DAPE-HRS 24 April 2009

## MEMORANDUM OF INSTRUCTION

SUBJECT: Special Drug Test Requests

1. Purpose: To provide information and instruction on the Army's Policy for Special Drug Test Requests. This information does not apply to Steroid Test Requests.

## 2. Background:

- a. Special Drug Testing (SDT) refers to any request for a drug test for any substance other than those drugs that are tested for at the Forensic Toxicology Drug Testing Laboratories (FTDTLs). FTDTLs only test for six categories of drugs: THC; cocaine; amphetamines (including designer drugs such as ecstasy); opiates (including codeine, morphine and heroin); PCP; and oxymorphone/oxycodone.
- b. SDT is not conducted at the Army FTDTLs. The Division of Forensic Toxicology, Armed Forces Medical Examiner Services (AFMES) is the Army's reference lab for Special Drug Testing, with the exception of steroid testing. Soldiers' urinalysis specimens are tested for steroids exclusively at the University of California, Los Angeles (UCLA) and only after coordination with the Army Center for Substance Abuse Programs (ACSAP) and the Commander of the FTDTL at Fort Meade, MD (see Information Paper "Steroid Test Requests", dated 25 July 2007). AFMES WILL NOT ACCEPT REQUESTS FOR SPECIAL DRUG TESTING WITHOUT THE APPROVAL OF ACSAP.
- c. SDT is for those circumstances where the commander has probable cause that a Soldier is using or abusing a substance other than those listed in paragraph 2a above. A commander should verify that they have sufficient probable cause by consulting with their servicing Judge Advocate General (JAG). If a commander has probable cause that a Soldier is using an illegal substance or is abusing other substances, he/she may request, through the local Army Substance Abuse Program (ASAP) office, a special drug test at no cost to the unit. For other than probable cause circumstances, the commander should contact the local CID for assistance. SDT requests will be coordinated by the supporting Alcohol and Drug Control Officer (ADCO) or Drug Testing Coordinator (DTC) directly with the Drug Testing Branch, ACSAP, prior to the collection of any specimens.
- d. Without probable cause, Commanders are limited in what they can do with the SDT result. Commanders should have a very good reason to request SDT without probable cause and should consult their servicing JAG, as well as the Drug Testing Branch, ACSAP, before ordering a Soldier to provide a specimen.
- e. If the Commander feels he or she has probable cause but they cannot immediately contact their servicing JAG office, the Commander should collect the

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specimen; however, the specimen should not be processed by the ASAP to AFMES until JAG had verified the probable cause.

- f. If a commander requests to have part or all of his/her unit tested for a special drug without probable cause, that **unit** may be responsible for paying all costs associated with those tests. Installation ASAPs are **NOT** funded to cover the expenses of SDT for other than probable cause circumstances. SDT is expensive; the exact cost will vary depending on the specific drug test request and number of specimens tested (approximate costs exceed \$55 per specimen). AFMES could require the transfer of funds to test the specimens depending on the number of samples (see Encl 1). SDT for other than probable cause circumstances is highly discouraged.
- 3. Procedure: Processing Special Drug Test Requests (other than steroids):
- a. Specimens collected for special tests and other requested drugs must meet the following requirements:
- 1) COORDINATE WITH ACSAP PRIOR TO COLLECTION OF SPECIMEN if possible; specific instructions will be relayed to the DTC/ADCO referencing the collection and chain of custody documents.
- 2) The commander must provide a memorandum (template at Encl 2) to the local ASAP requesting that the specimen be tested for a specific substance. The unit must maintain a file copy). This memorandum must identify the specimen by Base Area Code, Batch Number, date collected, specimen number, and SSN. Do NOT include the Soldier's name on the memorandum.
- 3) The specimen must be collected IAW AR 600-85, with the following exceptions:
- a) The minimum amount of specimen to be collected and submitted is 60 ml of urine; however, forward as much sample as possible if this amount cannot be collected.
- b) All urine specimens will be recorded using the DD 2624 (see Encl 2). The DD Form 2624 (Specimen Custody Document Drug Testing) should have all transfer of custody annotated to include any temporary storage time if applicable.
- c) Only requests for alcohol and propellants/inhalants ("huffing" agents) require collection of a blood specimen in addition to the urine specimen. The local servicing medical clinic will conduct the blood collection using the NaF (gray top) tubes to collect 14 21 mL of blood. The ASAP must ensure that the medical personnel know that this is a forensic collection and that chain of custody must be maintained. Contact ASCAP for information on the forms used for recording blood specimens and tracking the chain of custody. The urine specimen will be processed IAW these instructions.
- d) Specimens for SDT will only be tested for the substance(s) delineated in the Commander's memorandum.
- e) The commander's memorandum with JAG endorsement must be included with the DD2624 in the unsealed envelope attached to the outside of the specimen box.
- f) DO NOT SEND PACKAGE(S) BY REGISTERED, CERTIFIED, AIR FREIGHT, OR "RETURN RECEIPT REQUESTED" as this will cause significant delays in the delivery of the specimens. Each individual's specimen submitted must have an

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accompanying DD Form 2624 (See Attachment 1) and any other documentation pertinent to the case.

g) All specimens for special drug testing will be mailed to:

ARMED FORCES INSTITUTE OF PATHOLOGY ARMED FORCES MEDICAL EXAMINER SERVICES ATTN: DIVISION OF FORENSIC TOXICOLOGY BUILDING 54 6825 16TH STREET, NW WASHINGTON, DC 20306-6000

- 4. Results will be reported from AFMES through the servicing ASAP office (identified in Block 2 & 3 of the DD 2624) to the commander. The ASAP will work with the Medical Review Officer and the Commander to determine the need for a medical review for prescription or over-the-counter substances.
- 5. Point of contact is the Drug Testing Branch at (703) 681-5560/5562/5563/5576 (DSN 761-) or e-mail: **Biochem@conus.army.mil.**

E-Signed by amaralml VERIFY authenticity with Approve It

3 Encl As MICHAEL L. AMARAL COL, MS Chief, Drug Testing Policy AFMES Forensic Toxicology is not operationally funded to perform large quantities of samples for specific drug compounds unless additional monies are forwarded to the AFMES before any test results can be released. Although coordination delays may be encountered with the money transfer, it is imperative to expedite the collection/shipping process as quickly as possible (after the unit receives approval to do so). The AFMES would rather perform the testing sooner than later so that sample integrity and drug recovery may be ensured.

If AFMES receives a request for a large number of special tests it may require the transfer of funds prior to testing of the specimens. These will be coordinated on a case-by-case basis.

- 1. First, contact your servicing ASAP office for guidance. They, in turn will contact the ACSAP. AFMES Forensic Toxicology Division at (301) 319-0100 (DSN 285-0100) to discuss the circumstances and receive approval prior to submission of specimen(s). They can also be contacted via email at <a href="mailto:FORTOX@AFIP.OSD.MIL">FORTOX@AFIP.OSD.MIL</a>. AFMES WILL NOT ACCEPT REQUESTS FOR SPECIAL DRUG TESTING WITHOUT THE APPROVAL OF ACSAP.
- 2. Upon approval, the installation/unit should be prepared to provide AFMES with full contact information of the unit's budget POC (name, title, mailing address, email address, phone, and fax #) so that AFMES can properly invoice the unit for services rendered and coordinate the transfer of funds (if applicable). Although documentation may differ, the AFMES generally invoices the unit via a one-time MIPR on a Standard Form (SF) 1080.

{Unit Office Symbol}

Date

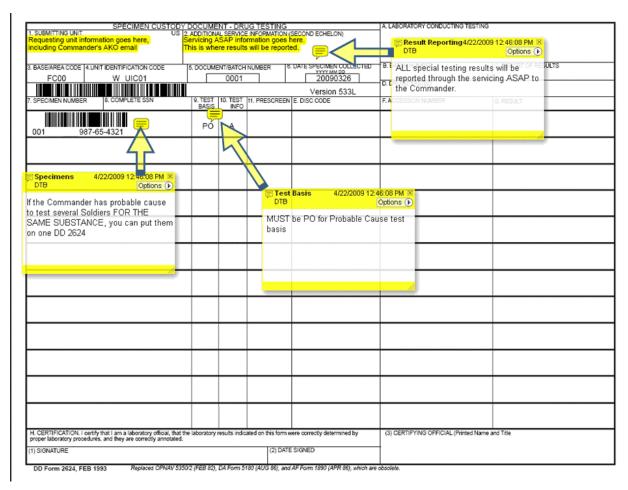
MEMORANDUM THRU {Local ASAP Office information}

FOR Commander, Armed Forces Institute Of Pathology, Armed Forces Medical Examiner Services (ATTN: Division Of Forensic Toxicology), Building 54, 6825 16th Street, NW, Washington, DC 20306-6000

SUBJECT: Request for Steroid Testing

- 1. I request that the enclosed urine sample be tested for {specify substance(s)}. The additional required information is provided:
  - a. Base Area Code:
  - b. Batch Number:
  - c. Specimen number:
  - d. Date collected:
  - e. SSN of donor: (Do NOT include the Soldier's name on the memorandum)
  - f. Commander's phone number:
  - g. Commander's AKO email address:
- 2. Provide any other details surrounding this request.
- 3. Enclosed is an endorsement by my servicing Judge Advocate General (JAG) that sufficient probable cause exists to support this Probable Cause (PO) drug test.

COMMANDER'S SIGNATURE BLOCK 1. Special Drug Test requests will be done using the Drug Testing Program (DTP) Lite or Full versions to produce the requisite forms: DD Form 2624 (Specimen Custody Document – Drug Testing), the urine specimen bottle label, and the unit ledger. In the even DTP is not available, hand written forms are acceptable. The DTC/ADCO must consult the AFIP toxicological guidelines to ensure that there are no special requirements based on the testing being requested.



- 2. The commander's memorandum requesting that the specimen be tested for a specific substance must be included. This memorandum must identify the specimen by Base Area Code, Batch Number, date collected, specimen number, and SSN. **DO NOT** include the Soldier's name on the memorandum.
- 3. All available information (a brief history of the events surrounding the incident and the suspected drug known in question) should also be submitted with the specimen.
- 4. Paperwork should be <u>clearly printed or typed</u>. The importance of establishing chain of custody documentation with a properly completed DD Form 2624 cannot be overemphasized. Correctly completed paperwork must be submitted with each case or significant delays will occur.