating with the member's commander (or designee) and obtaining the appropriate authorization. (**T-1**) All actions must be coordinated with the SJA to ensure the integrity of the program. (**T-1**)

- 4.3.10. 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-1**) Once this has been accomplished, the testing site personnel may release the member. Failure by military members to obey the mandatory provisions of this paragraph is a violation of Article 92, UCMJ and may result in administrative disciplinary action. Violations may result in enhanced punishment under Article 92(1) of the UCMJ. Members may be found to have violated Article 92(1) regardless of their knowledge of the requirements established by this publication. For ANG members, violations may also result in adverse action under the state military code.
- 4.3.11. In the event the DDRPM/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-1) Arrangements must be made to ensure that all aspects of packaging and shipping of the box containing the DTPAM's specimen 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-1) Performing DTPAM duties does not excuse the requirement to provide a specimen if selected and notified to do so. (T-1)

#### 4.4. Inability to Provide a Urine Specimen.

- 4.4.1. Commands will take precautions to ensure the member is not attempting to avoid detection during the drug testing process. (T-1) Member specimen collections must be directly observed. (T-0) If a member claims to be unable to provide a specimen, the member will remain under observation until a specimen is provided during the command's collection period. (T-1) Under no circumstances will an otherwise healthy person, unable or unwilling to provide a specimen, be catheterized solely for the purpose of obtaining a urine specimen. (T-1)
- 4.4.2. If a member tells the DTPAM/DDRPM, upon arrival at the collection site, that he or she cannot provide a specimen, the DTPAM/DDRPM must begin the collection procedure regardless of the reason given. (T-1)
- 4.4.3. At the point in the collection procedure where the DTPAM/DDRPM and member unwrap/open a collection container, the DTPAM/DDRPM does the following:
  - 4.4.3.1. Requests the member to try to provide a specimen. (T-1)
  - 4.4.3.2. Directs the member to drink fluids. (**T-1**) **NOTE:** The member is given a reasonable amount of fluid to drink distributed reasonably through a period of up to three hours (an eight-ounce glass of water every 30 minutes, not to exceed 40 ounces over a period of three hours), or until the member has provided a sufficient amount of urine, whichever occurs first. (**T-1**)
  - 4.4.3.3. Instructs the member to let the DTPAM/DDRPM know when he or she can provide enough quantity of specimen. (T-1) Note: It is recommended that the DTPAM/DDRPM allow enough time to have only one additional attempt rather than having to document several unsuccessful attempts. If the member refuses to attempt to provide a urine specimen, the collection procedure is discontinued, a "refusal to test" is noted by DDRP staff, and the commander is notified. (T-1)

- 4.4.3.4. Maintains a record (e.g., an annotation on a supplemental document maintained with test register) of the time of each attempted void, whether any quantity of any specimen was provided, and the total ounces of fluid given to the member for consumption. If no specimen is provided during the attempted void, this must also be annotated in the record. **(T-1)**
- 4.4.3.5. Discards any inadequate specimen and the collection container that was used for the void. **(T-1) Note:** If no urine was collected in the collection container during an attempted void, the collection container may be used for the next attempt.
- 4.4.3.6. DDR personnel will discontinue the collection procedure and notify the members commander, if after a period of three hours, the member is unable to provide an adequate specimen (i.e., from the time the member first demonstrated that he or she was unable to provide enough quantity of specimen). (T-1) DDR personnel will then release the member to his/her command. (T-1)
- 4.4.3.7. Command assumes responsibility for ensuring the member submits to a medical evaluation. Command will take appropriate action to determine whether the member's inability to provide a specimen is due to a refusal to test or a verifiable medical condition, which will require evaluation by the local military treatment facility as soon as possible. (T-1) ANG members will report to the Guard medical unit for medical documentation. (T-1) The commander will appoint a unit representative to escort the member to the military treatment facility or Guard medical unit, as appropriate, and remain under observation. (T-1) If the medical evaluation reveals the member does not have a verifiable medical condition causing his or her inability to provide urine, command and DDR staff will be notified of the determination and will not pursue further attempts to collect a specimen. (T-1) The commander will then consult with the servicing SJA for further guidance. (T-1) If a medical evaluation reveals a medical condition is causing the inability to provide a specimen, the commander will consult with the servicing SJA for further guidance. (T-1)

#### 4.5. Procedures for Collecting Urine Specimens.

- 4.5.1. All collection supplies must be maintained in a limited access, secure area. (**T-1**) Names of individuals having access to this area must be clearly posted via an MFR and access to all others will be denied. (**T-1**) The DDRPM/DTPAM appointment letter is not a limited access MFR and cannot be used as such. (**T-1**)
- 4.5.2. All collection products must be generated using the DoD approved computer program. (T-1) The computer program pre-populates specimen and member information on all collection products and a barcode is imbedded on both the bottle label and DD Form 2624, *Specimen Custody Document Drug Testing*. The barcoded bottle label should be dark and clear to avoid scanning issues at the laboratory and discrepancy codes for the collection site. If barcoded products cannot be generated, download blank products using the DoD approved computer program. Blank products are fillable PDF documents and should be completed with all known information before printing to reduce illegibility issues. Handwritten entries must be legible, and use of blue or black ink is strongly recommended. (T-1) Specimens submitted using blank products will receive a testable discrepancy code. (T-1) Specimens submitted on an unapproved label will receive an untestable discrepancy code. (T-1)

- 4.5.3. Required specimen bottle information. The collector ensures that the urine specimen bottle label contains the following information legibly annotated. Recommend any handwritten information on bottle labels be annotated with a ballpoint pen (blue or black ink is recommended) to avoid problems with ink smearing from felt-tip and similar pens:
  - 4.5.3.1. Collection year, month, and day. Date must be reflected as YYYYMMDD. (T-1)
  - 4.5.3.2. Base Identification Number, ensuring the proper prefix correctly identifies the status of the member (e.g., F DAF, R Air Force Reserve, G Air National Guard). **(T-1)**
  - 4.5.3.3. All digits of the donor's DoD Identification Number (found on the back of the member's common access card directly under the heading "DoD Identification Number") or Social Security number (SSN). (**T-1**) The DoD Identification Number is the primary means of specimen identification used in the Military Drug Abuse Testing Program. Starting 1 January 2020, specimens arriving to the military drug testing laboratories using the member's SSN will be assigned an untestable discrepancy. (**T-1**) Only units with an approved exemption will submit specimens with SSNs (for example, Basic Military Training accessions where the member has not received a military identification number yet.). (**T-0**)
  - 4.5.3.4. Donor's initials certifying the authenticity of the specimen, correctness of bottle information, and witnessing the application of the tamper-evident tape. (**T-1**)
  - 4.5.3.5. Observer's initials. (T-1)
  - 4.5.3.6. Collector's initials. (T-1)
  - 4.5.3.7. No portion of the donor's name (first name, middle name, or last name, including signature) will appear on the label. (**T-1**)
  - 4.5.3.8. The barcode label must have the corresponding information printed in a format that can be read without a barcode reader. (**T-1**) Additional information may be recorded on the bottle label (e.g., forensic corrections) if it does not interfere with reading the barcode.
- 4.5.4. Required Testing Register Information. The DTPAM maintains the testing register. It is recommended that register documents be annotated with a ballpoint pen (where not typed) to avoid problems with ink smearing from felt-tip and similar pens. The testing register is maintained locally by the installation DDRP office. Under no circumstances will the testing register be shipped to the drug testing laboratory. (T-1) The testing register includes the following minimum identifying information:
  - 4.5.4.1. Time, month, day, and year in the requested format. (T-1)
  - 4.5.4.2. Batch number and specimen number. (**T-1**)
  - 4.5.4.3. All digits of the donor's DoD Identification Number or SSN. (T-1)
  - 4.5.4.4. Donor's rank. (**T-1**)
  - 4.5.4.5. Donor's printed name, signature, and initials. (T-1)
  - 4.5.4.6. The time at which the donor provided the specimen to the collector. (T-1)

- 4.5.4.7. Observer's printed name, signature, and initials. (T-1)
- 4.5.4.8. Collector's printed name and signature. (**T-1**) The collector's block should not be used for remarks.
- 4.5.4.9. Test basis code. (**T-1**)

#### 4.5.5. The DTPAM will:

- 4.5.5.1. Maintain the integrity of the collection process, uphold respect for the privacy and dignity of the donor, ensure the security of the specimen, and avoid conduct or statements that could be viewed as offensive or inappropriate. (**T-1**)
- 4.5.5.2. Check the donor's military identification card and verify the information required in **paragraph 4.5.4.3** of this DAFMAN. (**T-1**) Take the notification letter from the donor and document time arrived. Compare time notified with time arrived to verify donor reported to collection site within the 2-hour requirement.
- 4.5.5.3. Maintain possession of the donor's military identification card until the collection process is completed. (**T-1**)
- 4.5.5.4. Designate for the specimen donor an observer with the same gender marker in the Defense Enrollment Eligibility Reporting System (DEERS) database (see **paragraph 4.5.8** of this DAFMAN for additional guidance). (**T-1**) Observers must not have been chosen to provide a specimen during the same collection session. (**T-1**) Observers must be briefed on-site prior to the collection process about their duties and responsibilities, as described in **Chapter 3** of this DAFMAN. (**T-1**) This briefing remains current for the observer for a maximum of seven calendar days, after which the briefing must be re-accomplished. (**T-1**) 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 following established guidelines. (**T-1**) A sample observer briefing letter is available on the DDR Knowledge Exchange site.
- 4.5.5.5. Direct the donor to remove bulky outer garments. (**T-1**) Member has the ability to remove bulky outer garment in the restroom provided they are removed before the member is directed to wash his/her hands with water prior to providing the specimen. No hats, purses, bags, briefcases, or other baggage may be brought into the collection room. (**T-1**)
- 4.5.5.6. If the donor requests that the urine contents of the specimen bottle be not visible to others at the collection site when transporting the bottle from the collection room, the donor can request their urine contents be shielded when transporting the bottle from the collection room. The collector will provide measures to accommodate that request. (T-1) Such accommodations may include: providing a sleeve or wrap to obscure visibility of the bottle contents, and maintaining privacy shields at the collector's workstation to block line of sight by others in the facility. The measure used to shield contents will not impede observer's ability to maintain line of sight of the bottle. (T-0)

- 4.5.5.7. Uncap and visually inspect the specimen bottle (authorized by ODDR for urine collection) in the presence of the donor and the observer, ensuring the bottle is clean, free of debris, and not damaged. (T-1) Donor can request a wider mouth collection cup (authorized by ODDR for urine collection), which will be inspected in the same manner. (T-1) The donor should also 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-1)
- 4.5.5.8. Instruct the individual to carry the specimen bottle so that it is always held in view of the observer. (**T-1**) If the donor chooses to use the wide mouth collection cup, the donor must pour the collected urine into a designated specimen bottle and secure the cap tightly in view of the observer. (**T-1**) This must be performed immediately after the urine is collected and under observation and direction by the observer to prevent adulteration, contamination, or break in the chain of custody. (**T-1**)
- 4.5.5.9. Receive the urine specimen bottle from the donor, visually check for contamination and adulteration, and ensure the urine volume is a minimum of 30 milliliters. **(T-1)** 
  - 4.5.5.9.1. If contamination or adulteration is suspected, continue the collection process, and then maintain custody of the suspected specimen at the collection site. Contact the SJA and the donor's commander as soon as reasonably possible and direct the donor to remain in the area. The member's commander in consultation with SJA will determine if a subsequent specimen is to be collected and under which premise code. (T-1) If the donor's commander or the servicing SJA wish to have the specimen tested for contamination/adulteration, the SJA or his/her designee may coordinate this request with the Legal Advisor to the AFDTL.
  - 4.5.5.9.2. If there is inadequate volume, have the specimen donor, under direct observation, discard the specimen and return the empty bottle to the DTPAM/collector for disposal. (T-1) Collector may document information related to the voided collection using an MFR or some other log. Since the label has not been applied to the bottle, and no initials or signatures documented on the Testing Register, the original collection products can be retained and used once the donor has provided sufficient urine.
- 4.5.5.10. If there is adequate volume, in the presence of the donor, ensure the cap is tightly secured. (**T-0**) Then, along with the donor, verify the accuracy of the bottle label information by direct comparison to the donor's presented identification (e.g., Common Access Card) before applying the label to the bottle. (**T-0**) The donor will observe the label being applied to the dry specimen bottle containing his or her urine specimen. (**T-0**) All collection steps for each donor will be conducted under the direct observation of the designated observer. (**T-0**)
  - 4.5.5.10.1. Have a second individual (e.g., additional DTPAM/collector, assistant collector, observer, officer, noncommissioned officer, or designated civilian) conduct a secondary review of the capped and labeled specimen bottle to ensure compliance with this instruction. (T-0) The individual charged to execute this secondary review will verify that the cap is tightly secured on the bottle. (T-0) The conduct of this secondary review will be annotated on the appropriate DD Form 2624. (T-0)

- 4.5.5.10.2. After secondary review of the bottle is completed, apply the tamper evident tape, conforming to the shape of the bottle to minimize tearing. The tamper evident tape must be applied extending from approximately halfway down and over the 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**)
- 4.5.5.11. Have the donor confirm that the DoD Identification Number or SSN and other identifying information on the bottle label is correct, the donor witnessed the application of the tamper evident tape, and the specimen in the bottle was provided by the donor. (**T-1**) Then have the donor initial the bottle label. (**T-1**) Have the donor initial and sign by his or her printed name in the Testing Register after verifying the DoD Identification Number or SSN annotated on the bottle label matches the entries in the Testing Register. (**T-1**)
- 4.5.5.12. Have the observer initial the bottle label on the line marked "OI" to certify the integrity of the collection process and the urine is that of the donor. (T-1)
- 4.5.5.13. Have the observer print their name, sign their signature, and initial where designated on the Testing Register for the collected specimen. (**T-1**)
- 4.5.5.14. The DTPAM/collector will initial the bottle label on the line marked "CI". (**T-1**) Collector then prints their name, signs their signature, and annotates time on the Testing Register.
- 4.5.5.15. If any portion of the tape is broken during initial sealing in the presence of the donor, 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 must be slightly offset of the original taping, following the procedures in paragraph 4.5.5.10.2 of this DAFMAN. (T-1) When tamper-evident tape is reapplied, prepare an MFR describing the circumstance under which the tape was broken and by whom the tape was reapplied. A copy of the MFR will be kept with the DD Form 2624 at the collection site. (T-1) The original MFR will be sent to the laboratory with the specimen bottle. (T-2) Under no circumstances should a donor's name or signature be included with any accompanying MFR, or other document sent to the drug testing laboratory. (T-1)
- 4.5.5.16. If a second label needs to be placed over an existing label (e.g., label torn, writing smeared), prepare an MFR describing the circumstance under which the label needed to be replaced and by whom the label was reapplied. A copy of the MFR will be kept with the DD Form 2624 at the collection site. (T-1) The original MFR will be sent to the laboratory with the specimen bottle. (T-1) Do not place the label directly over the original label the reapplication must be slightly offset of the original label. (T-1) Apply the tamper evident tape to the second label, conforming to the shape of the bottle to minimize tearing. The tamper evident tape must be applied extending from approximately halfway down and over the second 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 second label. (T-1)
- 4.5.5.17. The use of signature stamps or signatures replacement (e.g., //SIGNED//) on memoranda for record is prohibited. (T-1) Memoranda for record must be wet or digitally (i.e., Common Access Card certificate) signed. (T-1)

- 4.5.5.18. Enclose each specimen bottle in an individual, leak-proof secondary container (e.g., a sealable plastic bag), along with enough absorbent material to absorb the entire contents of the specimen bottle should leakage occur. (**T-0**) Place the enclosed specimen bottle(s) in a specimen box for sealing and shipment to the drug testing lab. (**T-0**) GSUs will send specimens to the DDRPM/DTPAM if required by the host installation's DDRPM/DTPAM. (**T-3**)
- 4.5.5.19. The DTPAM or DDRPM will make appropriate contact with the SJA and law enforcement personnel if there is any unusual or suspicious activity observed during the collection process. (T-1) The observed unusual or suspicious activity will be documented in an MFR. (T-2)
- 4.5.5.20. If an error is made in the documentation associated with a urine specimen, see **paragraph 4.6.2** of this DAFMAN for guidance on making forensic corrections. Further guidance on forensic documentation and acceptable methods for correcting errors on forensic documentation is available on the DDR Knowledge Exchange site.

#### 4.5.6. The observer must:

- 4.5.6.1. Be available for urinalysis drug testing whenever designated or ordered to perform observer duties. (**T-1**)
- 4.5.6.2. Direct the donor to rinse his/her hands with water only and dry them prior to providing a specimen. (T-1)
- 4.5.6.3. Directly observe the urine leaving the donor's body and entering the specimen bottle. If a donor uses the wide-mouth specimen container cup, the observer must also directly observe the following: the specimen donor pouring the collected specimen into an approved specimen bottle, and tightly securing the cap on the bottle. (**T-1**)
- 4.5.6.4. Ensure that the specimen donor tightly secures the cap on the bottle and that it is not reopened by the donor or anyone else at the collection site. (**T-1**) Ensure that the donor wipes the bottle dry if necessary. (**T-0**) Always maintain the bottle in line of sight (**T-0**) Allow the donor to clean his or her hands after providing a specimen and tightly securing the cap on the bottle. (**T-1**)
- 4.5.6.5. A member can specifically request to conceal the urine contents of the specimen bottle following guidance in **paragraph 4.5.5.6** of this DAFMAN but instruct the member to carry the specimen bottle so that it is always in line of sight. **(T-1)**
- 4.5.6.6. Ensure the donor returns the specimen bottle 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-1) If less than the required 30 milliliters of urine is collected, the observer must escort the donor to the DTPAM who will verify the insufficient volume and the time. (T-1) The DTPAM, upon verification of insufficient volume, will direct the donor to return to the bathroom and to discard the specimen in the urinal/toilet in the presence of the observer. (T-1) The observer must witness the discarding of the specimen by the donor. (T-1) The bottle will be returned to the DTPAM who will dispose of the bottle following local guidelines. (T-1) The DTPAM will direct collection of a new specimen of sufficient volume when the donor is ready to provide not to exceed the allotted collection time.

- 4.5.6.7. Initial the bottle label. (**T-1**)
- 4.5.6.8. Sign, initial, and print his or her name in the register. (**T-1**) This certifies that the observer directly witnessed the donor urinating into the specimen bottle. If a wide-mouth cup is used, the observer is certifying that he/she directly witnessed the donor urinating into the wide-mouth cup and transferring the urine into the specimen bottle. If the observer suspects adulteration or substitution, he/she must notify the DTPAM immediately. (**T-1**)

#### 4.5.7. Public Health Measures.

- 4.5.7.1. DDRPMs/DTPAMs should consult with their installation Public Health offices to establish local procedures for allowing donors to clean their hands after providing a urine specimen.
- 4.5.7.2. Other measures of hand cleaning (e.g., skin-approved 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.
- 4.5.7.3. It is recommended that a common pen be used for annotating registers and bottle labels to ensure that its writing characteristics (e.g., color, resistant to smearing, etc.) are appropriate. If a common pen is used, it should be cleaned with a disinfecting wipe after each use.
- 4.5.7.4. DTPAMs must wear disposable gloves when handling specimen containers. (**T-1**)

#### 4.5.8. Special Considerations.

- 4.5.8.1. Generally, specimens are collected under the direct observation of a designated observer with the same gender marker in DEERS as the specimen donor. However, due to the nature of gender transition that may be non-concurrent to a gender marker change in DEERS, commanders or DDRPMs have discretion to take additional steps to promote privacy, dignity, and respect of all involved persons, provided those steps do not undermine the integrity of the DDRP. At a minimum, all collections must be directly observed. (T-0)
- 4.5.8.2. Specimens collected as a result of aircraft incidents/accidents must be collected by the military treatment facility laboratory and submitted to the AFMES. (**T-1**) See DAFMAN 91-223, *Aviation Safety Investigations and Reports*. DDRPMs and/or DTPAMs may assist with collection of these specimens upon request.
- 4.5.8.3. 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 will 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)

4.5.8.4. If a specimen is certified positive and the member has departed to a new assignment, the losing unit commander will notify the gaining unit commander by encrypted email of the positive result. (**T-1**)

# 4.6. Completion of the DD Form 2624.

- 4.6.1. An example form is available on the DDR Knowledge Exchange site. Complete Blocks 1-10 (front of form), A-D (front of form), and 11 (back of form) of the DD Form 2624 as follows:
  - 4.6.1.1. Fill out, sign, and date a DD Form 2624 for every shipping box or mailer sent to the AFDTL (or other drug testing laboratory specified by the DAF ODDR for a MAJCOM). The following information must be recorded on the DD Form 2624:
    - 4.6.1.1.1. Block 1 (Submitting Unit). Complete the mailing address. Army Post Office and Fleet Post Office units should identify the country. (**T-1**)
    - 4.6.1.1.2. Block 2 (Additional Service Information). Annotate the name, rank, and DSN number of the installation DDRPM/DTPAM. (**T-1**)
    - 4.6.1.1.3. Block 3 (Base and Unit Identification). Annotate the installation number (e.g., F123, R123, G123 provided by the AFDTL when established for specimen collection) that appears on the specimen bottle label. (T-1)
    - 4.6.1.1.4. Block 4 (Date Specimen Collected). Use a separate DD Form 2624 for each collection day when shipping specimens collected on different days. (**T-1**)
    - 4.6.1.1.5. Block 5 (Unit Document Number). Annotate the batch number (e.g., 0001, 0002, 0003) that appears on the specimen bottle label. Use a separate DD Form 2624 for different batch numbers. (**T-1**)
    - 4.6.1.1.6. Block 6 (Specimen Number/Service Member's ID Number (Common Access Card)). (**T-1**) The specimen number is found on the pre-printed barcode applied to the member's specimen bottle.
    - 4.6.1.1.7. Block 7 (Test 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); IU (unit sweep); and OO (other than "IR" selection). Consult the servicing SJA's office if there are any questions regarding test basis. (**T-1**)
    - 4.6.1.1.8. Block 8 (Test Information). Complete this block only if anything other than routine testing is to be performed. (**T-1**) Special testing codes: O, other drugs (specimen requires testing for the presence of a particular drug); S, steroid.
    - 4.6.1.1.9. Block 9 (Accession Number). Leave blank. Do not annotate this block.
    - 4.6.1.1.10. Block 10 (Disc Code). Leave blank. Do not annotate this block.
    - 4.6.1.1.11. Block A (Laboratory Conducting Drug Testing). Indicate the mailing address of the laboratory performing the drug testing. (**T-1**)
    - 4.6.1.1.12. Blocks B (Damage to Shipping Container/Discrepancy Codes), C (Lab Batch Number), and D (Disc Code). Leave blank. Do not annotate these blocks.

- 4.6.1.1.13. Block 11 (Chain of Custody Tracking). Complete Base and Unit Identification, and Unit Document Number. (**T-1**) Complete blocks 11a, 11b, 11c, and 11d.
- 4.6.1.1.14. Account for specimen transfer and storage within the unit and record shipment to the drug testing laboratory following guidance in **paragraph 4.6.1** of this DAFMAN. **(T-1)** 
  - 4.6.1.1.14.1. Shipping date and releaser's signature must be originals and not photocopies. (**T-1**) The use of signature stamps on the DD Form 2624 is prohibited.
  - 4.6.1.1.14.2. The use of blue or black ink for signatures is strongly recommended.
- 4.6.1.2. Use the DoD approved computer program to generate the DD Form 2624 and barcoded specimen identification. (**T-1**) Computer-generated DD Forms 2624 must be a single-paged, double-sided document. (**T-1**) To ensure forensic integrity and chain of custody accountability, double-paged, single-side reproductions of the DD Form 2624 will not be used. (**T-1**) If the information on the DD Form 2624 cannot be pre-populated by the computer program, complete the DD Form 2624 using blank products within the DoD approved computer program. These blank products are fillable PDF documents and should be completed with all known information before printing to reduce illegibility issues. If handwritten, entries must be legible, and the use of blue or black ink is strongly recommended. (**T-1**)
  - 4.6.1.2.1. Maintain the completed DD Form 2624 for retention in drug testing files. Do not send DD Form 2624's to the laboratory. (**T-1**)
  - 4.6.1.2.2. Package and ship specimens to the drug testing laboratory within two duty days of the collection date. (**T-1**) Specimens not mailed within two duty days will require an MFR explaining the reason for the delay (do not send the MFR to the AFDTL). (**T-1**) The MFR must be forwarded to the servicing SJA, and a copy of the MFR should be retained on file. (**T-1**) Secured specimens not mailed on the same day as collection must be placed in a secured storage area with access limited to the drug testing program personnel (i.e., the DTPAM and the DDRPM). (**T-1**) The chain of custody must clearly reflect any changes in custody of the specimens. (**T-1**)
- 4.6.2. When making forensic corrections to collection documents, do not write over information. (T-1) Do not use correction fluid or typewriter correction ribbon. (T-1) Further guidance for acceptable methods of documenting and correcting errors is available on the DDR Knowledge Exchange site. Where a specimen on a pre-printed DD Form 2624 is not sent to the laboratory or where a specimen is not collected, the entire row pertaining to that member should be lined through. The word "void" should be annotated on the row, and the date in the YYYYMMDD format along with the initials of the person making the correction should be annotated in Block 6.

### 4.7. Instructions for Packaging of Urine Specimens for Shipping.

- 4.7.1. To further assist, a sample checklist, and a step-by-step pictorial guide on the packaging of specimens is available on the DDR Knowledge Exchange site.
- 4.7.2. Use appropriate personal protective equipment and comply with Occupational Safety and Health Administration regulations. (**T-1**)

- 4.7.3. Enclose each specimen bottle in an individual, leak-proof secondary container (e.g., a sealable plastic bag), along with enough absorbent material to absorb the entire contents of the specimen bottle should leakage occur. (**T-0**)
- 4.7.4. Place the specimen bottles (maximum of 12) into the specimen box ensuring that the tamper-evident tape is intact on each bottle. (**T-1**) Only boxes approved by ODDR may be used, and they may not be reused. (**T-1**) Single test kits authorized by DoD are the only alternative for packaging specimens. (**T-1**) Do not place empty bottles into the specimen box. Blank paper or unused paper towels can be used to fill empty spaces in the box. Confetti, popcorn shipping fillers, or shredded paper are not authorized. When using the single test kits: Open the single test kit sealed box in the presence of the member. (**T-1**) Annotate the member's DoD Identification Number and collection date on a blank bottle label provided and affix the label to the empty specimen bottle provided with the single test kit. (**T-1**) See paragraphs 4.8 through 4.10 of this DAFMAN for single test kit completion, packaging, and shipping.
- 4.7.5. Date and sign block 11 after ensuring that the specimens listed on the DD Form 2624 match the bottles contained in the box (11.a, 11.b, 11.c and 11.d). (**T-1**)
- 4.7.6. Place any original MFRs in a sealed leak proof plastic bag to prevent loss or damage of the documents, and then place the sealed documents inside the specimen shipping box before sealing the box for shipping. (T-1) If these documents are sent separate from the urine specimen(s) they pertain to, they will not be accepted. (T-1) Do not, under any circumstances, include any paperwork, such as the testing register or memoranda, identifying members tested by name when sending specimens to the drug testing laboratory. (T-1) The use of signature stamps or signature replacements (e.g., //SIGNED//) on memoranda for record is prohibited. (T-1) Memoranda for record must be wet or digitally (i.e., Common Access Card certificate) signed. (T-1)
- 4.7.7. Do not use confetti-type shipping fillers. (**T-1**) Individual specimen bottles are not to be placed inside plastic or white shipping bags. (**T-1**)
- 4.7.8. Seal all openings and edges of the specimen box with adhesive tape (e.g., masking tape, nylon strapping tape, or package sealing tape). (T-1) One continuous 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-1) Additionally, tape must encircle each end of the box that has an opening so that the edges are completely covered and sealed. (T-1)
- 4.7.9. The packager (DDRPM or DTPAM) must sign his or her signature across the tape once on the top and bottom of the box. (T-1) The signature must cross from the tape to the box in at least one location on the top and bottom. (T-1) 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-1)
- 4.7.10. If mailing specimens, place the sealed box in a leak preventive mailing pouch approved by ODDR or equivalent to absorb leakage and prevent damage to other packages during shipment. (**T-1**)

- 4.7.11. If an individual box of twelve specimens (sealed in a leak-preventive mailing pouch) is to be shipped, mark the outside of the mailing package to alert the drug testing laboratory that specimens are in the package. (T-1) The DTPAM should consult the guidelines of the shipper prior to shipping urine specimens. 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) should be placed in a second container. The larger secondary outer shipping box must be securely sealed and have the "TO" and "FROM" addresses. (T-1) Affix an "Exempt Human Specimen" sticker (or hand write on the outer shipping box). (T-1)
- 4.7.12. Address the package to: AFDTL (AFMRA/SG3L), 2480 Ladd Street, Bldg. 3750, JBSA-Lackland, TX 78236-5310. Specimens can be shipped to an alternate DoD drug testing lab if approved in writing by the DAF Drug Testing Program Manager. **Note:** Pacific Air Forces units typically use the Army Drug Lab at Tripler Army Medical Center, and they send the specimens to: Tripler Army Medical Center, Forensic Toxicology Drug Testing Laboratory, ATTN: MCHK-FT, 1 Jarrett White Road, Bldg. 40, Honolulu, HI 96859-5000.
- 4.7.13. Specimens should be shipped the same day as collected. If it is not possible to ship the specimens the same day as collected, the specimen box (unsealed or sealed) should be placed in secured storage under chain of custody. (T-1) The chain of custody must be annotated and documented until the specimen box is sealed. (T-1) A log should be kept locally that clearly tracks when specimen packages are placed in the control of the shipping agency or company. Specimens not mailed within two business days will require an MFR explaining the reason for the delay (do not send the MFR to the AFDTL). (T-1) The MFR must be forwarded to the servicing SJA, and a copy of the MFR should be retained on file for three years. (T-1) All Air Education and Training Command bases that conduct testing after breaks or after completion of training, and units performing large sweeps, are authorized to extend their shipping day requirement from two to five duty days as necessary.

# 4.8. Collection of Urine Specimens Using Single Test Kits at Geographically Separated Units (GSUs).

- 4.8.1. 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-1) DDRPMs/DTPAMs have discretion to work out the most practical method to accomplish specimen collection. GSU commanders will ensure drug testing procedures are followed in this DAFMAN and GSU DTPAMs must work with the host installation DDRP staff to ensure proper collection and shipment of specimens are accomplished. (T-1) Commanders or their GSU DTPAM will be responsible for member notification and specimen collection and shipment. (T-1)
- 4.8.2. Commanders must select GSU DTPAMS possessing unquestionable integrity and trustworthiness following guidance in **Chapter 3** of this DAFMAN to administer the notification, observation, collection, packaging, and shipment processes. **(T-1)**
- 4.8.3. The GSU DTPAM must: (**T-1**)
  - 4.8.3.1. Be appointed in writing by the GSU commander.

- 4.8.3.2. Receive and open the drug testing package from the host installation. The drug testing package contains the list of personnel selected for drug testing.
- 4.8.3.3. Notify the member as soon as reasonably possible. Notification must be the same as those procedures previously outlined, (i.e., signed commander's letter, dated, and endorsed by the member upon receipt). A sample commander's notification letter is available on the DDR Knowledge Exchange site.
- 4.8.3.4. Ensure that all members who are selected for testing report to the collection site with a valid military identification card.
- 4.8.3.5. Maintain a drug urinalysis testing log and all pertinent documentation associated with the drug testing program.
- 4.8.4. Once the member reports to the testing site, the GSU DTPAM will: (T-1)
  - 4.8.4.1. Check the member's military identification card.
  - 4.8.4.2. Annotate the date and time the member reported for testing on the notification letter.
  - 4.8.4.3. Document the Drug Testing Program Testing Register with the member's name, rank, military identification number, unit, date, and time of collection, along with the specimen accession number (Installation Identification Number).
  - 4.8.4.4. Use either single test kits or larger boxes approved by ODDR.
  - 4.8.4.5. Ask the member to verify identifying data by initialing and signing the Drug Testing Program Testing Register.
  - 4.8.4.6. Ensure that the specimen is collected following the guidelines established in this DAFMAN.

# 4.9. Completion of the DD Form 2624 for Urine Specimens Collected Using Single Test Kits.

- 4.9.1. A separate DD Form 2624 must be used for each single test kit. (T-1)
- 4.9.2. The DD Form 2624 must be completed with the following information:
  - 4.9.2.1. Blocks A, 1, 2, 3, 5, and 7 must be completed by the host installation. (T-1)
  - 4.9.2.2. Blocks 4, 6, and 11 must be completed by the trusted agent or GSU DTPAM. **(T-1)**
  - 4.9.2.3. The last person to handle the specimen will complete blocks 11.a., 11.b., and 11.c. **(T-1)**
  - 4.9.2.4. The means of shipment must be entered in block 11.d. (T-1)
  - 4.9.2.5. A copy of the completed DD Form 2624 must be faxed or sent to the host installation DDRPM/DTPAM. (**T-1**) The GSU will maintain for their records a copy of the completed DD Form 2624 and must be disposed following guidance in Air Force Record Disposition Schedule located in the Air Force Records Information Management Systems at: <a href="https://afrims.cce.af.mil/afrims/rims.cfm">https://afrims.cce.af.mil/afrims/rims.cfm</a>. (**T-1**)

- 4.9.2.6. The original completed DD Form 2624 and all memoranda for record will be maintained at the GSU under their file plan. (**T-1**) Copies of memoranda for record pertaining to the bottle will be maintained at the GSU, the original will be placed in a sealed leak-proof plastic bag inside the box containing the specimen. (**T-1**) If these documents are sent separately, they will not be accepted. (**T-1**)
- 4.9.2.7. See paragraph 4.6.2 for guidance on making forensic corrections to collection documents if necessary.

## 4.10. Packaging and Shipping Urine Specimens Collected Using Single Test Kits.

- 4.10.1. A step-by-step pictorial guide on the packaging of specimens is available on the DDR Knowledge Exchange site. The pictures are illustrative only; refer to the text in the paragraphs below for packaging requirements. The DTPAM/GSU DTPAM must: (**T-1**)
  - 4.10.1.1. Place the specimen bottle and absorbent pad in the specimen bag provided in the single test kit and place the specimen in the single test kit box. Include any MFRs associated with the bottle in the single test kit box with the specimen. Only the box provided with the single test kit (Item # CUC-1, UI Case) may be used. Boxes may not be re-used.
  - 4.10.1.2. Seal the mailer box by applying adhesive tape one time completely around the sides of the box so the tape overlaps.
  - 4.10.1.3. Sign, using a wet signature, and date the kit box seal provided with the test kit prior to applying it to the mailer box.
  - 4.10.1.4. 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. If the kit box seal does not adhere, use any effective glue to attach the kit box seal.
- 4.10.2. The single test kit or shipping box containing several single test kits should be mailed or shipped immediately after it is prepared for shipment. If this is not possible, the sealed single test kit or shipping box should be placed in secured storage under chain of custody. The chain of custody must be maintained and documented until the sealed single test kit or shipping box is mailed. (T-1) If shipping multiple single test kit boxes in a larger box, the secondary box must contain all appropriate mailing requirements for human specimens. (T-1)

### 4.10.3. For GSU testing:

- 4.10.3.1. 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 specimens to the servicing installation DDR office for quality control review of specimens. (T-1) Pacific Air Forces units mail urine specimens to the drug laboratory at Tripler Army Medical Center. (T-1)
  - 4.10.3.1.1. In cases of quality control checks performed by the servicing DDRP office, the chain of custody must remain intact and documented. (**T-1**) 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 laboratory. (**T-1**) The specimen should not be shipped in the same box it was received in and may be shipped in a new container or with the installation's shipment of specimens.

- 4.10.3.1.2. A specimen that has discrepancies will be reviewed by the local SJA and SJA will decide action to include possible re-collection of the untestable specimen. (T-1) The DDRPM/DTPAM will ensure the GSU DTPAM understands the discrepancy to preclude recurrence. (T-1)
- 4.10.3.2. In all cases, the GSU DTPAM ensures that the specimens are mailed within two duty days of collection using one of the transportation modes outlined in **paragraph 4.11** of this DAFMAN. (**T-1**)
  - 4.10.3.2.1. Specimens not mailed within two duty days will require an MFR explaining the reason for the delay (do not send the MFR to the AFDTL). (**T-1**)
  - 4.10.3.2.2. The MFR must be forwarded to the servicing SJA, and a copy kept on file for three years. (**T-1**)
  - 4.10.3.2.3. If quality review is performed by the servicing DDRP office, the DDRPM/DTPAM ensures that the specimens are mailed within two duty days of receipt of specimens for quality control review using one of the transportation modes outlined in paragraph 4.11 of this DAFMAN. (T-1)

# 4.11. Acceptable Modes of Transportation.

- 4.11.1. The Wing DDRPM or DTPAM will ensure that specimens are shipped using one of the following transportation modes. (**T-1**)
  - 4.11.1.1. United States Postal Service first class, certified, registered mail, signature confirmation, or use of a commercial service having the capability to track shipments.
  - 4.11.1.2. Hand delivery under chain of custody.
  - 4.11.1.3. U.S. flag commercial air freight, air express, or air freight forwarder. Use of a commercial service having the capability to track shipments is highly recommended.
  - 4.11.1.4. Defense Transportation System.
  - 4.11.1.5. Foreign flag air carrier when none of the above can satisfy the movement requirement.
- 4.11.2. Whatever carrier is selected for shipping, the DDRPM/DTPAM must ensure that the shipping requirements and regulations of that carrier are met. (**T-1**)

# STAFF JUDGE ADVOCATE (SJA) COLLECTION SITE INSPECTION PROCEDURES

# **5.1.** Periodic Inspections of Collection Sites.

- 5.1.1. Periodic inspections of all phases of installation level drug testing programs (i.e., member selection, notification, specimen collection, storage, packaging, and shipping) are performed by the servicing SJA to ensure that programs are forensically defensible. (T-1) If the SJA delegates this duty, it is recommended that an assistant staff judge advocate perform the inspection. The servicing legal office will use the inspection checklist provided by the Legal Advisor to the AFDTL. (T-1)
- 5.1.2. Periodic inspections of collection sites will be conducted as follows:
  - 5.1.2.1. DAF only: Inspections of the local collection facility will be conducted quarterly. (T-1) Quarterly inspections will occur within 15 duty days after the close of the FY quarter. (T-1) For example, the first quarter inspection must occur within the first 15 duty days of the month of January and will cover the period of 1 October through 31 December. (T-1) In the event of a public health emergency as declared by the installation commander, other emergency situation (e.g., a major medical event), or catastrophic event (to include, but not limited to, a natural disaster), the installation commander has the authority to temporarily suspend the quarterly inspection. This authority may not be further delegated. Direct any questions regarding the applicable waiver authority to AFMRA/SG3L. If the installation commander has not suspended the quarterly inspection requirement during a declared public health emergency, other emergency situation, or catastrophic event as described above, the installation SJA may authorize alternate means of communication (such as video teleconference) to complete the inspection.
  - 5.1.2.2. AFR and ANG only: Inspections of the local collection facility will be conducted no less than annually. (T-1) In the event of a public health emergency as declared by the installation commander, other emergency situation (e.g., a major medical event) or catastrophic event (to include, but not limited to, a natural disaster), the AFRC/CC (delegable not lower than the appropriate AFRC director) and NGB/CF (delegable not lower than the ANG/CC or appropriate NGB Director) respectively, have the authority to temporarily suspend the annual inspection. Direct any questions regarding the applicable waiver authority to AFMRA/SG3L. If the AFRC/CC or NGB/CC has not suspended the annual inspection requirement during a declared public health emergency, other emergency situation, or catastrophic event as described above, the servicing SJA may authorize alternate means of communication (such as video teleconference) to complete the inspection.
  - 5.1.2.3. For GSUs, inspections will be conducted by the servicing SJA no less than annually. (**T-1**) These inspections should be conducted at the local collection facility. If the SJA determines mission requirements preclude an in-person inspection, alternate means of communication (e.g., video teleconference or telephonic) should be used to complete the inspection. For example, when the mission allows a GSU located within 100 miles from the servicing SJA's location should be inspected in person. By contrast, a GSU that is in another country from the servicing SJA's location may be a candidate for inspection by

alternate means of communication if the SJA is unable to allocate the resources or time necessary for an in-person inspection. In the event of a public health emergency as declared by the installation commander, other emergency situation (e.g., a major medical event), or catastrophic event (to include, but not limited to, a natural disaster), the wing commander of the servicing legal office of the GSU has the authority to temporarily suspend the quarterly inspection. This authority may not be further delegated. Direct any questions regarding the applicable waiver authority to AFMRA/SG3L. If the wing commander of the servicing legal office has not suspended the quarterly inspection requirement during a declared public health emergency, other emergency situation, or catastrophic event as described above, the servicing SJA may authorize alternate means of communication (such as video teleconference) to complete the inspection.

5.1.2.4. In addition to evaluating the forensic defensibility of local drug testing programs, the periodic SJA inspections must evaluate local compliance with requirements listed in **paragraph 4.1** of this DAFMAN, to include progress toward meeting the DoD requirement of testing every DAF member, at a minimum, once annually. (**T-1**) Inspections must also review documented reasons for members not being available to test when selected for testing to ensure that information provided by trusted agents and supervisors is accurate, and to ensure that local OI guidance for testing these members at a later date is properly carried out. (**T-1**)

## 5.2. Collection Site Inspection Report.

- 5.2.1. The servicing SJA will prepare an inspection report consisting of a legal review addressing all relevant findings. (T-1) The completed inspection checklist will be an attachment to the inspection report. (T-1)
- 5.2.2. The inspection report will be discussed at the required periodic meeting with installation leadership. **(T-1)**
- 5.2.3. Copies of the completed inspection report will be emailed to the Legal Advisor to the AFDTL within five duty days of completion of the documentation. (**T-1**) Email address can be located on the DDR Knowledge Exchange site.
- 5.2.4. Recommendations for corrective actions to findings that negatively impact the integrity of the program will be provided to the DDRPM/DTPAM, and the servicing SJA will assess implementation of corrective actions during the next quarterly inspection. (T-1)
- 5.2.5. All observations that negatively impact the integrity of the program will be communicated through appropriate channels to MAJCOM DDRPM, the MAJCOM JA representative and to the Legal Advisor to the AFDTL. (T-1)\

# DEPARTMENT OF DEFENSE (DOD) DRUG TESTING LABORATORY PROCEDURES

# 6.1. Department of Defense (DoD) Technical Compliance for Testing and Laboratory Operating Instructions.

- 6.1.1. The certified drug testing laboratory will, at a minimum, comply with the administrative and technical requirements of DoDI 1010.16, and additional requirements established by ODDR. (**T-0**)
- 6.1.2. The certified drug testing laboratory will maintain OIs for administrative and drug testing procedures that address the following:
  - 6.1.2.1. Facility security requirements and laboratory personnel security measures. (**T-0**)
  - 6.1.2.2. Data security and laboratory information management security measures. (T-0)
  - 6.1.2.3. Chain of custody procedures documenting processing and testing of specimens and specimen aliquots from the time of receipt to destruction of the specimen. (**T-0**)
  - 6.1.2.4. Forensic procedures for specimen accessioning, processing, testing, results certification, and results reporting. (T-0)
  - 6.1.2.5. Internal quality control and quality assurance programs. (T-0)
  - 6.1.2.6. Participation in AFMES external quality control and quality assurance programs. **(T-0)**
  - 6.1.2.7. Documentation of laboratory personnel qualifications and training. (T-0)
  - 6.1.2.8. Documentation of maintenance and repair for all testing instruments. (T-0)
  - 6.1.2.9. Validation of analytical methods used for each drugs tested. (T-0)
  - 6.1.2.10. Procedures to ensure timely responses to discovery requests and other inquiries from authorities. (**T-0**)

### 6.2. Storage and Destruction of Positive Specimens.

6.2.1. The drug testing laboratory will maintain specimens that are confirmed positive, or suspected of adulteration, in frozen storage in a secure area using proper chain of custody documentation for a minimum of one calendar year. (T-0) De-identified specimens designated for destruction can be used for method development or research purposes (e.g., for surveillance of emergent drug threats, or to complete method validation requirements) following guidance in DoDI 1010.16..

- 6.2.2. At the end of one calendar year, the specimen may be destroyed, unless the submitting unit or an appropriate legal representative has previously requested that it be retained for a longer period. Destruction means that a specimen can no longer be used for the purpose of testing to produce reportable results. Specimens designated for destruction can be used for method development or research purposes (e.g., for surveillance of emergent drug threats, or to complete method validation requirements). In this event, after annotation of specimen destruction on the chain of custody document, identifying information will be removed, and no further chain of custody documentation is required. (T-0)
- 6.2.3. If there is an approved request for extended retention of a frozen specimen, the laboratory will maintain the specimen for the additional requested period. (T-1) The originating agency must specify a defined period (e.g., six months). (T-1) A request for "indefinite retention" will not be honored by the laboratory. (T-1) If there is an approved request for extended retention of a frozen specimen, the laboratory will maintain the specimen for the additional 6-month time period. (T-1) The originating agency must specify a defined period of time (e.g., six months) extending no more than one year beyond the specimen's assigned destruction date. (T-1) At the end of this additional retention period, the laboratory will destroy the specimen following guidance in paragraph 6.2.2 of this DAFMAN, unless the originating agency requests further retention. (T-1) When this occurs, the requesting agency must advise the laboratory every 60 calendar days of the need for further retention. (T-1) The SJA from the originating agency will notify the Legal Advisor to the AFDTL (in writing) if further retention becomes unnecessary. (T-1)

# MEDICAL REVIEW OFFICER (MRO) REVIEW AND REPORTING OF POSITIVE DRUG TEST RESULTS

- **7.1. Overview.** Some positive drug test results do not require MRO review because they are caused by drugs that have few legitimate medical uses. Other positive drug test results can be caused by use of drugs for legitimate medical reasons. Consequently, some positive results require evaluation by an MRO qualified to review medical and dental records, including relevant available medical electronic records to determine if there is a medical explanation for the results. *MROs will only make determinations based on valid medical and dental information regarding medications.* (**T-1**) *MROs will not make determinations based on proposed drug ingestion for other than medical reasons* (e.g., the member claims to have eaten a poppy seed bagel; the member claims to have mistakenly taken the member's spouse's medical prescription; the member claims that someone has put the drug in the member's drink). (**T-1**) Also, MROs will not make determinations on chain of custody or specimen adulteration to avoid detection issues (i.e., specimen authenticity and integrity). (**T-1**)
- **7.2. Drug Results That Do Not Require MRO Review.** Positive results received for the following drugs will not be subjected to MRO review, and will be reported as positive:
  - 7.2.1. 6-monoacetylmorphine heroin metabolite. (**T-1**)
  - 7.2.2. Benzoylecgonine cocaine metabolite. (**T-1**)
  - 7.2.3. Methylenedioxymethamphetamine and methylenedioxyamphetamine. (T-1)
  - 7.2.4. Delta-9-Tetrahydrocannabinol. (**T-1**) (An MRO review may be requested if there is reason to believe that the positive result may have been caused by a prescription drug.)
  - 7.2.5. Delta-8-Tetrahydrocanabinol. (T-1)
  - 7.2.6. Synthetic Cannabinoids. (T-1)
  - 7.2.7. Lysergic acid diethylamide (LSD). (T-1)
- **7.3. Drug Results That Require MRO Review.** Positive results for the following drugs do require review by an MRO prior to notification of unit commanders:
  - 7.3.1. Amphetamines (d-methamphetamine and d-amphetamine). (**T-1**)
  - 7.3.2. Opiates (codeine and morphine). (**T-1**)
  - 7.3.3. Steroids (analyzed through a DoD-designated outside laboratory). (T-1)
  - 7.3.4. Synthetic opioids (oxycodone, oxymorphone, hydrocodone, and hydromorphone). **(T-1)**
  - 7.3.5. Benzodiazepines (nordiazepam, oxazepam, temazepam, lorazepam, and  $\alpha$ -OH-alprazolam). (**T-1**)
  - 7.3.6. Any positive result reported for Schedule II to V prescription drugs not listed in the drug program testing panel. (**T-1**)
  - 7.3.7. Fentanyl and Norfentanyl (**T-1**)

- **7.4.** Positive Result Notification for Drugs that Do Not Require MRO Review. When a positive result is for one of the substances listed in paragraph 7.2, the DDRPM/DTPAM will prepare a positive result notification package that will include at a minimum, an MFR identifying the service member by DoD Identification Number, a copy of the electronic iFTDTL results report, and a copy of the testing register corresponding to the tested specimen. (**T-1**) A notification package template is available on the DDR Knowledge Exchange website. All positive result notification packages must undergo at least two layers of review performed by different DDRPMs/DTPAMs before being forwarded for action. (**T-1**) The reviewers are responsible for reviewing all documents and specimen identification information for accuracy and completeness to ensure that the positive result(s) is attributed to the appropriate service member. (**T-1**) Each reviewer will document completion of their review by signature on the aforementioned MFR constituting the first page of the package. (**T-1**) The DDRPM/DTPAM will forward the completed package to the member's commander, OSI and/or SFS, and SJA. (**T-1**) ANG will also notify the wing commander. (**T-1**)
- **7.5.** Positive Result Notification for Drugs that Require MRO Review. When a positive result is for one of the substances listed in paragraph **7.3**, the MRO will be asked by the DDRPM/DTPAM to provide a review prior to notification of the commander. (**T-1**)
  - 7.5.1. The MRO will receive a positive drug report from the DDRPM/DTPAM and will provide a review to the DDRPM/DTPAM within two duty days. (**T-1**)
  - 7.5.2. The MRO will review all current medical and dental records, including relevant available medical electronic records. (**T-1**)
  - 7.5.3. If the MRO determines that the positive drug result is due to "medically justified" drug use, the MRO will provide a report to the DDRPM/DTPAM that includes the name of the drug used, the amount prescribed/used, frequency of usage, and the date of prescription/use. (T-1) The result determination will then be entered by the DDRPM/DTPAM into the iFTDTL Portal database. (T-1)
  - 7.5.4. If the MRO finds no medical documentation to substantiate the positive result as medically justified, the MRO will provide a formal MFR to the DDRPM/DTPAM declaring the positive result as "unjustified." (T-1)
  - 7.5.5. The DDRPM/DTPAM will update the iFTDTL Portal to indicate that the positive result is "unjustified." (**T-1**)
  - 7.5.6. The DDRPM/DTPAM will prepare a positive result notification package that will include at a minimum, a copy of the MFR provided by the MRO, an MFR identifying the service member by DoD Identification Number, a copy of the electronic iFTDTL results report, and a copy of the testing register corresponding to the tested specimen. (T-1) A notification package template is available on the DDR Knowledge Exchange website. All positive result notification packages must undergo at least two layers of review performed by different DDRPMs/DTPAMs before being forwarded for action. (T-1) The reviewers are responsible

- for reviewing all documents and specimen identification information for accuracy and completeness to ensure that the positive result(s) is attributed to the appropriate service member. (T-1) Each reviewer will document completion of their review by signature on the aforementioned MFR constituting the first page of the package. (T-1) The DDRPM/DTPAM will forward the completed package to the member's commander, OSI and/or SFS, and SJA. (T-1)
- 7.5.7. The DDRPM/DTPAM will provide notification of the positive result to the Air Force Indexing Cell via document (not verbal) at the current website identified on the DDR Knowledge Exchange site. (**T-1**)
- **7.6. Positive Result Notification for ANG and AFR only:** When a positive result is for any substance listed in **paragraph 7.3** or for a Schedule II to V prescription drug, the MRO will review all current medical and dental records, including relevant available medical electronic records. **(T-1)** 
  - 7.6.1. If the MRO finds that the positive test identified from the iFTDTL Portal laboratory report is medically justified, a formal MFR is completed indicating the drug use was medically justified with the name of the doctor used, the amount prescribed/used, frequency of usage, and the date of prescription/use. (**T-1**) The MRO will forward this MFR to the DDRPM. The DDRPM will update the iFTDTL Portal as "medically justified," and forward the MFR to the unit commander and the SJA. The unit commander will provide the MFR to the member.
  - 7.6.2. ANG: If the MRO finds there is no medical documentation to substantiate the positive test identified from the iFTDTL Portal laboratory report, MRO will complete an initial review MFR stating the positive is not supported by documentation in the member's medical record to medically justify the positive. The MRO will send this MFR to the DDRPM. The DDRPM will send the MFR to the unit commander. The unit commander will meet with the member and provide notice (written) of the positive result. (T-1) The member will then be given 30 calendar days to provide any medical records or other documentation which may justify the positive result. (T-1) It is the responsibility of the member to forward all relevant medical documentation to the Guard medical unit for MRO review within the allotted timeframe. (T-1) If medical documentation is not received within the allotted timeframe, a formal MFR will be completed identifying the positive test as "medically unjustified." (T-1) The DDRPM will update the iFTDTL Portal as "medically unjustified," and will follow the notification and processing procedures outlined in paragraph 2.15.11.2. The unit commander will provide the MFR to the member and the unit commander will schedule an interview with the OSI and/or SFS and consult with the SJA on waiver or separation procedures. (T-1) If medical documentation is received within the allotted timeframe, then refer to paragraph 7.6.1.
  - 7.6.3. AFR: If there is no medical documentation to substantiate the positive test identified from the iFTDTL Portal laboratory report, after consulting with JA, the unit commander will meet with the member during the next in-status period to provide notice (written) of the positive result. (T-1) The member will then be given 30 calendar days, or as soon as practical, whichever is shorter, to provide any medical records, or other documentation which may justify the positive result. (T-1) It is the responsibility of the member to forward all relevant medical documentation to the Reserve/Guard medical unit (for MRO review) and unit commander within the allotted timeframe. (T-1) If medical documentation is not received within the allotted timeframe, then a formal MFR will be completed identifying the positive test as

- "unjustified." (**T-1**) The memorandum will be forwarded to the wing DDRPM, unit commander, SJA, and the member. (**T-1**) The iFTDTL Portal will be updated by the DDRPM/DTPAM with the MFR information as "unjustified," and the unit commander will schedule an interview with the OSI and/or SFS and consult with the SJA on waiver or separation procedures. (**T-1**)
- 7.6.4. For AFR IMAs: If there is no medical documentation to substantiate the positive test identified from the iFTDTL Portal laboratory report, the unit commander will meet with the IMA in person, if the member is available, and provide the member written notice of the positive result. (T-1) If the member is not on orders or otherwise available, the commander may alternatively contact the member and provide written noticed of the positive result via certified mail, or via electronic means with delivery confirmation. The member will then be given 30 calendar days, or as soon as practical, whichever is shorter, to provide any medical records or other documentation which may justify the positive result, for any substance listed in paragraph 7.4 or a Schedule II to V prescription drug. (T-1) It is the responsibility of the member to forward all relevant medical documentation to the active duty Military Treatment Facility (MTF) (for MRO review) and unit commander within the allotted timeframe. (T-1)
- **7.7. Reporting Results or Invalid Specimens** . When a specimen is reported with an "invalid" numbered discrepancy code, the DDRPM/DTPAM will make the appropriate notifications and report as invalid for (specific drug/metabolite). **(T-1)** Commanders will reach out to local legal office for any additional information/advice. **(T-1)** Local SJAs can reach out to the laboratory for guidance, if needed.
- **7.8.** Legal Requests for Urinalysis Testing Data . Legal requests for urinalysis testing data should be directed to the laboratory that conducted the analysis. Legal requests for information or data held by a local installation DDRP office should be directed to that office, through the installation's servicing Staff Judge Advocate. Any member requests for drug testing data should be submitted to the local legal office.

### REQUESTS FOR RETESTS, STEROID TESTING, AND SPECIAL TESTING

# 8.1. Requests for Retests of Specimens.

- 8.1.1. A request for a retest of a specimen may be made:
  - 8.1.1.1. On request of the submitting command.
  - 8.1.1.2. On request of an administrative board under regulations applicable to the board.
  - 8.1.1.3. On order of a military judge under the laws and regulations applicable to courts-martial.
  - 8.1.1.4. On request of the member identified by the specimen information, or defense counsel representing the member.
  - 8.1.1.5. On request by the commander of the DoD drug testing laboratory where the specimen was tested for the purpose of reporting results. The laboratory commander has the right to retest any specimen when in his or her opinion retesting enhances the forensic results or clarify unusual information. The reason for a retest must be documented by an MFR. (T-1)
- 8.1.2. All requests for retests of specimens must be made in writing or by electronic message to the laboratory where the original specimen is stored. **(T-1)** The following information is required:
  - 8.1.2.1. Purpose of the retest (e.g., in preparation for court-martial or pursuant to the service member's request). (**T-1**)
  - 8.1.2.2. The unique Base Identification Number for each specimen. (T-1)
  - 8.1.2.3. Laboratory accession number. (T-1)
  - 8.1.2.4. DoD Identification Number or SSN of the service member (whichever number was used for the original urinalysis test). (T-1)
  - 8.1.2.5. Name, telephone number, and email address of a point of contact at the requesting installation. (**T-1**)
- 8.1.3. A specimen may be retested at the drug testing laboratory that confirmed the reported result, or the specimen may be sent to another DoD-certified drug testing laboratory or AFMES for retesting.
  - 8.1.3.1. The laboratory performing the retest, except when the request is for a retest at a specific DoD drug testing laboratory or an independent laboratory, is at the discretion of the drug testing laboratory where the original specimen is stored.

- 8.1.3.2. A specimen can be sent to a commercial laboratory certified by the Department of Health and Humans Services if the requirements in **paragraph 8.1.2** of this DAFMAN are met. The request must also include the complete address of the laboratory where the specimen is to be sent along with a point of contact, documentation that arrangements have been made to pay for any tests, a statement relieving the DoD laboratory of any monetary charges associated with the testing, and the commercial courier account number to pay for shipping the aliquot to the designated laboratory. (**T-1**)
  - 8.1.3.2.1. If a retest at a commercial laboratory is requested, the originating laboratory will send a portion of the service member's specimen to the requested laboratory, provided there is enough specimen remaining. (T-1)
  - 8.1.3.2.2. The service member bears the expense of the retest, to include the cost of shipping, if an independent laboratory is selected to perform the retest. Proof of payment to the independent laboratory must be provided before the specimen will be released by the AFDTL for testing. **(T-1)**
- 8.1.4. Once the drug testing laboratory has received the request and written confirmation for a retest, a portion of the service member's specimen will be shipped under chain of custody via authorized overnight courier to the designated laboratory. (**T-1**) The original specimen bottle with remaining urine will be retained by the originating laboratory (**T-1**) The originating laboratory will provide a document to the receiving laboratory that explains the testing to be performed or a copy of the requestor's letter that contains this explanation. (**T-1**)
- 8.1.5. Prior to processing a specimen for a retest, authorization must be obtained from the DAF Drug Testing Program Manager, submitting unit commander, or military judge if processing a specimen for retest would result in less than 10 milliliters remaining for any additional retest purposes. (**T-1**)
- 8.1.6. Retests will be performed using the validated procedures of the designated drug testing laboratory. **(T-0)**
- 8.1.7. A specimen retest requires a chromatography-mass spectrometry procedure to confirm the presence of the reported drug or metabolite. For a retest, the drug or metabolite does not need to quantify above the DoD confirmation cutoff concentration. The retest only requires the drug or metabolite to quantify by chromatography-mass spectrometry at or above the laboratory's established limit of detection.

# 8.2. Requests for Steroid Testing.

- 8.2.1. Testing of service member specimens for steroids is accomplished at a laboratory contracted by the ODDR, and only limited testing capacity is provided to the individual services.
- 8.2.2. Steroid testing is provided only when substantial indications exist to suspect wrongful steroid use pursuant to a probable cause, commander directed or medical basis. (**T-0**) Random testing or unit sweeps for steroid misuse is not authorized. (**T-0**)
- 8.2.3. Prior to submitting (a) specimen(s) for steroid testing, a written, signed request must be submitted to the AFDTL Results Reporting Branch describing the number of specimens, the period during which the specimen is to be collected, and the gender marker of the member(s). (T-1) A sample format of the request letter is available on the DDR Knowledge Exchange site.

- 8.2.4. Specimens collected solely for steroid testing must contain at least 60 milliliters of urine. (T-1) Specimens collected solely for steroid testing must be collected, shipped, and processed separately and differently from those requiring routine testing. (T-1)
- 8.2.5. If routine drug testing is requested in addition to steroid testing, an additional 30 milliliter specimen must be collected in a separate bottle and processed for shipping as follows: **(T-1)** 
  - 8.2.5.1. The specimen intended for routine drug testing must be collected and shipped to the appropriate DoD drug testing laboratory as described in **Chapter 4** of this DAFMAN. **(T-1)**
  - 8.2.5.2. Document collection and processing of specimens for steroid testing separately from specimens intended for routine drug testing. (**T-1**) Do not list specimens requiring steroid testing on the same DD Form 2624 as those specimens requiring routine testing. (**T-1**)
  - 8.2.5.3. Specimens collected for steroid testing must be submitted in a shipping package that does not contain specimens submitted for routine drug testing. (**T-1**)
- 8.2.6. Upon receipt of letter approving the request for steroid testing, process and ship the specimen as outlined in the approval letter. (**T-1**) If the collection site fails to obtain an approval letter prior to shipping the specimen, the AFDTL may not process the specimen for steroid testing, and the specimen may be destroyed.

# 8.3. Requests for Special Testing.

- 8.3.1. Testing for the presence of drug or drug metabolites other than steroids or those routinely tested by the service drug testing laboratories may be requested with prior coordination with the servicing SJA, the AFDTL, and the AFMES (Division of Forensic Toxicology Post-Mortem and Human Performance Testing Laboratory).
  - 8.3.1.1. Approval by the AFMES laboratory must be obtained prior to submitting multiple specimens for special testing. (**T-1**) If approval from the AFMES laboratory is not obtained prior to shipping the specimens, the laboratory may not process the specimens for the requested testing, and the specimens may be destroyed.
  - 8.3.1.2. Specific guidance regarding approval and specimen collection requirements for special drug testing is provided at the AFMES Forensic Toxicology website.
  - 8.3.1.3. Specimens must be collected and submitted according to the AFMES guidelines and using the AFMES Forensic Toxicology Analysis Request (AFMES Form 18) form provided at the AFMES Forensic Toxicology website. (**T-1**)
  - 8.3.1.4. Submit a separate completed AFMES Form 18 for each specimen, clearly identify the requested testing, and provide details pertaining to the reason for the specimen submission. (**T-1**)
- 8.3.2. Specimens may be collected without prior approval from AFMES personnel (e.g., after duty hours or during weekends). Documentation of such collections should be made using the AFMES Form 18, and shipment of the specimen(s) should not occur until coordination is completed and approval is granted. The AFDTL should only receive specimens for the standard panel and/or steroids.

8.3.3. Two separate urine specimens should be collected and submitted when the request is for the standard panel at the AFDTL plus special testing at the AFMES laboratory. The urine specimen designated for standard testing at the AFDTL will be collected as discussed in **Chapter 4**. of this DAFMAN, and the specimen designated for special testing at AFMES will be collected and processed following guidance in **paragraph 8.3**. (**T-1**)

# COMMANDER'S GUIDELINES AND REGULATIONS, PERIODIC MEETINGS, DRUG TESTING METRICS, AND USE OF DRUG TESTING RESULTS

**9.1. Drug Testing Guidelines and Regulations.** Installation/Wing Commanders must implement guidelines and regulations for drug testing activities carried out at their installation/wing. (T-1) Commanders on G-series orders that have a large portion of their members assigned to GSUs will also implement drug testing guidelines and regulations. At a minimum, the guidelines and regulations will ensure the drug testing program is conducted in accordance with this DAFMAN and DoDI 1010.01, and DoDI 1010.16. (T-1) A template that commanders may modify as necessary is available on the DDR Knowledge Exchange site.

# 9.2. Commander's Periodic Meetings.

- 9.2.1. Commanders are required to conduct a mandatory meeting on a quarterly basis (or more often as required) to assess the status and effectiveness of drug testing program operations. At a minimum, the meeting will be attended by the installation commander or vice commander, SJA, and DDRPM or DTPAM. (T-1) Other members can attend as needed, such as personnel from the Office of Special Investigations (OSI) and/or Security Forces Squadron (SFS). Any other issues of concern may also be discussed at this meeting. The SJA will present the results of the last quarterly inspection. An MFR will be written by the DDRPM or DTPAM and signed by the installation commander or designee to document this meeting, and dispose the MFR in accordance with Air Force Record Disposition Schedule located in the Air Force Records Information Management Systems at: <a href="https://afrims.cce.af.mil/afrims/rims.cfm">https://afrims.cce.af.mil/afrims/rims.cfm</a>. The installation commander or vice commander will determine if any issues need to be presented to group/squadron leadership or other base agencies. A sample quarterly meeting MFR is available on the DDR Knowledge Exchange site.
- 9.2.2. AFR and ANG only: Wing commanders are required to conduct a mandatory Cross Functional Oversight Committee meeting to be held at least annually or more frequently if deemed appropriate. The Cross Functional Oversight Committee will be chaired by the wing commander or vice commander, and membership will include at a minimum, the SJA or designee, OSI and/or SFS, Reserve Medical Unit commander or Guard medical unit commander, Guard MRO, and the DDRPM or DTPAM. Group/Squadron commanders, directors, first sergeants, and additional attendees may be required by the wing commander. The SJA will present the last annual inspection results, and the DDRPM/DTPAM will also present quarterly/annual metrics. The DDRPM/DTPAM will write an MFR to document this meeting. The DDRPM/DTPAM will retain and dispose the MFR in accordance with Air Force Record Disposition Schedule located in the Air Force Records Information Management Systems at: https://afrims.cce.af.mil/afrims/rims.cfm.

### 9.3. Drug Testing Program Metrics.

- 9.3.1. DDRPMs/DTPAMs must use appropriate metrics to monitor performance of the military drug testing program and provide the metrics to the installation/wing commander on a quarterly basis. (**T-1**) Demographic data for metrics (obtained from the drug testing laboratory, Defense Manpower Data Center, or higher headquarters) may be made available upon request through the MAJCOM DDRPM to the DAF Drug Testing Collection Manager (AFMRA/SG3L).
- 9.3.2. Each installation/wing commander will instruct the DDRPM/DTPAM to provide, at a minimum, the following metrics quarterly:
  - 9.3.2.1. Number of collection days and "Check Random Testing Day button" pushes per each month during the quarter. (**T-1**)
  - 9.3.2.2. Number of members selected for testing for each month during the quarter. (T-1)
  - 9.3.2.3. Number of members selected that were collected and tested for each month during the quarter. **(T-1)**
  - 9.3.2.4. Number of members carried over or canceled, to include any specific members who have been repeatedly carried over or canceled, and the time elapsed from the first selection to the last. (**T-1**) This metric must also include the justification for carryover or cancelation in each of the member selections. (**T-1**)
  - 9.3.2.5. Number of delinquent MRO determinations. (T-1)
  - 9.3.2.6. Number of members selected and notified for testing but failed to show without justification (no-show). (**T-1**)
  - 9.3.2.7. Number of members identified as "No Contact" by the trusted agents. ("No Contact" means the trusted agent diligently attempted to contact the selected member, without success, and the member was not on leave, pass, TDY, quarters, flying status, crew-rest, missile duty, or non-duty status). (T-1)
  - 9.3.2.8. Number reporting to the testing facility outside the time frame designated in the notification memorandum (typically two hours). (**T-1**)
  - 9.3.2.9. Percentage of specimens deemed testable and untestable by the drug testing laboratory per each month during the quarter. **(T-1)**
  - 9.3.2.10. Number of members tested positive by drug category listed by DoD. If other services were collected via MOA/MOU or gate sweeps, these positives will be differentiated from DAF positives. (**T-1**)
  - 9.3.2.11. Any data describing special testing and/or steroid testing. (T-1)
  - 9.3.2.12. Progress toward meeting compliance goal of one testable result, per member, per FY. **(T-1)**
- 9.3.3. DDRPMs/DTPAMs will provide appropriate statistical data as requested by DAF agencies. (T-1)

# 9.4. Use and Disposition of Drug Testing Results.

- 9.4.1. Commander's options for authorized use and disposition of drug testing results are provided in **Table 9.1**.
- 9.4.2. Commanders must consult with the local SJA prior to initiating any disciplinary or adverse actions based on the results of drug testing. (**T-1**)

Table 9.1. Actions Authorized by Positive Drug Test Results.

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

### Notes:

- 1. Administrative actions include, but are not limited to letters of admonishment, counseling and reprimands, denial of re-enlistment, removal from Personnel Reliability Assurance Program status, 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 313(b) include inspections under the installation's random urinalysis drug testing program and unit or gatesweeps.
- 3. Probable cause tests are authorized searches and seizures ordered by a competent military authority (e.g., a military magistrate or appropriate commander) (See Military Rules of Evidence 315 and 316).
- 4. Absent probable cause, commander directed results may not be used for disciplinary action under the UCMJ, or for ANG members in Title 32 status under the member's state UCMJ provisions, or to characterize an administrative separation. **Exception:** commander directed test 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, or for ANG members in Title 32 status under the member's state code.
- 6. Members may not be disciplined under the UCMJ when they legitimately self-identify for drug abuse and enter the Alcohol and Drug Abuse Prevention and Treatment (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 Personnel Reliability Program status, removal of restricted area badges, etc. Urinalysis tests of members following entry into the ADAPT program are for valid medical purposes. Members in the ADAPT program may also be disciplined under the UCMJ, or for ANG members in Title 32 status under the member's state code, if independent evidence of drug use is obtained.
- 7. Urine specimens obtained from an examination for a valid medical purpose may be used for any purpose.

# DRUG DEMAND REDUCTION (DDR) OUTREACH ACTIVITIES

# 10.1. Community Outreach Activities.

- 10.1.1. If appropriate funding is available, MAJCOM and installation DDR personnel are encouraged to participate in community outreach anti-drug awareness and education programs targeted at service members, their families, and DoD civilians. Such programs must have objective measures of effectiveness. (T-1)
- 10.1.2. MAJCOM and installation DDR personnel are encouraged to participate in community outreach anti-drug awareness and education programs in schools, local sporting events, and other community activities formally associated with military installations. Such programs must have objective measures of effectiveness. (T-1)
- 10.1.3. AFR and ANG only: Outreach activities should be targeted at service members, their families, and DoD civilians. Other audiences may be included as time permits.
  - 10.1.3.1. Will provide one outreach activity as funding allows that pertains directly to the AFR and ANG personnel, their family members, and DoD civilian employees. (**T-2**)
  - 10.1.3.2. Local DDRPMs are responsible for reporting the results of the outreach activity to the AFR or ANG DDRPM (MAJCOM DDRPM equivalent) within 45 days of activity completion. (**T-2**) Outreach activity participation is one key element in the AFR and ANG DDRP annual award criteria.
  - 10.1.3.3. DDRPMs and DTPAMs will support MAJCOM and installation-level Community Action Board (CAB) and Community Action Team (CAT) efforts and initiatives as designated helping agency IAW DAFI 90-5001, *Integrated Resilience*. (**T-1**) The CAB function as the action arm of the CAT 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 CAB 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 DDRP.

# 10.2. Community Outreach Funding.

- 10.2.1. ODDR may provide funding for DAF community outreach activities, and this funding will be dispersed to DAF DDRPs that choose to participate in these activities. **(T-1)**
- 10.2.2. DDRPMs/DTPAMs must ensure proper expenditure of funds for outreach activities in strict accordance with DAFMAN 65-605 V1, *Budget Guidance and Technical Procedures*. **(T-1)**

# DRUG DEMAND REDUCTION (DDR) BUDGET MANAGEMENT AND USE OF APPROPRIATED FUNDS

### 11.1. Budget Management for MAJCOM and Installation DDR Programs.

- 11.1.1. For the upcoming FY, MAJCOM DDRPMs, or installation DDRPMs prepare and submit budget and financial plans for their DDRP as required locally, but no later than 15 August of the current year. (**T-3**) Financial Plans will outline the DDRP requirements and plan of execution by month, quarter, and year. (**T-3**)
- 11.1.2. Budgets will be prepared following guidance in the DoD Financial Management Regulation (DoDFMR); DAFMAN 65-605 V1; and annual execution guidance provided by ODDR; Deputy Assistant Secretary for Budget, Directorate of Budget Operations; and Air Force Medical Readiness Agency. (**T-0**)
- 11.1.3. 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**) These are funded through Central Transfer Account from ODDR. An A40 limitation is placed on these funds, which means funds cannot be added to or subtracted from the amount provided by the Deputy Assistant Secretary for Budget, Directorate of Budget Operations. (**T-0**) This also means funds may not be reprogrammed out of the program for non-counter narcotics purposes, nor executed for non-counternarcotic activities. (**T-0**)
- 11.1.4. DDRPMs/DTPAMs provide monthly obligation data, to include medical supply transactions, from Defense Medical Logistics Supply System to MAJCOM's resource management personnel in order to consolidate and forward to the Deputy Assistant Secretary for Budget, Directorate of Budget Operations no later than the 20th of each month. (T-3) Also, notify resource management personnel of any vacant counter narcotics civilian personnel positions for MAJCOM Financial Management to provide full-time equivalent quarterly report to the Deputy Assistant Secretary for Budget, Directorate of Budget Operations. (T-3)
- 11.1.5. DDRPMs/DTPAMs regularly review program status and reprogram funds in a timely manner. (**T-3**)
- 11.1.6. ODDR requires approval on all moves between DDRP project codes: 8460 drug testing collection, 8464 prevention/outreach, and 8470 drug testing laboratory operations. Requests for realignment must be submitted by MAJCOM, through AFMRA/SG3L to ODDR for approval. (T-1) Once approved, the Deputy Assistant Secretary for Budget, Directorate of Budget Operations will issue a funding authorization document reprogramming funds to facilitate full execution. (T-1)
  - 11.1.6.1. Operating Agency Code (OAC) 15, Operating Budget Account (OBAN) BH goes with DDR and AFDTL programs.
  - 11.1.6.2. Responsibility Center/Cost Center XX5950 and other Responsibility Center/Cost Centers go with Project Code 8460 (Dem Redux Collection Costs); include Civilian Pay in this data retrieval. (SG will use Responsibility Center/Cost Center B00164). (T-1)

- 11.1.6.3. Responsibility Center/Cost Center XX5949 goes with Project Code 8464 (Dem Redux Prevention, Education and Outreach) (SG will use Responsibility Center/Cost Center B0016C). (T-1)
- 11.1.6.4. USAF Drug Lab Project Code 8470 SG will use Responsibility Center/Cost Center B00162. (**T-1**)
- 11.1.7. DDRPMs/DTPAMs maintain program accountability following guidance in DoDIs, ODDR, AFMRA/SG3L, 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) and must be disposed following guidance in Air Force Record Disposition Schedule located in the Air Force Records Information Management System at: <a href="https://afrims.cce.af.mil/afrims/rims.cfm">https://afrims.cce.af.mil/afrims/rims.cfm</a>. (T-1)
- 11.1.8. DDRPMs/DTPAMs 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**)
- 11.1.9. DDRPMs/DTPAMs ensure proper coordination with MAJCOM financial management and contracting offices. **(T-3)**
- 11.1.10. AFR and ANG only: Coordinate with the Deputy Assistant Secretary for Budget, Directorate of Budget Operations for budget planning and execution of the AFR and ANG DDRP. (**T-3**)
- 11.1.11. DDRPMs/DTPAMs ensure proper expenditure of funds for outreach activities in strict accordance with DAFMAN 65-605 V1. Special attention should be given to section 4L, Awards, Awards Ceremonies and Gifts. (**T-1**)

ROBERT I. MILLER Lieutenant General, USAF, MC, CFS Surgeon General

#### **Attachment 1**

### GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

#### References

5USC § 552a, The Privacy Act of 1974

10USC § 45, The Uniform Code of Military Justice

10USC § 9013, Secretary of the Air Force

10USC § 9081, United States Space Force

21USC § 801 et seq., Drug Abuse Prevention and Control

32USC, National Guard

DoDI 1010.01, Military Personnel Drug Abuse Testing Program (MPDATP), 14 February 2018

DoDI 1010.16, Technical Procedures for the Military Personnel Drug Abuse Testing Program, 15 June 2020

DoDI 6130.06 - Use of Dietary Supplements in the DoD, 9 March 2022

AFPD 44-1, Medical Operations, 9 June 2016

AFI 33-322, Records Management and Information Governance Program, 23 March 2020

AFI 33-332, Air Force Privacy and Civil Liberties Program, 10 March 2020

DAFI 36-2907, Adverse Administrative Actions, 14 October 2022

DAFI 36-3211, Military Separations, 24 June 2022

DAFI 90-5001, Integrated Resilience, 25 January 2019

DAFMAN 65-605, Volume 1, Budget Guidance and Technical Procedures, 31 March 2021

DAFMAN 90-161, Publishing Processes and Procedures, 15 April 2022

DAFMAN 91-223, Aviation Safety Investigations and Reports, 20 September 2022

### Prescribed Forms

None

# **Adopted Forms**

DD Form 2624, Specimen Custody Document – Drug Testing

DAF Form 847, Recommendation for Change of Publication

AFMES Form 18, AFMES Forensic Toxicology Analysis Request

### Abbreviations and Acronyms

**AFDTL**—Air Force Drug Testing Laboratory

**AFI**—Air Force Instruction

**AFMES**—Armed Forces Medical Examiner System

**AFMRA**—Air Force Medical Readiness Agency

**AFR**—Air Force Reserve

ANG—Air National Guard

**DAF**—Department of the Air Force (RegAF, USSF, AFR, and ANG)

**DAFMAN**—Department of the Air Force Manual

**DDR**—Drug Demand Reduction

**DDR Knowledge Exchange site** – DDRPM/DTPAM resource

**DDRP**—Drug Demand Reduction Program

**DDRPM**—Drug Demand Reduction Program Manager

**DEERS**—Defense Enrollment Eligibility Reporting System

**DoD**—Department of Defense

**DoDI**—Department of Defense Instruction

**DTPAM**—Drug Testing Program Administrative Manager

FY—Fiscal Year

**GSU**—Geographically Separated Unit

**iFTDTL**—Internet Forensic Toxicology Drug Testing Laboratory

**JA**—Judge Advocate

**MAJCOM**—Major Command

MFR—Memorandum for Record

**MOA**—Memorandum of Agreement

**MOU**—Memorandum of Understanding

MRO—Medical Review Officer

**ODDR**—Office of Drug Demand Reduction

**OSI**—Office of Special Investigations

**SFS**—Security Forces Squadron

**SG**—Surgeon General

**SJA**—Staff Judge Advocate

SSN—Social Security Number

**TDY**—Temporary Duty

UCMJ—Uniform Code of Military Justice

#### **Terms**

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

**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 314(e). While not required, it is best to obtain the member's consent in writing.

**DoD Identification Number**—Personally identifying number found directly below the heading "DoD Identification Number" on the back side of a military member's Common Access Card.

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

**Drug Abuse**—The use, possession, distribution, or introduction onto a military installation, or other property or facility under military supervision, of a controlled substance, prescription medication, or intoxicating substance (other than alcohol). Drug abuse also includes attempts to wrongfully use, possess, distribute, or introduce a controlled substance, prescription medication, over-the-counter medication, or intoxicating substance (other than alcohol). For purposes of this DAFMAN, drug abuse also includes inhalant abuse (i.e., "huffing") and steroid use other than that specifically prescribed by a competent medical authority.

**Field Testing**—Any drug urinalysis testing which is performed outside of the AFDTL, a DoD-certified drug testing laboratory, or a Department of Health and Human Services drug testing laboratory, employing methodology which is defined as a rapid screening test.

**Gender Marker**—Data element in the Defense Enrollment Eligibility Reporting System (DEERS) database that identifies one's internal or personal sense of being male or female.

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

Geographically Separated Unit (GSU) Drug Testing Program Administrative Manager (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.

**Hemp**—The plant Cannabis sativa L. and any part of that plant, including the seeds thereof and all derivatives, extracts, cannabinoids, isomers, acids, salts, and salts of isomers, whether growing or not, with a delta-9-tetrahydrocannabinol concentration of not more than 0.3 percent on a dry weight basis.

**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 313(b). Inspections may be conducted to determine, e.g., 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 subject to an installation-wide random selection process. Results may be used for UCMJ or administrative actions, including adverse characterizations of administrative discharges.

**Operating Instruction**—Technical regulations and procedures generated and used by the drug testing laboratory governing specific aspects of specimen analysis.

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

**Probable Cause**—The initial probable cause authorization may be verbal but should be followed up with a written authorization. Consult with the servicing SJA to determine whether a specimen collected under a probable cause test basis will be shipped to the appropriate testing laboratory before the written authority to search and seize is received by the DDRPM or DTPAM.

**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.

**Total Force**—Total force includes regular Air Force, United States Space Force, Air National Guard of the United States, Air Force Reserve military personnel, U.S. Air Force military retired members, U.S. Air Force civilian personnel (including foreign national direct and indirect-hire, as well as non-appropriated fund employees), contractor staff, and host-nation support personnel.

**Trusted Agent**—An individual appointed in writing by unit commanders to receive and maintain rosters of individuals (notification letter from the DTPAM/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. The trusted agent must be a member of the Commander's Support Staff. If the commander does not have a Commander's Support Staff, the commander must identify and appoint a trusted agent from within the unit.

**Wrongful Use**—Without legal justification or authorization 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 prescription medication, the mere passage of time does not necessarily render the use or possession of an otherwise validly prescribed medication wrongful.