URINE DRUG TESTING (UDT) PROTOCOL

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Summary: This protocol sets out the requirements for the collection of urine specimens for the purpose of Urine Drug Testing.

Applies to:

- Medical practitioners or medical students with conditions on their registration requiring they attend Urine Drug Testing.
- Collection Supervisors.

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Owner: Medical Council of NSW

Related legislation, Awards, Policy and Agreements

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Urine Drug Testing (UDT) Protocol

1. Introduction

Urine drug testing (UDT) is a monitoring and rehabilitation tool utilised by the Medical Council of NSW (the Council). UDT may be a requirement for doctors or medical students with a history of substance abuse or about whom concerns have been identified regarding possible self administration of prescribed or illicit substances.

Participation in the Council's UDT program is a consequence of a condition imposed on a medical practitioner or student's registration as the result of a hearing, inquiry or at the time of registration by AHPRA. Overall responsibility for decisions regarding the collection and testing protocol, and progress through the program, rests with the Council.

The Council is aware that collection and testing is inconvenient, intrusive and expensive. However, it is the only quantitative means by which the Council can be satisfied that the participant is able to continue safely in active practice or training. The paramount consideration is the protection of the health and safety of the public.

Strict compliance with all of the requirements of this protocol is necessary. Breach of a condition relating to UDT can result in the Council taking disciplinary action against the participant as well as directly affecting the participant's progress through the program.

Provided this protocol has been adhered to, negative test results are currently the best available evidence that the participant is not abusing prescribed or illicit substances. Positive test results may lead to the Council convening an Impaired Registrants Panel to inquire into the matter or taking disciplinary action.

Collection and testing must be in accordance with the Australian Standard AS/NZS 4308 (Standard) and meet its chain of custody requirements. The Council has some requirements additional to those of the Australian Standard. The Council's provider of UDT services is PaLMS (Pacific Laboratory Medicine Services) Toxicology Unit.

In accordance with this Standard, drugs routinely tested for include cannabis, opiates (morphine and codeine), cocaine, amphetamine and benzodiazepines. In addition, specimens are tested for pethidine and tramadol. In certain cases, conditions may also require specimens to be tested for additional drugs (such as zolpidem (Stilnox), propofol and fentanyl).

2. Restricted substances

2.1 Prescription medications

The participant is prohibited from self-administering any drugs detailed in Schedule 1 (of the Drug Misuse and Trafficking Act), Schedule 4D or Schedule 8 drugs (of the Poisons and Therapeutic Goods Act) unless prescribed and taken at the direction of a treating practitioner. This includes any narcotic derivatives, non-prescription compound analgesics or cold medications.

The participant must notify the Council and provide written confirmation of treatment from the treating practitioner of any:

- instance of illness or procedure/s requiring the administration of medications described above and;
- administration of drugs which has occurred in an emergency situation.

The participant must notify the Council of the above within **five business days**, or as soon as practicable in an emergency.

2.2 Other restricted substances

- When consumed in a sufficient quantity, poppy seeds may result in the presence of morphine and codeine metabolites in the participant's urine. The participant must actively avoid the consumption of any food containing poppy seeds.
- Weight loss supplements and drugs should be avoided, as they may contain amphetamines or other stimulants, and may therefore elicit a positive test result.
- Complementary supplements should be consumed with caution. The ingredients should be checked to ensure that they do not contain restricted substances. If it is not possible to determine the exact ingredients contained within supplements, then these should be avoided.

3. Critical Compliance Condition

Participants may be required to undergo UDT as a result of a Critical Compliance Condition imposed on their registration by a Medical Tribunal or Professional Standards Committee.

If a participant is subject to a Critical Compliance Condition in relation to UDT and is in breach of this protocol, the discretion which the Council may exercise is limited. The Council is required by the *Health Practitioner Regulation National Law (NSW)* (the National Law) to take the following action:

- convene proceedings pursuant to section 150 of the National Law. If the Council's delegates conducting the proceedings are satisfied that the participant has contravened the Critical Compliance Condition imposed on his or her registration, the participant will have their registration suspended until a complaint concerning the matter can be dealt with by the Medical Tribunal.

and

- refer a complaint concerning the participant's breach of the Critical Compliance Condition to the Medical Tribunal. If the Medical Tribunal is satisfied that the participant has contravened the Critical Compliance Condition, the Tribunal must order the cancellation of the participant's registration.

4. Commencing UDT

Within **seven business days** of a condition requiring UDT being imposed, the participant is required to advise the Council of the proposed arrangements for specimen collection, including location and contact details.

4.1 Collection Options

There are three options available for the supervised collection of specimens:

- Supervised collection at a PaLMS collection facility (Refer to Section 11).

- Collection supervised by another Council-approved pathology provider. Other pathology collection centres are often prepared to supervise collection, and forward the specimens to PaLMS Toxicology Unit for testing. Most pathology providers will have collection kits that satisfy the Australian Standard (AS/NZS 4308).

- Collection supervised by a Council-approved supervisor (the supervisor), such as a general practitioner. The proposed supervisor should be a doctor or nurse with current Australian registration. Postage-paid collection kits will be provided by PaLMS directly to the approved supervisor on request.

Proposed alternatives to the PaLMS collection sites will only be approved once the nominated supervisor or person responsible at the alternate pathology collection centre has read and consented in writing to undertake the role of UDT supervisor in accordance with the requirements outlined in this protocol. The Council will communicate directly with the nominated supervisor.

In the event that the approved supervisor is temporarily not available, then the participant is responsible for securing an alternative supervisor or attending an alternative pathology collection provider (as outlined above). The alternative supervisor must be informed of the requirements of their role in accordance with this protocol. The participant is required to notify the Council within **five business days** of such an occurrence and advise the name and position of the alternative supervisor.

4.2 Collection Kits

Postage paid collection kits can be obtained by the supervisor by contacting PaLMS on telephone (02) 9887 5666. The participant will be invoiced for the collection kits by PaLMS. Kits will be sent directly to the supervisor. Under no circumstances may collection kits be supplied directly to the participant.

4.3 Use of a Pseudonym

Participants may request to use a pseudonym for testing, although their real identity must be known and verified by the supervisor at each collection. On request, the Council will approve the use of the pseudonym prior to the participant commencing UDT. If a pseudonym is used, then the participant must notify all treating practitioners and Council Appointed practitioners of the pseudonym which will appear on the results.

5. Specimen Collection

In accordance with the conditions on the participant's registration, specimen collection may occur on a thrice weekly or random basis.

5.1 Thrice-Weekly Collection

Specimen collection is conducted on Monday, Wednesday and Friday of each week. The participant cannot present on other days without prior approval from the Council.

5.2 Random Collection

Random collection involves the requirement to attend for specimen collection a minimum of 15 times in each consecutive six month period. The collection dates are determined by the Council.

Each weekday, between midnight & 5pm, participants are required to call the Council's Random Collection telephone number to ascertain whether or not they are required to attend for specimen collection on that day.

Random Collection telephone number: **1800 654 068**

6. Absence from testing

6.1 Planned absence from testing

Participants are required to advise the Council in writing at least **five business days** before any anticipated absence.

Participants are required to provide evidence of a reason for absence within **ten business days** (for example, copies of boarding passes, hotel receipts). Failure to provide evidence will result in the matter being considered by the Council, which may view the matter as a breach

of conditions requiring further action, including possible disciplinary proceedings.

6.2 Missed tests

Participants must notify the Council immediately, in writing, of any missed test, and provide an explanation. The explanation will be reviewed by the Council, which may view the matter as a breach of conditions requiring further action, including possible disciplinary proceedings.

6.3 Public Holidays

Participants are not required to provide a specimen on a public holiday. Public holidays are defined within the *Public Holidays Act 2010 (NSW)*.

7. Results

Results must be forwarded to the Council, treating medical practitioners and Council Appointed Practitioners. Participants may also request that a copy of their results be forwarded to the participant or their medical defence organisation.

7.1 Positive tests

If a positive test result is received, the participant will be required to provide a written explanation. This explanation, together with any additional information obtained from the testing laboratory, will be considered by the Council which may view the matter as a breach of conditions requiring further action, including possible disciplinary proceedings.

7.2 Dilute specimens

The Council considers a specimen to be dilute when the urine creatinine is below 2.0 mmol/L.

Dilute urine suggests that the participant has consumed a large volume of water prior to passing the urine or that there has been adulteration of the specimen after collection. This renders the test invalid as drug metabolites may be diluted to concentrations below testing detection levels.

If a dilute specimen is received, the participant will be notified and will be expected to take all necessary action to avoid further dilute specimens, including reducing fluid intake prior to testing.

Receipt of any further dilute specimens will result in the participant being required to provide a written explanation. This explanation will be reviewed by the Council, which may view the matter as a breach of conditions requiring further action, including possible disciplinary proceedings.

7.3 Specimen adulteration or substitution

The Council may request, at any time, that a test be conducted on a specimen to determine whether the specimen has been adulterated or substituted.

If a result is received indicating specimen adulteration or substitution, the participant will be required to provide a written explanation. This explanation, together with any additional information obtained from the testing laboratory, will be reviewed by the Council, which may view the matter as a breach of conditions requiring further action, including possible disciplinary proceedings.

8. Costs

As a condition of registration (rather than a diagnostic investigation), UDT is not funded by Medicare.

The participant is required to meet the cost of testing by paying PaLMS directly, and may also incur costs for supervised collection, at the discretion of the supervisor. Payment for supervised collection is to be directly negotiated between the supervisor and the participant undergoing testing.

Accounts must be paid in a timely manner to avoid suspension of testing by PaLMS. Suspension of testing for this reason may be referred to the Council, which may view the matter as a breach of conditions requiring further action, including possible disciplinary proceedings.

9. Supervision Requirements

Supervisors must be familiar with all aspects of this protocol, including the detailed specimen collection procedure, and must consent to undertaking the role of supervisor.

In undertaking the role of supervisor, the individual has a professional obligation to ensure the integrity of the collection procedure and the supervisory relationship. There must not be any personal, financial or other conflict of interest between the supervisor and the participant beyond the supervisory relationship. For example, a supervisor must not be a relative or employee of the participant.

Supervisors must maintain a permanent record of specimen collection. The record is to include the collection date, the nature of the specimen, the serial number on the specimen seal and the supervisor's signature. The participant must read and countersign this record following every collection. Copies of this record, or part thereof, must be made available to the Council on request.

It is also recommended that the participant maintains a diary which is signed by the supervisor on each occasion.

Supervisors must be prepared to notify the Council if they have any immediate concerns in relation to the participant's compliance with UDT collection.

Supervisors should contact the Council and speak to the Monitoring Program Manager if there are any queries or concerns on 02 9879 2200.

10. UDT Specimen Collection Procedure

This collection procedure is designed to ensure that urine is collected in a manner that complies with the requirements of the Australian Standard AS/NZS 4308 and that there is no opportunity for the specimen to be adulterated, substituted or diluted after collection.

It is essential that the specimen(s) and request form are under the control of the supervisor at all times. At no stage should the specimen be in the participant's custody.

10.1 Proof of Identity

The supervisor must establish that the person that presents for specimen collection is the participant nominated on the request form.

The supervisor must establish proof of identity prior to each collection by sighting photographic identification such as a drivers licence, passport or equivalent.

The collection should not proceed if identity is in doubt, and the supervisor is required to contact the Council immediately on 02 9879 2200.

10.2 Specimen Collection

10.2.1 The supervisor must:

- Check that the collection kit includes tamper-evident seals.
- Fill in the participant's information on the request form. A minimum of two identifiers is required. One of these must be the participant's name (or the approved pseudonym), and the second, in the ID field, must be the participant's six digit Council identification number (MPO number). The Council does not require the 12 digit Identifier provided by Australian Health Practitioner Regulation Agency.
- Securely place labels onto both containers. The same data (First Name, Surname, MPO number) must appear on both containers and match the request form.

10.2.2 The participant is required to remove all excess clothing (such as a coat or jacket) that may be used to conceal containers.

10.2.3 After washing his or her hands, the participant must remain in the presence of the supervisor without access to any water source, soap dispenser, cleaning agent or any other materials that might be used to compromise the integrity of the specimen.

10.2.4 The participant must provide the specimen under direct supervision. Direct supervision means the supervisor must witness the passing of the urine from the urethra to the container. This may include video supervision, where such facilities are available.

10.2.5 The participant should void into the container with the attached temperature-sensing strip.

10.2.6 Upon receiving the specimen, the supervisor shall determine that a minimum volume of 40 mL has been collected. In the event that insufficient urine is collected, an additional specimen must be collected.

10.2.7 The participant is not to flush the toilet or wash their hands until the specimen has been handed to the supervisor.

10.2.8 In the presence of the participant, the supervisor shall ensure that the specimen is secure at all times prior to being sealed and labelled. Both the participant and the supervisor should keep the specimen in view at all times prior to it being sealed and labelled.

10.3 Specimen Handling

10.3.1 Immediately after the specimen is collected, the supervisor should inspect the specimen to determine its colour and look for any indication of adulterants or diluents. The colour of the urine and any unusual finding should be noted on the request form. Unusual findings should also be noted in the supervisor's record.

10.3.2 If the integrity of the specimen cannot be established, or if it is suspected that the specimen may have been adulterated or substituted, then another specimen should be collected as soon as possible and both specimens forwarded to the laboratory for testing. These specimens must be labelled and documented appropriately.

10.3.3 The supervisor must measure the temperature of the specimen within four minutes of voiding and record the temperature on the request form.

10.3.4 The supervisor, in the presence of the participant, should divide the specimen into the two containers (each containing approximately equal volume). The supervisor should request that the participant observes the transfer of the specimen.

10.4 Documentation

10.4.1 The request form shall be completed by the supervisor and signed by the participant. The name and Council ID (MPO) number on the request form must appear identical to the entries on the specimen container.

10.4.2 The date and time of collection must be written on the request form and both the specimen containers by the supervisor.

10.4.3 The participant must observe the placement of the tamper-evident seals over the lids of the specimen containers. The tamper-evident seals must then be initialled by the participant.

10.4.4 The supervisor must enter the date and time of supervised collection into their record and sign the record. The participant must read and countersign the record.

10.5 Specimen dispatch

10.5.1 The supervisor should place the specimen containers in a biological hazard bag. The request form is placed in the outer pocket of the bag. This must then be packaged for transport by the supervisor. Supervisors may use the postage-paid collection kits provided by PaLMS. The package must be securely sealed to eliminate the possibility of tampering.

10.5.2 Specimens must be kept secure at all times until transport to the laboratory.

10.5.3 Transport to the laboratory, or postage of the kit, should be arranged as soon as possible. If there is a delay in transport, specimens should be refrigerated.

11. PaLMS Collection Sites

NS & CC Collection Site	Location	Address	Phone	Fax
Hornsby Ku-ring-gai Hospital	Near Main Entrance	Palmerston Road Hornsby NSW 2077	+61 2 9477 9537	+61 2 9477 9753
Manly Hospital	via West Wing	Darley Road Manly NSW 2095	+61 2 9976 9686	+61 2 9977 5373
Mona Vale Hospital	via Level 2	Coronation Street Mona Vale NSW 2103	+61 2 9998 0278	+61 2 9998 0574
North Shore Private Hospital	Ground floor, PaLMS Collection Suite	Westbourne Street St Leonards NSW 2065	+61 2 8425 3066	+61 2 9437 1477
Royal North Shore Hospital	Clinic 4, Level 3	Pacific Highway St Leonards NSW 2065	+61 2 9926 4118	+61 2 9926 4069

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