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Medical

DRUG URINALYSIS REQUEST

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This instruction implements Air Force Policy Directive (AFPD) 44-1, Medical Operations and Air Force Instruction (AFI) 44-120, Drug Abuse Testing Program. This instruction prescribes Dover Form 1, Drug Urinalysis Request and the procedures used in completing this form. This instruction requires collecting and maintaining information subject to the Privacy Act of 1974. The authority for this is in Public Law 91-513 and 92-255; Chapters 13 and 16 of Title 21, United States Code (USC); Public Law 92-129; 5 USC 501; and 10 USC 8013. It applies to all personnel requesting a drug urinalysis test through Laboratory Services, 436th Medical Group

1. REFERENCES:

- 1.1. AFI 44-120, Drug Abuse Testing Program.
- 1.2. AFI 44-36-2701, Social Action Program.
- 1.3. Air Force Manual (AFMAN)37-139, Records Disposition Schedule.

2. PURPOSE: Dover Form 1 is used to document a request for a drug urinalysis test from a unit commander or physician; to record the individual's consent when a urine sample is voluntarily given; to document that the observer has read the observer's instructions and observed the collection of the urine sample; to provide a record to the commander that a sample was collected as requested; and to record the test result when it is received from the drug testing laboratory.

3. AVAILABILITY: This form is available as paper stock from the base publishing office or as an electronic form (FormFlow) via Dover AFB Local Area Network. The path is G:\FORMS\DAFB\FILL-ABLE\DF0001.FRP.

4. PROCEDURES: Dover Form 1 is divided into six blocks on the front and two blocks on the reverse. All information must be typed or printed legibly. The electronic form is fillable. Submit an original and one copy.

4.1. Block 1. The unit commander or their representative will:

4.1.1. Fill in the name, rank, full social security number (SSN) and organization of the individual to be tested.

4.1.2. Date the request.

4.1.3. Mark reason for test. AFI 36-2701 prescribes the various types of urine drug testing.

4.2. Block 11. Consent Statement. If the individual voluntarily consents to be tested, the unit commander or their representative will:

4.2.1. Mark when a copy of AF Form 1364, Consent for Search and Seizure, is attached. If attached, the consent statement does not have to be filled out or signed by the individual to be tested.

4.2.2. Check the box if a designated observer is to return a completed copy of this form after the individual to be tested provided a urine sample. The last sentence in the consent statement will not apply and may be lined through.

4.2.3. Fill in the blanks in the consent statement and have the individual to be tested read, sign and date the form.

4.2.4. Have a witness to the signing of the consent statement, print and sign their name.

4.3. Block III, Initiator's Statement. The unit commander or their representative will:

4.3.1. Complete this block when the reason for testing is Commander Directed or Inspection.

4.3.2. Fill in where and when the individual will report to provide a urine sample for drug testing.

4.3.3. Sign and date this block.

4.4. Block IV, Observer's Verification. The observer will:

4.4.1. Read the information on the reverse of Dover Form 1.

4.4.2. Observe the collection of the urine from the individual listed in Block 1.

4.4.3. Check each box and print and sign name, and print date in Block IV.

4.5. Block V Specimen Information. The medical urine testing program monitor or designee will:

4.5.1. Complete this block after the individual to be tested provided an acceptable sample.

4.5.2. Return a copy to the observer to carry back to the requesting organization.

4.6. Block VI, Air Force Drug Testing Laboratory Results. The medical urine testing program monitor or designee will:

4.6.1. Complete this block with the test result from the drug testing laboratory by transcribing it from DD Form 2624, Specimen Custody Document - Drug Testing.

4.6.2. Forward a copy of this form to the requesting organization in block I.

4.6.3. If so indicated in block 1, also forward a copy to the local Office of Special Investigation (OSI).

4.7. Reverse side of Dover Form 1 contains brief instructions for completion of the form and the observer's instructions.

5. COMPLETED DOVER FORM 1: is maintained and disposed as prescribed in AFMAN 37-139, Table 44-5, Drug Abuse Testing Program.

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Commander