UPC  
URINALYSIS PROGRAM COORDINATOR

Handbook 4th Edition | Marine Corps Substance Abuse Program
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INTRODUCTION

The purpose of this handbook is to provide Urinalysis Program Coordinators (UPCs) detailed guidance that reinforces policy outlined in DoDI 1010.01, “Military Personnel Drug Abuse Testing Program (MPDATP)” and DoDI 1010.16, “Technical Procedures for the Military Personnel Drug Abuse Testing Program (MPDATP).” The information in this handbook is designed to assist commands in implementing a successful urinalysis program. It is not intended to replace or revise the official urinalysis guidance provided in DoDI 1010.01, and DoDI 1010.16.

BEGINNING OF THE MILITARY DRUG PROGRAM

June 11, 1971-President Nixon directed the military drug urinalysis program to identify service members returning from Vietnam for rehabilitation.

1972-Department of Defense amnesty program results in over 16,000 military members admitting a drug abuse problem.

September 1973-Final Report. *The Vietnam Drug User Returns*, (Robins). Special Action Office Monograph, US Gov Print Office 1974. Approximately 42% of U.S. military personnel in Vietnam in 1971 had used opioids at least once, and half of these individuals were reported to be physically dependent at some time.

April 4, 1974-DoD Instruction 1010.1 issued. Established random testing. Primarily a clinical program to identify users for treatment. The program did not deter drug use.
1980-DoD Survey of Health Related Behaviors Among Military Personnel showed that 27.6% of service members had used an illegal drug in the past 30 days. Greater than 38% in some units.

May 26, 1981-Aircraft accident aboard the USS Nimitz. 14 killed, 48 injured, 7 planes destroyed, 11 planes damaged, estimated cost of $150M. Six killed had marijuana metabolite in their bodies. Drugs were a contributing factor in the accident.

December 28, 1981-Deputy Secretary of Defense Carlucci issued a memorandum authorizing the Services to take punitive action, including courts-martial and discharge, against service members who had a positive drug test. Drug testing included marijuana, cocaine, heroin (opiates), amphetamines, barbiturates, methaqualone and PCP.

Today, the Marine Corps utilizes the Navy Drug Screening Laboratories (NDSLs) in Jacksonville, FL and Great Lakes, IL along with the Army’s Drug Screening Laboratory in Ft. Tripler, HI. Steroid testing is conducted at the Sports Medicine Research and Testing Laboratory (SMRTL) in Salt Lake City, UT. The Department of Defense (DoD) Drug Screening Laboratories have the capacity to test over two million samples annually and for a variety of drugs. These laboratories are monitored through quality control samples provided by the Armed Forces Medical Examiner System (AFMES) and by semi-annual inspections conducted by the Chief, Bureau of Medicine and Surgery (BUMED) and annually by DoD. Time after time, the DoD’s Drug Screening Laboratories results have proven to be forensically accurate and legally defensible. The weakest link in the urinalysis program has shown to be in the collection process. This handbook will focus on procedures to improve collection, handling, and packaging procedures to ensure the integrity of each command’s drug testing program.
URINALYSIS PROGRAM COORDINATOR (UPC) AND OBSERVER

ROLE AND RESPONSIBILITIES

THE ROLE OF THE UPC

The Substance Abuse Control Officer (SACO) or UPC manages the command’s urinalysis program and is an advisor to the Commander on all matters relating to urinalysis, including Marine Corps policy and related procedures, collection, and transportation of urinalysis samples. The SACO/UPC must be trained before engaging in any aspect of the collection process. **UPCs must be appointed in writing by the Commander.**

UPC RESPONSIBILITIES

- Administer the command urinalysis program
- Maintain all urinalysis files
- Ensure observers and assistant UPCs are properly trained
- Maintain and update directives and instructions pertaining to urinalysis
- Ensure command compliance with Marine Corps requirements
- Provide CO/XO with answers to any questions

THE ROLE OF THE OBSERVER

The observer plays a key role in the command’s urinalysis program by preventing adulteration, dilution and substitution. The observer must adhere to Marine Corps policy and related procedures on collection of urinalysis samples. The observer must be trained before engaging in any aspect of the collection process. **Observers must be designated in writing by the Commander.**

OBSERVER RESPONSIBILITIES

- Be the same sex as the Marine providing the specimen.
- Witness the complete collection process (Marine urinating into the specimen bottle, placing the lid on the bottle, and delivering it to the UPC).
The observer must maintain full observation of the specimen bottle while under his cognizance.

- Print their name and sign the urinalysis ledger after the Marine providing the specimen signs certifying the specimen bottle contains urine provided by the Marine and there was no opportunity for substitution or adulteration.

- Ensure specimens provided by females are collected in a medical specimen container and transferred to the standard specimen bottle for processing. This transfer is done by the Marine providing the specimen in full view of the observer. Maintain and update directives and instructions pertaining to urinalysis

**INSTRUCTIONS AND DIRECTIVES**

UPCs should be thoroughly familiar with the following instructions/directives.

**DoD Instruction 1010.1: “Military Personnel Drug Abuse Testing Program (MPDATP)”** This instruction issues guidance on the conduct of prevalence testing and the use of data from urinalysis testing to conduct demographic longitudinal, statistical, and analytical studies assessing the extent of drug abuse among military personnel within DoD.

**DoD Instruction 1010.16: “Technical Procedures for the Military Personnel Drug Abuse Testing Program” (MPDATP)** This instruction establishes the technical procedures for the DoD Urinalysis Program. Its purpose is to provide technical requirements and related procedures for the Military’s Drug Abuse Testing Program.
VOCABULARY AND ACRONYMS

UPCs should become thoroughly familiar with the following terms, definitions and acronyms:

Substance Abuse Control Officer (SACO)

- Appointed in writing and advises the commander on all substance abuse matters.

Observer

- Responsible personnel designated in writing who must be trained by the SACO/UPC before engaging in any aspect of the collection process.

Armed Forces Medical Examiner System (AFMES)

- A DoD drug testing quality assurance laboratory that performs quality oversight of the DoD Drug Testing Program through certification, proficiency testing and inspections. Performs commercial product testing in support of military legal proceedings.

Chain of Custody

- Chain of custody is critical and begins the moment a service member takes possession of the urine sample bottle. Chain of custody ends for the UPC when he/she places the urinalysis samples in the mail or delivers them to the laboratory. The chain of custody form must be used to submit specimens for testing.

Direct Observation

- Every sample must be given under direct observation by a member of the same gender as the person giving the sample. The observer must never lose sight of the bottle, never take possession of the bottle and must watch the urine leave the body and enter the bottle.
Navy Drug Screening Laboratory (NDSL)/Forensic Toxicology Drug Testing Laboratory (FTDTL)

- All units shall use DoD-certified laboratories for testing.
- Units east of the Mississippi River and overseas commands (except WestPac) will submit urine samples to NDSL Jacksonville.
- Units west of the Mississippi River and WestPac commands will submit samples to NDSL Great Lakes.
- Units at MCB Kaneohe Bay will submit urine samples to Tripler Army Medical Center.

Drug Testing Program (DTP)

- DoD mandated drug testing software to be used by all Armed Services. This program is designed to reduce human errors in manually filling out forms and labels. This software enhances the validity of the random selection process in order to increase the deterrence of illicit drug use. To acquire the latest approved version of DTP, visit https://iftdtl.amedd.army.mil

Internet Forensic Toxicology Drug Testing Laboratory (IFTDTL)

- DoD web database that is limited only to those with prior approval to gain access to urinalysis results.

Specimen Custody Document (DD Form 2624)

- DD Form 2624 is a standard chain of custody form that must be used to submit specimens to a DoD-certified laboratory for testing.
- DD Form 2624 is the only specimen custody document authorized for each batch for testing. Refer to: Collection Examples, pgs. (52-62).
PURPOSE OF URINALYSIS

The purpose of a urinalysis is to ensure military fitness, good order and discipline within a unit. It also assures the commander that assigned personnel are fit and ready for duty and that personnel using illegal drugs are identified.

A urinalysis shall not be used for the purpose of obtaining evidence for trial by court-martial or for other disciplinary purposes. Results of a urinalysis, however, may be used for determining disciplinary action and characterization of service in separation proceedings.

WHO, WHEN AND HOW MANY TO TEST

Commanders shall establish an aggressive compulsory illicit drug testing program, ensuring systematic screening of ALL Marines annually, regardless of rank, for the presence of drugs. Additionally, unit commanders will direct testing at least 10 percent of their population monthly. Commanders may increase testing at their discretion.

- Test day and time must remain unannounced.
- Random testing with smaller groups is the most effective.
- The urine sample must be tested by a DoD-certified laboratory.
- Establish a “testing window” which identifies specific hours of collection, i.e., 0800-1100.
- Test early in the morning when there is less chance to dilute.
- Only the Commander or Medical Officer can order a urinalysis.
- When in doubt, consult with the command Staff Judge Advocate.
- SACOs/UPCs and all personnel involved in collection and shipment will be tested monthly. Their samples cannot be shipped in the same batches they were responsible for collecting.
PREMISE CODES

Premise codes or collection codes are used to document the basis for military drug abuse urine testing.

Marine’s Consent (VO)

- A Marine who is suspected of unlawfully using drugs may be requested to consent.
- Prior to requesting consent, the command should advise the Marine he may decline the test.
- Where practicable, consent should be obtained in writing.

Probable Cause (PO)

- Marine declines to provide a urine sample and there is probable cause to believe that the member has committed a drug offense and that a urine test will produce evidence of that offense.
- Marine is apprehended for illegal drug use or connected with any incident in which drug use may be a factor.
- **When in doubt, consult with the command Staff Judge Advocate.**

Random Selection (IR)

- A minimum of 10% of the unit monthly.
- Partial unit testing by last digit of EDPI, company, platoon, work section or all command members.

Unit Sweep (IU)

- Entire Unit or the selection of an entire sub-unit.
- Examples of a sub unit: Company, Department, platoon or section
Accession (NO)

- Testing of all personnel seeking accession into the Marine Corps or recalled to active duty.
- All officer candidates and recruits are tested within 72 hours of arrival at the training site.

Command Directed (CO)

- Ordered by the commander whenever a Marine’s behavior or conduct evokes a reasonable suspicion of drug use or whenever drug use is suspected within a unit.
- Examples are: Assault, Larceny, Indebtedness, Motor Vehicle Offense and Driving under the Influence.
- **When in doubt, consult with the command Staff Judge Advocate.**

Physician-Directed (MO)

- Ordered by a military physician in connection with a competence for duty examination.
- Based on a command referral
- **When in doubt, consult with the command Staff Judge Advocate.**

Official Safety, Mishap, Accident (AO)

- Ordered by the commander in connection with a formally convened mishap or safety investigation.

Rehabilitation/Treatment (RO)

- Conducted in conjunction with participation in a substance abuse treatment program for alcohol/drugs.

Service-Directed and Other Service-Directed (OO)

- Directed by the Secretary of the Navy
- Conducted on SACC personnel
- Conducted on Marines involved in the collection or shipment of urine samples, i.e. SACOs, UPCs and Observers
- Marines who report in from Permanent Change of Station (PCS), Leave or Unauthorized Absence (UA).
INTERNET FORENSIC TOXICOLOGY DRUG TESTING LABORATORY (IFTDTL)

The IFTDTL Portal is a DoD web based information system that provides authorized users, i.e., SACOs/UPCs the most up to date and accurate results from a urinalysis testing, with the exception of steroid testing which comes directly from HQMC. The reports generated from the IFTDTL are used in the first step of a command confirmation. Once an account is created and a System Access Request is approved, the Saco/UPC will have direct access to view all current and past results of their command.

You must log into the website https://iftdtl.amedd.army.mil/ to create an account and then submit a System Access Request to view your results. All System Access Requests must be approved by HQMC.

1. Click on “Enter the Portal”
2. Click on “Create New Account”
3. In Self Registration, fill out correct information. Must be a .mil e-mail address.
4. Click on “Register”
5. Once you log back on, go to the left side of homepage register your Common Access Card, (CAC).
6. Then click on, “System Access Request”
7. Select “Lab Results” then “Next”
8. Select “Find Org”, then “Choose”
9. Select Laboratory, JAX, GLKS or TAMC.
10. Fill out your command shipping address and additional RUCs if needed.
11. Click on “Submit”

Note: You must log-in at least once every 35 days or your account will be disabled.
DoD Drug Testing Program- (DTP LITE)

Step 1:

Click on "DTP/NDSP Portal"

Step 2:

DTP Lite - Marine Corps version 5.4.1 with DoD EDP-PI support
Step 3:

Step 4:

Click "Save"

Click "Run"
Step 5:

Step 6:

Select Roster and then click "Next"
Step 7:

Click on "Do Not Import" to select appropriate information

Step 8:

Click "Next"
Step 9:

Select Location Code, Testing Premise Code, Selection Method and Testing Probability

Select "Finish"

Step 10:

Select "Yes"
Step 11:

Fill out MCC, RUC, Blocks 1 & 2, Date, Gender if needed and check Available Printouts.
PREPARATION AND CONDUCTING FOR TESTING

The SACO/UPC should

- Determine who will be tested and what premise code by conferring with the commander.
- Prepare an authorization letter (in writing for commander’s signature) or via e-mail.
- Recon and establish an adequate and controlled location for UPC setup and testing area.
- Ensure adequate number of personnel assisting in collection is available, i.e., observers **must** be of the same sex as the Marine providing specimen.
- Prepare bottle labels, urinalysis ledgers, and custody documents utilizing the DTP.
- Brief personnel who will be assisting in collection and ensure they are **thoroughly familiar** with their duties, and if possible conduct a rehearsal.
- Announce test and personnel selected to be tested.
- Assemble personnel to be tested.
- If practical, secure the testing area.
- Brief personnel to be tested on the testing procedures.
- Have extra supplies on hand such as bottles, packing tape, and packing material.

**DURING TESTING**

- Ensure boxes and bottles **NEVER** leave UPC’s possession, unless proper chain of custody (back of DD Form 2624) is conducted.
- UPC and observers must ensure unnecessary personnel are removed from testing area.
- UPC must ensure that information security is maintained. No unauthorized personnel are permitted around personally identifiable information or the empty bottles and boxes.
- If practical, establish access and control barriers.
PREVENTING ADULTERATION, DILUTION, AND SUBSTITUTION

Even with the most effective measures conducted in urinalysis testing, drug abusers will still resort to creative methods of gaming the system. This is why it is imperative that the commander designates in writing responsible Marines as UPCs and observers who are thoroughly trained before engaging in the collection process and who will be vigilant in carrying out their duties.

UPCs and observers shall ensure strict adherence to both DoDI 1010.1 and DoDI 1010.16 at all times with direct observation and proper chain of custody to prevent such measures such as adulteration, dilution, and substitution.

**ADULTERATION** involves adding an adulterant to the urine, in order to interfere with the accuracy of drug testing. There are various commercial products and special order products available to the drug abuser such as hydrogen peroxide, bleach, vinegar or sodium bicarbonate. These products can be detected by the DoD Drug Screening Labs and will be annotated on a urinalysis report from IFTDTL.

**DILUTION** involves two basic methods:

- Saturating one’s body with fluids and voiding several times prior to providing a urine sample. The best way to avoid this is to require personnel to remain in an enclosed area until able to provide a sample.
- Adding water after a sample has been provided.

**SUBSTITUTION** involves any attempt by an individual to switch bottles.

**MEASURES TO PREVENT ADULTERATION, DILUTION, AND SUBSTITUTION**

- Recon and establish an adequate and controlled location for testing area.
- Secure heads to all personnel except those required to provide sample.
- Maintain control of personnel to be tested until a sample can be provided.
- Have personnel remove blouse if wearing utilities.
- Observers must **NEVER** lose sight of the bottle.
- Observers must **witness** the complete collection process.
COLLECTION PROCESS (MALE)

**Step 1:** In a controlled area, Marine removes excess outer clothing, presents a military identification card, and the UPC confirms the identity of the Marine.

**Step 2:** The identification card is retained by the UPC and, if practical, **should** be placed in the empty urine bottle box slot. **THE UPC WILL MAINTAIN STRICT CONTROL OF THE BOTTLE WHEN NOT IN THE HANDS OF THE DONOR.** Separate bottles in order to prevent confusion.

**Step 3:** If practical, the Marine will visually inspect his bottle to ensure no debris is inside.
Step 4: Upon leaving the UPC table, the Marine will precede the observer so that the observer never loses sight of the bottle.

Step 5: The observer will position himself as to witness the complete collection process of at least 30 mls. The observer must maintain full observation of the specimen bottle while under his cognizance.

Step 6: Upon delivery of the specimen to the UPC, the observer must NEVER lose sight of the bottle.
Step 7: The Marine will validate the specimen bottle by: verifying his identifying information on the label with his initials and with his printed name and signature on the testing ledger.

Step 8: The observer will print his name, sign the urinalysis ledger certifying the specimen bottle contains urine and notify the UPC of any comments or dispositions while the Marine was in his observation.

Step 9: The UPC will then initial the label.
Step 10: The Marine will attach his initialed label to the specimen bottle.

Step 11: The Marine will attach his tamper resistant tape across the cap ensuring that the tape touches the label on both sides.

Step 12: The Marine will initial the tape on the bottle cap.
Correct specimen for shipment.

**Step 13:** The military identification card will be returned to the Marine and the UPC will ensure the specimen is placed into the empty box slot where the military identification card was retained.
COLLECTION PROCESS (FEMALE)

Step 1: In a controlled area, the Marine removes excess outer clothing, presents a military identification card, and the UPC confirms the identity of the Marine.

Step 2: The identification card is retained by the UPC and, if practical, **should** be placed in the empty bottle box slot. **THE UPC WILL MAINTAIN STRICT CONTROL OF THE BOTTLE WHEN NOT IN THE HANDS OF THE DONOR.** Separate bottles in order to prevent confusion.

Step 3: If practical, the Marine will visually inspect her bottle to ensure no debris is inside.
Step 4: The UPC shall issue the Marine a medical specimen container to transfer urine to standard specimen bottle.

Step 5: Upon leaving the UPC table, the Marine will precede the observer so that the observer never loses sight of the bottle.

Step 6: The observer will position herself as to witness the complete collection process of at least 30 mls.
Step 7: The observer must maintain **full observation** of the specimen bottle and transfer to a standard specimen bottle while under her cognizance.

Step 8: Upon delivery of the specimen to the UPC, the observer must **NEVER** lose sight of the bottle.

Step 9: The Marine will validate the specimen bottle by: verifying her identifying information on the label with her initials and with her printed name and signature on the testing ledger.
Step 10: The observer will print her name, sign the urinalysis ledger certifying the specimen bottle contains urine, and notify the UPC of any comments or dispositions while Marine was in her observation.

Step 11: The UPC will then initial the label.

Step 12: The Marine will attach her initialed label to the specimen bottle.
**Step 13:** The Marine will attach her tamper resistant tape across the cap ensuring that the tape touches the label on both sides. The Marine will then initial the tape on the bottle cap.

Correct specimen for shipment.

**Step 14:** The military identification card will be returned back to the Marine and the UPC will ensure the specimen is placed into the empty box slot in which the military identification card was retained.
PACKAGING AND SHIPPING PROCEDURES

Ensure packaging is in compliance with the U.S. Postal regulations and ensure all documents are complete and included in the package. Following strict chain of custody procedures is critical. The UPC must always package, document, and ship with the idea that the results will be used in a Courts-Martial.

The primary modes of shipment will be through regular U.S. Postal Service (USPS) mail, courier delivery service, i.e., FEDEX/UPS using a Requisition and Invoice/Shipping Document (DD Form 1149) or direct hand delivery to the DoD-certified laboratory. The USPS is not required to sign for the shipment. Acceptance into the USPS should be noted by the date stamp on the DD Form 2624 and a copy retained by the UPC/SACO.

Urine specimens do not require refrigeration before shipment. However, specimens should be shipped expeditiously and if stored it should provide an incontestable security and chain of custody. **DO NOT DISCARD ANY COLLECTED SAMPLE.**

Step 1: The UPC/SACO prepares each box to be shipped in a leak-proof secondary container with sufficient absorbent material.
Step 2: Prepare (3) copies of DD Form 2624, ensuring one (1) copy is enclosed in a waterproof mailer inside the specimen box.

Step 3: The box is then sealed with packing tape, signed and dated on the **top of the box across tape**.

Step 4: The original DD Form 2624 is properly completed and attached to the outside of the box, (preferably on top or bottom **not on sides.**). The last copy of DD Form 2624 is retained for your records.
Step 5: The box will then be inserted into the shipping container.

Step 6: The UPC signs and dates the seal of the shipping container to ensure integrity of specimens.
Step 7: Once shipping labels are affixed, each shipping container is clearly marked on the outside “Clinical Specimens-Urine Samples.” **DO NOT USE BIO-HAZARD LABEL.**

Example of a correctly packaged shipping container.
URINALYSIS TESTING SEQUENCE (NOT STEROIDS)

1. Submitting Command/SACO
2. Sample shipped via USPS/Shipping Method
3. Sample tested at JAX/GLKS/Tripler Drug Labs.
4. Results uploaded into the Laboratory Information Management System (LIMS)
5. From LIMS, the results uploaded into IFTDL
6. Results available via IFTDL
STEROID TESTING

All steroid samples for testing will be submitted to NDSL Great Lakes and then submitted to the Sports Medicine Research & Testing Laboratory (SMRTL) in Salt Lake City, UT who is under contract for the DoD Drug Demand Reduction Program which encompasses Army, Navy, Air Force and the Marine Corps. SMRTL is accredited to conduct steroid tests by the World Anti-Doping Agency (WADA), the international organization responsible for establishing and overseeing the most rigorous standards for laboratories conducting such tests. The Navy will pay for steroid tests; however, this does not allow the Marine Corps to exceed our normal testing rate. If HQMC has reached its limit for the FY, the requesting command will be responsible for incurring the costs for steroid testing. For an amount outside your normal testing rate, contact HQMC for prior approval.

"'Atypical Finding' (ATF): a report from a Laboratory or other WADA-approved entity which requires further investigation as provided by the International Standard for Laboratories or related Technical Documents prior to the determination of an Adverse Analytical Finding."

"'Adverse Analytical Finding' (AAF): A report from a Laboratory or other WADA-approved entity that, consistent with the International Standard for Laboratories and related Technical Documents, identifies in a Sample the presence of a Prohibited Substance or its Metabolites or Markers (including elevated quantities of endogenous substances) or evidence of the Use of a Prohibited Method."

The Atypical finding requires additional analysis at $450 per specimen; which submitting units will be responsible for the additional cost.

When requesting for steroid testing, HQMC will assign a specimen number to each sample submitted from the submitting unit. Steroid testing request must be from the commander on letterhead. Specimens for steroid analysis may also be submitted for standard drug testing, however this additional testing must be specifically requested by the submitting unit. The commander must state the type of testing requested. **Steroid specimens MUST BE 60 (mL).**
Due to the amount of testing that the SMRTL conducts it may take several weeks for the results. **When completed, the results will be forwarded to the command directly from HQMC.**

**IN THE LETTER:**

- Month, day and year of collection
- Specimen number
- Batch number
- Member’s last four of SSN.
- UIC
- Identify a command point of contact, with email address and phone number.
STEROID TESTING SEQUENCE

1. Submitting Command/SACO coordinates with HQMC
2. Sample shipped via USPS/Shipping Method to NDSL Great Lakes
3. SMRTL tests for Steroids
4. Results sent to NDSL Great Lakes
5. Results sent to HQMC
6. Sample tested at NDSL Great Lakes or shipped to SMRTL.
From: Commanding Officer,
To: Commanding Officer, Navy Drug Screening Laboratory,
    Great Lakes, Illinois

Subj: ADDITIONAL DRUG TESTING/STEROID ANALYSIS

1. It is requested that a steroid testing be conducted on the
    following urinalysis sample(s).

    The following information is provided:

    Date of urinalysis: Month Day Year
    Batch number: XXXX
    Specimen number: ##
    Last four SSN: 6789
    UIC: 12345

2. The point of contact at this command is Battalion SACO,
    GySgt Jack O. Trades at commercial XXX-XXX-XXXX, DSN: XXX-XXXX
    or email: jack.trades@usmc.mil

Commanding Officer
Signature
From: Commanding Officer
To: SACO (or law enforcement agent if CID/NCIS is requesting)

Subj: RECORD OF AUTHORIZATION FOR PROBABLE CAUSE URINALYSIS

1. At approximately 0800, on or about 8 September 2015, I was approached by Staff Sergeant Alpha in his capacity as the battalion OOD who having been first duly sworn, advised me of one Lance Corporal John Q. Bravo exhibiting signs and behaviors consistent with methamphetamine use, a violation of Article 112a of the UCMJ (wrongful use of controlled substances) and requested permission for a probable cause urinalysis or nonconsensual extraction of body fluids.

2. The reasons given to me for suspecting the above named person were Staff Sergeant Alpha’s extensive training and experience in recognizing the symptoms exhibited by abusers of methamphetamines as a result of serving as a civilian law enforcement officer for six years. Besides his physical and verbal demonstrations of being under the influence of drugs, Lance Corporal Bravo also has a documented history of drug use during his current enlistment—including his repeated admissions to such use.

3. After carefully weighing the foregoing information, I believed a violation of Article 112a, UCMJ (wrongful use of a controlled substance) had been committed, that Lance Corporal John Q. Bravo was the likely perpetrator thereof, and that a probable cause urinalysis would probably produce evidence of his illegal drug use.

4. I have therefore authorized the battalion SACO to administer a urinalysis for the contents specified and seize the contents of those bodily fluids.

5. The point of contact is First Lieutenant Legal Officer at (513) 721-0000.

I. M. COMMANDING
CERTIFICATE OF CORRECTION

MEMORANDUM FOR Forensic Testing Laboratory Date:__________

SUBJECT: CERTIFICATE OF CORRECTION

1. This letter is to certify the following corrections were made as indicated below for the urine specimen enclosed with this shipment for testing.

2. Reference: ( ) Bottle Label
   ( ) DD Form 2624

   Document/Batch________________Specimen____________________

   Reads as:

   Corrected to read as:

Signature: ____________________
Date: ____________________
Title: ____________________
## DISCREPANCY CODES

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION</th>
<th>USMC</th>
</tr>
</thead>
<tbody>
<tr>
<td>BA</td>
<td>Bottle / container unauthorized</td>
<td>TESTED</td>
</tr>
<tr>
<td>BC</td>
<td>Bottle leaked in shipment, quantity not sufficient to test</td>
<td>FATAL</td>
</tr>
<tr>
<td>BD</td>
<td>Bottle - broken seal</td>
<td>TESTED</td>
</tr>
<tr>
<td>BE</td>
<td>Bottle - no seal</td>
<td>TESTED</td>
</tr>
<tr>
<td>BF</td>
<td>Bottle - two seals, no explanation</td>
<td>TESTED</td>
</tr>
<tr>
<td>BU</td>
<td>Bottle empty</td>
<td>FATAL</td>
</tr>
<tr>
<td>BY</td>
<td>Bottle discrepancy - NOT TESTED</td>
<td>FATAL</td>
</tr>
<tr>
<td>BZ</td>
<td>Bottle discrepancy - TESTED</td>
<td>TESTED</td>
</tr>
<tr>
<td>FA</td>
<td>Form-UIC or base/area code discrepant*/differs from bottle</td>
<td>TESTED</td>
</tr>
<tr>
<td>FH</td>
<td>Form-date specimen collected discrepant*/differs from bottle</td>
<td>TESTED</td>
</tr>
<tr>
<td>FL</td>
<td>Form not received</td>
<td>TESTED</td>
</tr>
<tr>
<td>FM</td>
<td>Form received separately from bottle</td>
<td>TESTED</td>
</tr>
<tr>
<td>FN</td>
<td>Form chain of custody entries (Blocks 12a-d) discrepant*</td>
<td>TESTED</td>
</tr>
<tr>
<td>FP</td>
<td>Form did not list specimen, bottle received</td>
<td>TESTED</td>
</tr>
<tr>
<td>FR</td>
<td>Form on two pieces of paper - no linking identifiers</td>
<td>TESTED</td>
</tr>
<tr>
<td>FT</td>
<td>Form - SSN discrepant*</td>
<td>TESTED</td>
</tr>
<tr>
<td>GG</td>
<td>Form listed specimen, no bottle received</td>
<td>FATAL</td>
</tr>
<tr>
<td>GP</td>
<td>Form or other document shows service member's name/signature</td>
<td>TESTED</td>
</tr>
<tr>
<td>GR</td>
<td>Form marked void for received specimen</td>
<td>TESTED</td>
</tr>
<tr>
<td>GY</td>
<td>Form discrepancy - NOT TESTED</td>
<td>FATAL</td>
</tr>
<tr>
<td>GZ</td>
<td>Form discrepancy - TESTED</td>
<td>TESTED</td>
</tr>
<tr>
<td>LA</td>
<td>Label missing/blank</td>
<td>TESTED</td>
</tr>
<tr>
<td>LD</td>
<td>Label over label</td>
<td>TESTED</td>
</tr>
<tr>
<td>LF</td>
<td>Label - collection date discrepant*</td>
<td>TESTED</td>
</tr>
<tr>
<td>LJ</td>
<td>Label - member initials discrepant*</td>
<td>TESTED</td>
</tr>
<tr>
<td>LL</td>
<td>Label - collector or observer's initials discrepant*</td>
<td>TESTED</td>
</tr>
<tr>
<td>LN</td>
<td>Label - SSN does not match form</td>
<td>TESTED</td>
</tr>
<tr>
<td>LQ</td>
<td>Label has service member's name/signature</td>
<td>TESTED</td>
</tr>
<tr>
<td>LX</td>
<td>Label - SSN discrepant*</td>
<td>TESTED</td>
</tr>
<tr>
<td>LY</td>
<td>Label discrepancy - NOT TESTED</td>
<td>FATAL</td>
</tr>
<tr>
<td>LZ</td>
<td>Label discrepancy - TESTED</td>
<td>TESTED</td>
</tr>
<tr>
<td>OY</td>
<td>Laboratory technical discrepancy - NOT TESTED</td>
<td>FATAL</td>
</tr>
<tr>
<td>OZ</td>
<td>Laboratory technical discrepancy - TESTED</td>
<td>TESTED</td>
</tr>
<tr>
<td>PA</td>
<td>Package - no seal</td>
<td>TESTED</td>
</tr>
<tr>
<td>PB</td>
<td>Package - broken seal</td>
<td>TESTED</td>
</tr>
<tr>
<td>PD</td>
<td>Package missing signature/date</td>
<td>TESTED</td>
</tr>
<tr>
<td>PY</td>
<td>Package discrepancy - NOT TESTED</td>
<td>FATAL</td>
</tr>
<tr>
<td>PZ</td>
<td>Package discrepancy - TESTED</td>
<td>TESTED</td>
</tr>
<tr>
<td>SA</td>
<td>Specimen appears to be adulterated - NOT TESTED</td>
<td>FATAL</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
<td>Result</td>
</tr>
<tr>
<td>------</td>
<td>------------------------------------------</td>
<td>---------</td>
</tr>
<tr>
<td>SB</td>
<td>Specimen appears to be adulterated</td>
<td>TESTED</td>
</tr>
<tr>
<td>SC</td>
<td>Specimen quantity not sufficient to test</td>
<td>FATAL</td>
</tr>
<tr>
<td>SE</td>
<td>Specimen volume &lt; 30 mL</td>
<td>TESTED</td>
</tr>
<tr>
<td>SY</td>
<td>Specimen discrepancy - NOT TESTED</td>
<td>FATAL</td>
</tr>
<tr>
<td>SZ</td>
<td>Specimen discrepancy - TESTED</td>
<td>TESTED</td>
</tr>
</tbody>
</table>
IFTDTL RESULTS

Step 1: Click on Results Portal

Step 2: Click on Results by UIC (RUC)
Step 3: Fill in UIC/RUC only numbers, then begin and end date range, and finally, maximum rows.

Step 4: Run Report.
<table>
<thead>
<tr>
<th>BAC</th>
<th>Spec Code UIC</th>
<th>Lab Call Date Doc #</th>
<th>Form #</th>
<th>Spec ID</th>
<th>LAI</th>
<th>Test Bank Discrepancies Drugs Tested</th>
<th>Result Call</th>
<th>Report Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>UBMU</td>
<td>M</td>
<td>12244</td>
<td>2008-09-30</td>
<td>1300</td>
<td>001</td>
<td>2012-01-01</td>
<td>ACHEOTVY</td>
<td>NO</td>
</tr>
<tr>
<td>UBMU</td>
<td>M</td>
<td>12244</td>
<td>2008-09-30</td>
<td>1300</td>
<td>002</td>
<td>2012-01-01</td>
<td>ACHEOTVY</td>
<td>NO</td>
</tr>
<tr>
<td>UBMU</td>
<td>M</td>
<td>12244</td>
<td>2008-09-30</td>
<td>1300</td>
<td>001</td>
<td>2012-01-01</td>
<td>ACHEOTVY</td>
<td>NO</td>
</tr>
<tr>
<td>UBMU</td>
<td>M</td>
<td>12244</td>
<td>2008-09-30</td>
<td>1300</td>
<td>006</td>
<td>2012-01-01</td>
<td>ACHEOTVY</td>
<td>NO</td>
</tr>
<tr>
<td>UBMU</td>
<td>M</td>
<td>12244</td>
<td>2008-09-30</td>
<td>1300</td>
<td>001</td>
<td>2012-01-01</td>
<td>ACHEOTVY</td>
<td>NO</td>
</tr>
<tr>
<td>UBMU</td>
<td>M</td>
<td>12244</td>
<td>2008-09-30</td>
<td>1300</td>
<td>002</td>
<td>2012-01-01</td>
<td>ACHEOTVY</td>
<td>NO</td>
</tr>
<tr>
<td>UBMU</td>
<td>M</td>
<td>12244</td>
<td>2008-09-30</td>
<td>1300</td>
<td>001</td>
<td>2012-01-01</td>
<td>ACHEOTVY</td>
<td>NO</td>
</tr>
<tr>
<td>UBMU</td>
<td>M</td>
<td>12244</td>
<td>2008-09-30</td>
<td>1300</td>
<td>002</td>
<td>2012-01-01</td>
<td>ACHEOTVY</td>
<td>NO</td>
</tr>
<tr>
<td>UBMU</td>
<td>M</td>
<td>12244</td>
<td>2008-09-30</td>
<td>1300</td>
<td>001</td>
<td>2012-01-01</td>
<td>ACHEOTVY</td>
<td>NO</td>
</tr>
<tr>
<td>UBMU</td>
<td>M</td>
<td>12244</td>
<td>2008-09-30</td>
<td>1300</td>
<td>002</td>
<td>2012-01-01</td>
<td>ACHEOTVY</td>
<td>NO</td>
</tr>
<tr>
<td>UBMU</td>
<td>M</td>
<td>12244</td>
<td>2008-09-30</td>
<td>1300</td>
<td>001</td>
<td>2012-01-01</td>
<td>ACHEOTVY</td>
<td>NO</td>
</tr>
</tbody>
</table>

Example of fatal discrepancy results:

- **Unstable sample highlighted in yellow due to Fatal discrepancy code (GC)**
<table>
<thead>
<tr>
<th>Sample</th>
<th>Result</th>
<th>Date</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>USMC</td>
<td>POSITIVE</td>
<td>03-APR-15</td>
<td>N/A</td>
</tr>
<tr>
<td>USMC</td>
<td>POSITIVE</td>
<td>03-APR-15</td>
<td>N/A</td>
</tr>
<tr>
<td>USMC</td>
<td>POSITIVE</td>
<td>03-APR-15</td>
<td>N/A</td>
</tr>
<tr>
<td>USMC</td>
<td>POSITIVE</td>
<td>03-APR-15</td>
<td>N/A</td>
</tr>
<tr>
<td>USMC</td>
<td>POSITIVE</td>
<td>03-APR-15</td>
<td>N/A</td>
</tr>
<tr>
<td>USMC</td>
<td>POSITIVE</td>
<td>03-APR-15</td>
<td>N/A</td>
</tr>
<tr>
<td>USMC</td>
<td>POSITIVE</td>
<td>03-APR-15</td>
<td>N/A</td>
</tr>
<tr>
<td>USMC</td>
<td>POSITIVE</td>
<td>03-APR-15</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Positive in red for THC.
The number 62 is the
mangan level.

Positive in red for
OTX and OTXOR
above the linearity of the
assay. (See FAQs)
COMMAND CONFIRMATION

The legality or illegality of drug presence in a Marine’s urine must be determined by the commander. Using all available information, including IFTDTL results, the Medical Officer’s review of medical and dental records, the Service Record Book, and DD Form 2624 information, the commander shall make one of the following determinations.

- The Marine is an illegal drug abuser
  - All commanders shall process for separation.
  - A drug related incident or wrongful use of a substance.
  - All confirmed incidents are recorded in OQR or SRB.

- The Marine is not an illegal drug abuser
  - Involved an administrative error, i.e., documentation, chain-of-custody.
  - Prescribed medication.
  - No administrative or disciplinary action taken or documentation retained.

The commander provides results of every command confirmation, via memo, to the installation DDRC/SACC.
# USE OF DRUG URINALYSIS RESULTS

**FROM DOD CERTIFIED DRUG LABS**

<table>
<thead>
<tr>
<th></th>
<th>Usable in disciplinary proceedings</th>
<th>Usable as basis for separation</th>
<th>Usable for characterization of service</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Search or Seizure</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-member’s consent</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
</tr>
<tr>
<td>-probable cause</td>
<td>YES</td>
<td>YES</td>
<td></td>
</tr>
<tr>
<td><strong>Inspection</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-random sample</td>
<td>YES</td>
<td>YES</td>
<td></td>
</tr>
<tr>
<td>-unit sweep</td>
<td>YES</td>
<td>YES</td>
<td></td>
</tr>
<tr>
<td><strong>Medical</strong> – general</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diagnostic purposes</td>
<td>YES*</td>
<td>YES</td>
<td>YES*</td>
</tr>
<tr>
<td><strong>Fitness for duty</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-command directed</td>
<td>NO</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>-competence for duty</td>
<td>NO</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>-mishap/safety investigation</td>
<td>NO</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td><strong>Service directed</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-treatment facility staff</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
</tr>
<tr>
<td>(military)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-alcohol rehab testing</td>
<td>NO</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>-brigs</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
</tr>
<tr>
<td>-entrance testing</td>
<td>NO</td>
<td>YES</td>
<td>NO**</td>
</tr>
<tr>
<td>-accession training pipeline</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
</tr>
</tbody>
</table>

*All urine samples must be confirmed positive at a DoD certified lab by GC/MS.*

**Yes for reservists recalled to active duty (except DEP participants).**

---

*Member’s consent and probable cause are both necessary to use results in disciplinary proceedings.*

**Unit sweep and random sample are both necessary to use results for separation and characterization of service.*
Urinalysis Collection Materials

The items below should be obtained through the supply system to ensure they comply with domestic and international mail carrier regulations.

a. Shipping Boxes

<table>
<thead>
<tr>
<th>Stock Number</th>
<th>U/I</th>
<th>Size</th>
<th>Bottle Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>6640-00-165-5778</td>
<td>10</td>
<td>8&quot;X3.5&quot;X6&quot;</td>
<td>12 bottles</td>
</tr>
<tr>
<td>(*) 8115-00-290-5494</td>
<td>25</td>
<td>8&quot;X5&quot;X4.5&quot;</td>
<td>for 9 bottles</td>
</tr>
<tr>
<td>(*) 8115-00-290-3365</td>
<td>25</td>
<td>8&quot;X4&quot;X4&quot;</td>
<td>for 6 bottles</td>
</tr>
</tbody>
</table>

(*) containers do not include bottles or separators

b. Mailing Pouches

<table>
<thead>
<tr>
<th>Stock Number</th>
<th>Item</th>
<th>Size</th>
<th>Used for</th>
</tr>
</thead>
<tbody>
<tr>
<td>6530-01-304-9762</td>
<td>mailing pouch</td>
<td>10.5&quot;X15&quot;</td>
<td>12 bottle box mailer</td>
</tr>
</tbody>
</table>

c. Absorbent pads for secondary container bags or mailing pouches:

<table>
<thead>
<tr>
<th>Stock Number</th>
<th>Item</th>
<th>Size</th>
<th>Used for</th>
</tr>
</thead>
<tbody>
<tr>
<td>6530-01-304-9754</td>
<td>pouch, liquid absorbent</td>
<td>5&quot;X5&quot;</td>
<td>single bottle or mailer</td>
</tr>
</tbody>
</table>

d. Stock Number Item

6530-00-NIB-0121, female specimen cup

d. Stock Number Item

7690-01-290-5172/TRL-2N, Tamper resistant tape
### EXAMPLE 1: Samples mailed to NDSL Great Lakes by the UPC immediately after collection, with no intermediate transfer of custody.
<table>
<thead>
<tr>
<th>Date</th>
<th>Released By</th>
<th>Received By</th>
<th>Purpose of Transfer</th>
</tr>
</thead>
<tbody>
<tr>
<td>20150227</td>
<td><strong>James Jones</strong></td>
<td></td>
<td>Hand delivered to Tripler FTDTL</td>
</tr>
</tbody>
</table>

(3) Example 1 (a): Sample hand delivered to Tripler FTDTL by the UPC immediately after collection.
### EXAMPLE 2: Samples mailed to NDSL Great Lakes by the SACO with transfer of custody from UPC to SACO.
Example 3: Samples mailed to NDSL Great Lakes by the UPC after storage in UPC locker by the UPC.
<table>
<thead>
<tr>
<th>a. DATE (YMD)</th>
<th>b. RELEASED BY</th>
<th>c. RECEIVED BY</th>
<th>d. PURPOSE OF TRANSFER</th>
</tr>
</thead>
<tbody>
<tr>
<td>[1]</td>
<td>SIGNATURE JAMES JONES</td>
<td>SIGNATURE</td>
<td>TEMPORARY SECURED STORAGE</td>
</tr>
<tr>
<td>2015/03/23</td>
<td>NAME SGT JAMES JONES</td>
<td>NAME UPC LOCKER</td>
<td></td>
</tr>
<tr>
<td>[2]</td>
<td>SIGNATURE</td>
<td>SIGNATURE</td>
<td>RETRIEVE FROM SECURED STORAGE</td>
</tr>
<tr>
<td>2015/03/24</td>
<td>NAME UPC LOCKER</td>
<td>NAME SGT JAMES JONES</td>
<td></td>
</tr>
<tr>
<td>[3]</td>
<td>SIGNATURE JAMES JONES</td>
<td>SIGNATURE</td>
<td>TRANSFER CUSTODY/PREPARE FOR SHIPMENT</td>
</tr>
<tr>
<td>2015/03/24</td>
<td>NAME SGT JAMES JONES</td>
<td>NAME GYSGT JACQUES TRADES</td>
<td></td>
</tr>
<tr>
<td>[4]</td>
<td>SIGNATURE</td>
<td>SIGNATURE</td>
<td>SHIPMENT TO NDSL GLKS</td>
</tr>
<tr>
<td>2015/03/25</td>
<td>NAME GYSGT JACQUES TRADES</td>
<td>NAME</td>
<td></td>
</tr>
</tbody>
</table>

Example 4: Samples mailed to NDSL GLKS by the SACO after storage in UPC Locker by UPC, retrieved from storage by the UPC and then transfer of custody from the UPC to the SACO.
### EXAMPLE 5: Properly performed forensic correction for the EDIPI number of specimen #007. The original EDIPI number is still readable (has only a single line through it using a black ink pen), and the correction is initialed and dated.
<table>
<thead>
<tr>
<th>Date of Collection T/M/D/Y</th>
<th>Batch And Specimen #</th>
<th>Tested Members Rank, Printed Name, SSN</th>
<th>TPI</th>
<th>Observer’s Printed Name and Signature</th>
<th>Comments and Disposition</th>
</tr>
</thead>
<tbody>
<tr>
<td>08/05 03/02/2015</td>
<td>0001 001</td>
<td>MSGT BANNER, DAVID R. 7189012849</td>
<td>IR</td>
<td>Ivan Hard</td>
<td></td>
</tr>
<tr>
<td>08/05 03/02/2015</td>
<td>0001 002</td>
<td>GYSG BROWNE, JAMES H. 5131540573</td>
<td>IR</td>
<td>David Jones</td>
<td>SEE MEDICAL RECORDS</td>
</tr>
<tr>
<td>08/10 03/02/2015</td>
<td>0001 003</td>
<td>SGT CANUTE, JOSE T. 4381731976</td>
<td>IR</td>
<td>Mike Frazier</td>
<td></td>
</tr>
<tr>
<td>08/15 03/02/2015</td>
<td>0001 004</td>
<td>SGT DECKER, RONALD U. 3213891212</td>
<td>IR</td>
<td>Ivan Hard</td>
<td></td>
</tr>
<tr>
<td>08/20 03/02/2015</td>
<td>0001 005</td>
<td>GYSG HIGH</td>
<td></td>
<td>Mike Frazier</td>
<td></td>
</tr>
<tr>
<td>08/25 03/02/2015</td>
<td>0001 006</td>
<td>CPL JAMES, JESS J. 2991903404</td>
<td>IR</td>
<td>Mike Frazier</td>
<td></td>
</tr>
<tr>
<td>08/25 03/02/2015</td>
<td>0001 007</td>
<td>SGT JOHNSON, ERIC J. 4381413026</td>
<td>IR</td>
<td>Mike Frazier</td>
<td>NOT AVAILABLE RETURN 15 MAR</td>
</tr>
<tr>
<td>08/30 03/02/2015</td>
<td>0001 008</td>
<td>MSGT KEESHAN, ROBERT F. 6901507677</td>
<td>IR</td>
<td>Ivan Hard</td>
<td></td>
</tr>
<tr>
<td>08/35 03/02/2015</td>
<td>0001 009</td>
<td>SGT KIRK, JAMES D. 3337040131</td>
<td>IR</td>
<td>David Jones</td>
<td></td>
</tr>
<tr>
<td>08/40 03/02/2015</td>
<td>0001 010</td>
<td>CPL LAWRENCE, JASON K. 2651615735</td>
<td>IR</td>
<td>Mike Frazier</td>
<td>SWIM SNEEZED</td>
</tr>
<tr>
<td>08/45 03/02/2015</td>
<td>0001 011</td>
<td>SGT MOORE, DON I. 4181119451</td>
<td>IR</td>
<td>Ivan Hard</td>
<td></td>
</tr>
<tr>
<td>09/00 03/02/2015</td>
<td>0001 012</td>
<td>SSGT MORTON, ANDERSON O. 1559523419</td>
<td>IR</td>
<td>David Jones</td>
<td></td>
</tr>
<tr>
<td>Specimen Number</td>
<td>Service Member's ID Number (CAC)</td>
<td>Test Basis</td>
<td>Test Info</td>
<td>Accession Number</td>
<td></td>
</tr>
<tr>
<td>-----------------</td>
<td>---------------------------------</td>
<td>------------</td>
<td>----------</td>
<td>-----------------</td>
<td></td>
</tr>
<tr>
<td>001</td>
<td>3476027551</td>
<td>IR</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>002</td>
<td>4381731976</td>
<td>IR</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>003</td>
<td>1681684285</td>
<td>IR</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>004</td>
<td>7266418799</td>
<td>IR</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>005</td>
<td>2991903404</td>
<td>IR</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>006</td>
<td>4315793797</td>
<td>IR</td>
<td></td>
<td></td>
<td></td>
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<tr>
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**Example 7:** Properly performed forensic correction for an individual who did not provide a sample in specimen #007. A single line is drawn through the middle of the erroneous line in block 6 to across block 7 and the correction is initialed and dated.
Example of Notification for Testing

Marine Corps Drug Testing Program
Testing Subjects
Notification Copy

<table>
<thead>
<tr>
<th>Rank</th>
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<th>Organization</th>
<th>Premise</th>
<th>M/F</th>
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</tbody>
</table>

**EXAMPLE 10:** Working Copy with Due back and Rationale for an individual.
URINALYSIS BRIEF SHEET

The Observer will:

1. Take positive control of the Marines and only observe one Marine at a time.
2. Ensure that the bottle is in plain view at all times and escort the individual to the collection site.
3. The Observer must position himself/herself to watch the urine leave the body and enter the collection bottle.
4. Observe the individual tighten the lid on the bottle.
5. Escort the individual to the coordinator ensuring that the bottle is in plain view at all times.
6. Print and sign on the Unit Ledger after the individual you observed signs giving custody to the coordinator.

The Coordinator will:

1. Take the I.D. card and match it against the paper work to confirm identity of the individual.
2. Issue the bottle and have the individual check to make sure there is nothing inside the bottle. **Do not allow the individual to blow inside or put anything in the bottle.**
3. When the individual and observer return have only one person at the table at a time.
4. Ensure that there is at least 30 ml of sample in the bottle.
5. Make sure the individual checks his/her name and DoD ID number on the ledger and label then sign the ledger.
6. The individual will then print his/her initials on the label and red tamper proof tape ensuring that they match, and then the coordinator will initial the label.
7. Coordinator will have the individual put the label and red tape on the bottle, and then take the bottle and put it in the correct box.
8. Have the Observer sign the ledger by the individual’s name.
9. Return the ID card to the individual and ensure the bottle is placed in the box.
10. At **no time** will the coordinator let the filled bottles out of his possession until he turns it over to the SACO or shipped to the drug screening lab.

__________________________________________________________  ____________  ___________
Coordinator Rank/name (print)       Signature       Date

__________________________________________________________  ____________  ___________
Observer Rank/name (print)         Signature       Date

__________________________________________________________  ____________  ___________
Observer Rank/name (print)         Signature       Date

Batch # ____________ to ____________

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Points of Contact

**HQMC (MFCP-1):**
Headquarters, U.S. Marine Corps
Manpower & Reserve Affairs
3280 Russell Road
Quantico, Va. 22134-5103
(703) 784-9526/9527  DSN:278-9526/9527

**AFMES:**
Armed Forces Medical Examiner System
Building 115, Purple Heart Drive
Dover AFB, DE 19902
Phone: (302) 346-8724  DSN:366-8724  FAX: (302) 346-8822

**NDSL JAX:**
Navy Drug Screening Laboratory,
P.O. Box 113, Bldg. H-2033,
Jacksonville, FL 32212
dljax@med.navy.mil
Phone: (904) 542-7755  EXT. 130 M-F 0600-1800 (EST)
FAX: 904-542-7761

**NDSL GL:**
Navy Drug Screening Laboratory
2500 Rodgers St, Bldg. 5501
Great Lakes, IL 60088-2952
Phone: (847) 688-2045 DSN: 792-2045 M-F 0830-1700 (EST)

**TRIPLER FTDTL:**
Tripler Army Medical Center
Forensic Toxicology Drug Testing Laboratory
1 Jarrett White Road
Tripler Army Medical Center, HI 96859-5000
EMAIL: tamcinfo@ftdtdldata.amedd.army.mil
FAX: (808) 834-3609, DSN 315-433-3609
Litigation Support: (808) 433-1671, DSN 315-433-1671
Main Lab: (808) 433-5176, DSN 315-433-5176
Frequently Asked Questions

1. How are the samples processed? Regulated forensic drug testing laboratories employ an immunoassay (IA) test to quickly distinguish between two types of specimens: those which are negative and those which are presumptive positive. The negative specimens are reported negative while the presumptive positives go on to further testing. In the DoD labs, the next level of testing is a repeat IA under more stringent administrative conditions. If the second test upholds the presumptive positive result obtained on the first test, then the lab is required to perform a confirmatory test by gas chromatography/mass spectrometry (GC/MS), which will determine beyond a doubt whether the presumptive positive specimen is truly positive and what the drug's concentration is. This combination of three tests employing two methodologies based on different chemical principles is called multi-modal testing and when coupled with the requirement to use a separate aliquot of urine for each test, assures an error-free result. For a sample to be reported as positive, it must be at or above the cutoff level in all three independent tests. A sample is reported as negative if it is below a cutoff value in any of the three tests.

2. What are the drug cutoffs at the laboratory? A specimen is positive when its gas chromatography/mass spectrometry or (GC-MS) confirmation test result is equal to or greater than the cutoff concentration. The DoD guidelines include the following confirmatory test cutoffs for the specified drug/metabolites:

<table>
<thead>
<tr>
<th>Drug/Drug metabolite</th>
<th>GC/MS Cutoff Level (ng/mL)</th>
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<tbody>
<tr>
<td>Marijuana metabolite (THC)</td>
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</tr>
<tr>
<td>Cocaine metabolite (benzoylecgonine or BZE)</td>
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<tr>
<td>Opiates:</td>
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</tr>
<tr>
<td>Morphine (MOR)</td>
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</tr>
<tr>
<td>Codeine (COD)</td>
<td>2000</td>
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<tr>
<td>Oxycodone (OXYC)</td>
<td>100</td>
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<tr>
<td>Oxymorphone (OXYM)</td>
<td>100</td>
</tr>
<tr>
<td>Hydrocodone (HYDC)</td>
<td>100</td>
</tr>
<tr>
<td>Hydromorphone (HYDM)</td>
<td>100</td>
</tr>
</tbody>
</table>
Heroin metabolite (6-acetylmorphine or 6-AM)  10

Amphetamines:
  d-Amphetamine      100
  d-Methamphetamine  100
  methylenedioxymethamphetamine (MDMA)  500
  methylenedioxyamphetamine (MDA)     500
Benzodiazepines (BZD):
  Alphahydroxy-Alprazolam (AHAL)   100
  Lorazepam (LORA)                100
  Nordiazepam (NORD)     100
  Oxazepam (OXAZ)                100
  Temazepam (TEMA)     100
Synthetic Cannabinoids (SPICE)          10

3. Can products that contain ephedrine, pseudoephedrine, ephedra, or phenylpropanolamine cause a positive result for amphetamines?  No.

4. Can bodybuilding supplements containing (DMAA) and similar nutritional supplements cause a positive result? A supplement is not a concern from a urinalysis perspective when it is sold by a licensed vendor, i.e., MCX or AAFES. The anorectic compound dimethylamine (DMAA) from these supplements can cause a positive screen (immunoassay) result but will be negative on the much more specific GC-MS confirmation test. A negative GC-MS test means the sample will be reported as negative for amphetamine and/or methamphetamine.

5. Will any OTC drugs produce a positive test result? Are there medications that can cause false positives? Over-the-counter drugs sold in the US will not cause a positive test result. Certain prescription medications may cause a positive result. For example a person taking Adderall® may test positive for d-amphetamine and a person taking Percocet® may test positive for oxycodone and oxymorphone. There are several protections built-in to the system to ensure accurate results.
Forensic chemists at the Navy Drug Screening Laboratory are required to assist the Commands whose service member tested positive in determining if the positive result may have been due to the use of a prescribed medication. Contact the laboratory for answers to specific questions.

6. Does the DoD laboratory test every sample received? Virtually, every sample that is received is tested. The only samples that are not tested are those that are received with certain defects in the chain of custody or sample collection. These untestable samples are reported to the submitting command via a discrepancy code.

7. Is it true that all samples from a local batch are pooled and tested, or are all samples processed individually? All samples are tested individually. A minimum of three separate tests must be positive for the result to be positive. The samples are always poured. There is never anything placed into the original sample bottle.

8. Can I get test result over the telephone? Test results may not be given over the telephone. This protects the confidentiality of all results. Results can be retrieved via IFTDTL website. Steroid results will be sent directly to the command via HQMC (MFCP-1). Contact your local Drug Demand Reduction Coordinator for further guidance.

9. What do the quantitative values (nanogram level) that appear after the drug on the message mean? These values indicate the amount of drug detected by GC/MS per milliliter (ml) of urine. These values can range from the cutoff to many times higher than the cutoff.

10. What does "LOL" after the value mean? A value may be flagged as LOL which indicates that it exceeded the experimentally determined linearity of the
assay. This statement means that the numerical value observed fell above the highest value for which precision limits have been established. The identification of the drug is not in question; however, the quantitated value may be less precise than a value in the established range.

11. How can I tell which laboratory to contact for assistance? The Laboratory Accession Number is an eleven digit number that begins with a "G" for Great Lakes, "J" for Jacksonville, and “T” for Tripler. See the Points of Contact page for the specific laboratory and the appropriate contact number for assistance.

12. How do I request expert witness testimony? All requests for expert testimony and affidavits must be originated by the submitting Command. This is done through the Trial Counsel who also arranges that any requests from the Defense Counsel are forwarded. Discovery requests must be routed through trial counsel. It is a matter of policy that only one opinion will be offered on a matter of record. This means that the Laboratory will provide one expert witness who will consult with both the Trial Counsel and Defense Counsel in an unbiased manner. Requests for an expert witness must be made by official command correspondence. A go-by for the letter is located at http://www.nmcphc.med.navy.mil/Field_Activities/. In the middle of the page click on Navy Customer Request Letter. Do not include the members name or SSN on the request.

13. Who do I call if I have questions on results or interpretation of results? The Laboratory has several forensic chemists who will assist in interpreting the document package supplied upon request for court martial trial purposes or the results that are obtained by message or by the Internet Web Portal. Please note that results cannot be provided over the telephone. See the Points of Contact page for interpretation of results.
14. Who do I contact for answers to questions about collection procedures, retest permission, steroid testing, special testing and etc? These questions should be directed to your local Drug Demand Reduction Coordinator or Headquarters Marine Corps (MFCP-1) Drug Demand Reduction Program (703) 784-9526/9527

15. What do I do for a command investigation involving a prescription? The Service Member’s medical record (to include dental) should be reviewed for prescriptions and the Service Member should be interviewed to determine if there has been prescription medication obtained outside of the military system.

16. What failsafe procedures are in the drug testing system? The boxes containing the urine specimens are inspected for evidence of tampering. After inspecting seals, the bottles are inventoried and checked against the enclosed chain-of-custody document, tamper resistant tape is intact, and information on the bottle label is the same as on the chain-of-custody document and checked to ensure that information on the bottle label is complete. If any discrepancies are discovered, the discrepancies are documented.

Each specimen bottle is assigned a unique Laboratory Accession Number (LAN). The LAN is placed on the chain-of-custody document, and affixed to each bottle. Each specimen is retained in the Accessioning area until it is approved for disposal. Only portions of urine (aliquots) are taken outside this room for testing. Aliquots are poured from the original bottle on separate occasions, so that separate tests can be performed. For every test, a new aliquot of urine is used. The EDIPI and LAN are scanned and the results are compared by computer to ensure that the correct bottle is used. The computer then prints a duplicate human readable bar-coded LAN label that is affixed to the receiver tube into which the urine is poured. Nothing is ever added to or dipped into the original bottle and aliquots are discarded after completing each test. An extra test (Re-Screen), on a fresh aliquot from the original bottle, is conducted to eliminate the possibility of carryover and as a quality control measure.

Each specimen drug test result is checked independently at least four times by employees in the laboratory. The final results are not released until two
laboratory certifying officials review all of the testing data. Quality control samples (both negative and positive) are inserted into every batch test with external and internal QC controls inserted in the racks along with other samples, with no indication that they are controls. Chain-of-custody procedures are strictly followed at the laboratory. When a technician receives the aliquots, he or she is responsible for maintaining physical control over them.

The technical and administrative performance of the laboratory is continually and rigorously monitored by the Armed Forces Medical Examiner System (AFMES) Quality Control Program. The AFMES program not only stresses analytical aspects, but also detects Support Services or administrative errors in the system. There is no margin of error allowed for a false positive (i.e. a specimen reported positive although it did not, in fact, contain a drug). The Laboratory is inspected three times a year by a team of inspectors including the civilian experts from First Advantage Corporation, AFMES, the Navy Drug Testing Program Manager, and BUMED JAG. In addition the laboratories are inspected once annually by the Dept. of Defense. Commanding Officers have the discretion of having their positive member samples retested; in over 14,000 retests, the original findings were confirmed. Lastly, Commanding Officers retain the latitude to consider mitigating circumstances.

17. Can the urine drug test results determine how the drug was taken? No, the analysis cannot determine the source or form of the drug taken.

18. Can a positive urine drug result provide evidence of intoxication? Certain drugs which are detected in the urine may indicate recent use. However, urine drug tests cannot determine whether a person was under the influence of the drug at the time the sample was taken, determine whether the individual is addicted to the drug(s), or distinguish between one-time or regular use.
19. Does a unit sweep, premise code IU, count towards the 10% required each month? It is a commander’s responsibility to combat alcohol and drug abuse by utilizing deterrent measures such as establishing an aggressive random urinalysis testing. Under the Drug Testing Program, no Marine shall be excluded from current testing, regardless of proximity of previous testing. One of the duties of the SACO is to ensure screening of all Marines annually, regardless of rank, for the presence of drugs. Additionally, to testing all Marines annually unit commanders direct the SACO to conduct a monthly urinalysis of at least ten percent of the population under premise code IR.

20. Will products with “hemp seeds” such as *Strong and Kind®* bars or products with Hemp seed oil produce a positive test result? No. The Marine Corps currently has no restrictions on the use of hemp-based products. Hemp originates from “fiber-type” Marijuana (MJ) as opposed to “drug-type” MJ. Fiber-type has only 0.5-1.5% (delta)-9-tetrahydrocannabinol (THC) as opposed to the 3-22% found in drug type. Any product that contains any amount of THC is a Schedule I controlled substance by DEA standards. Therefore, ingestion of hemp products legally sold in the United States will not produce a positive THC drug result. The concentration level required for a positive test for THC is 50ng ml with initial immunoassay testing and 15ng ml with confirmatory (GC/MS) testing.

21. What are the procedures when a Marine cannot provide a specimen at the given time or less than 30 mls? When a Marine cannot provide a specimen at the given time, have the Marine return back to the UPC with their bottle. The bottle will be placed in the empty bottle box slot with the identification card, (figure 2, pg. 21), (figure 2, pg. 26) and have the Marine remain in the controlled area to sip on water until a specimen can be provided. Submit the specimen to the Laboratory even if less than 30 mls, however do not submit an empty bottle.