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Medical

DRUG ABUSE TESTING PROGRAM

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This instruction establishes a program that provides commanders objective evidence of drug abuse involving members under their command. It assigns duties and responsibilities for implementation and control of the program at MacDill Air Force Base (AFB). Failure to perform the duties imposed by this instruction constitutes a violation of Article 92(b)(3), Uniform Code of Military Justice (UCMJ), for dereliction of duty. Where punitive actions are contemplated, the 6th Air Refueling Wing, Staff Judge Advocate (6 ARW/JA), should be consulted. This instruction applies to active duty military personnel assigned to MacDill AFB. It implements AFI 44-120, Drug Abuse Testing Program.

This instruction is affected by the Privacy Act of 1974. Each document subject to the provisions of AFI 37-132, Air Force Privacy Act Program, and required by this instruction contains a Privacy Act Statement either incorporated in the body of the document or in a separate statement accompanying each such document.

Summary of Revisions: This revision updates responsibilities for oversight and administration of the Air Force Drug Testing Program (AFDTP) to ensure deterrence and forensic value. It also mandates the use of the AFDTP for random selection of personnel and testing days.

1. Purpose: To ensure compliance with AFI 44-120, identify responsibilities and procedures, and to provide guidelines for the overall management of the program. This instruction applies to all active duty military members assigned to MacDill AFB.

2. References:

- 2.1. AFI 44-120, Drug Abuse Testing Program, 1 April 1997
- 2.2. DODD 1010.1, Military Personnel Drug Abuse Testing Program, 9 December 1994

3. Program Objectives:

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

4. Responsibilities:

- 4.1. The Commander, 6th Air Refueling Wing (6 ARW/CC):
 - 4.1.1. Ensures cross-functional oversight of the installation drug testing program.
 - 4.1.2. Ensures activities of medical, Staff Judge Advocate (SJA), Security Forces, Air Force Office of Special Investigations (AFOSI), Chaplain, and other agencies involved in drug abuse control programs are coordinated to ensure program objectives are met, including conduct of drug testing.
 - 4.1.3. Ensures inspection testing is the predominant test used and the test levels and type of tests are appropriate to the local threat and consistent with Air Force policy.
 - 4.1.4. Ensures all personnel assigned to the installation, including tenant units, are subject to inspection testing, regardless of grade, status, or position.
 - 4.1.5. Ensures commanders and supervisors understand the program and staff agencies support the program.
 - 4.1.6. Ensures testing is used in conjunction with investigation and law enforcement as a counter-measure to drug abuse.
 - 4.1.7. Ensures commanders refer for drug testing all incidents of known or suspected drug abuse or indication of deterioration of duty performance or behavior such as aggressive behavior, destruction of government/personal property, and failure to obey orders.
 - 4.1.8. Develops procedures to test individuals who are assigned to this base but physically reside in a geographically separated unit.
 - 4.1.9. Ensures adequate facilities are provided for the drug testing program.
- 4.2. Medical Treatment Facility Commander:
 - 4.2.1. Serves as the office of primary responsibility for the installation drug testing program.
 - 4.2.2. Appoints a Drug Demand Reduction Program Manager (DDRPM).
 - 4.2.3. Appoints a Drug Testing Program Administrative Manager (DTPAM) and assistant.
 - 4.2.4. Appoints a medical review officer (MRO) who is a physician trained and certified to function as an MRO for the military drug testing program.
- 4.3. The DDRPM:

- 4.3.1. Briefs unit commanders, first sergeants, and supervisors on medical aspects of the drug abuse testing program.
 - 4.3.2. Supervises, directs, and assists with the military drug testing program.
 - 4.3.3. Distributes minimum testing allocations to base level units according to Air Staff and major command guidance.
 - 4.3.4. Ensures prevention and education efforts are provided for active duty, Air Force civilian, and dependent personnel.
 - 4.3.5. Takes appropriate actions to ensure less than one percent of specimens are untestable by the laboratory.
- 4.4. The DTPAM:
- 4.4.1. Gives the program first priority in fulfilling duties.
 - 4.4.2. Ensures specimens are collected, packaged, and transported to the testing laboratory according to the requirements of this instruction.
 - 4.4.3. Monitors rate of untestable specimens and ensures it remains at minimum levels.
 - 4.4.4. Verifies results are received for every specimen sent for testing.
 - 4.4.5. Ensures AFOSI and the SJA are notified expeditiously of all MRO verified positive results and samples determined by the laboratories to be either unfit for testing or not consistent with human urine.
 - 4.4.6. Uses the AFDTP software for inspection (random) testing. Failure to use the software does not invalidate any test results on specimens collected and tested.
 - 4.4.7. Ensures drug testing is conducted on randomly selected days unknown by the tested population prior to notification. A minimum of 8 testing days per month is required.
- 4.5. Unit Commanders:
- 4.5.1. Provide credible observers who are noncommissioned officers or above who have not been selected for testing in the same session as the one in which they are observers, when requested by the DTPAM.
 - 4.5.2. Ensure all unit members are subject to inspection testing.
 - 4.5.3. Ensure unit members selected for drug testing are notified in writing as soon as possible of the time and place of urine collection, and the need to present a valid military identification card (ID) or other picture ID (that contains social security number) at the time of urine collection. Members on crew rest or otherwise unavailable due to mission requirements (e.g., flying) will be rescheduled immediately after completing crew rest or becoming available for testing.
 - 4.5.4. Ensure that all members who are selected for testing report for specimen collection within two hours of the member's notification. Members who are in temporary duty (TDY) or leave status will be tested within two hours of member's notification upon their return to duty, using the automated tracking provisions in the drug testing program software.
 - 4.5.5. Take appropriate administrative or UCMJ action on personnel who fail to attend testing without a valid reason, such as TDY or leave.

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

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

4.6. The SJA:

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

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

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

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

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

5. Categories Of Testing:

5.1. Inspection Testing: In order to determine and ensure the security, military fitness, good order, and discipline of the unit, organization, and installation, inspection testing is used as a screening procedure to deter drug abuse. Individuals are selected at random using the AFDTP computer software (a non-biased selection process). Commanders may also select work sections, units, or segments of the military population to provide urine samples. The commander directing the inspection must coordinate with SJA and the DDRPM (ext. 8-7434) who ensures through the major command that the servicing laboratory can accomplish the associated work load in a reasonable period of time.

5.2. Command-Directed Testing: A command-directed examination includes testing a specified member incident to a mishap or safety investigation, in conjunction with the member's participation in a DoD drug treatment and rehabilitation program, to determine a member's fitness for duty or to ascertain whether a member requires counseling, treatment, or rehabilitation for drug abuse.

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

5.4. Probable Cause: Probable cause exists when there is reasonable belief that drugs will be found in the system of the member to be tested. See Military Rule of Evidence 315(f) and consult with the SJA regarding procedures for determining whether there is probable cause.

5.5. Consent Testing: Drug testing conducted when the member voluntarily consents to provide a sample for drug testing. Consent is not valid if it is mere acquiescence to authority. See Military Rule of Evidence 314(e). Commanders should obtain the member's consent in writing via AF Form 1364, Consent for Search and Seizure, or a letter on squadron letterhead.

5.6. Incident to Medical Care: Testing of a urine specimen collected for any valid medical purpose on any active duty military member. This category may include specimen collection for immediate or emergency medical care, annual physicals, etc.

6. Selection & Notification Procedures:

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

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

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

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

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

6.1.5. Personnel who are notified after closing of the testing site (for valid reasons such as shift work) will report for testing at the hospital laboratory.

6.2. Command-Directed, Probable Cause, Consent Testing: Individuals will be directed in writing by the unit commander to report for testing. Individuals must report immediately upon notification to the hospital laboratory accompanied by an escort provided by the unit commander. The escort will carry the paperwork (see Attachment 1, Basis for Urinalysis Memorandum) and will present it to the laboratory technician prior to testing.

6.3. Rehabilitation Urine Testing: A list of names compiled by the Mental Health Services Flight Substance Abuse Control section is provided monthly to the DTPAM for the collection of specimens. Report the first testing of a self-identified member in this category. The unit commander may discontinue rehabilitation urine testing once a court martial or separation is initiated on a member in rehabilitation.

7. Collection And Transportation Procedures:

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

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

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

7.4. The hospital laboratory is responsible for collecting other types of testing (Commander-Directed, Medical, Consent, and Probable Cause). They are also responsible for the collection of inspection samples from shift workers or personnel notified after closing of the testing site due to mission essential requirements (does not include normal daily assignments).

8. Test Results:

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

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

8.3. The DDRPM will notify the unit commander of any untestable results. The unit commander will direct the member to be re-tested as an inspection, consent, or by direction of the commander.

JAMES N. SOLIGAN, Brig Gen, USAF
Commander

Attachment 1

MEMORANDUM FOR 6 MDSS/SGSC

FROM: (Unit) _____

SUBJECT: Basis for Urinalysis Testing

1. On this date, I have instructed or requested the following person to report to the base hospital for a urinalysis testing. He/she was told to report to the hospital laboratory during or after duty hours, and he/she should be accompanied by an escort unless basis for testing is "Leave/TDY".

Name: _____

SSAN: _____

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

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

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

_____ Command - Directed.

Commander's Signature: (place signature block below)

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

Signature of lab personnel verifying that testing was completed: _____

CC: Provide this memo to the escort.

Escort: Provide this memo to the lab personnel

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

DOCUMENTATION FOR NON-INSPECTION TESTS