


Name of Policy: <u>OP –AoD Toxicology Screening</u> Policy Number: 3364-160-SD-148 Department: Psychiatry Approving Officer: Chief Executive Officer - UTMC Responsible Agent: Chair/Medical Director Department of Psychiatry Outpatient Administrative Director Department of Psychiatry Scope: OP-Clinic-Psychiatry	 Effective Date: 09/01/2020 Initial Effective Date: 02/01/2018
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy	
<input checked="" type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Reaffirmation of existing policy	

(A) Policy Statement

It is the policy that the following procedure is followed for urine drug screens and Breathalyzer tests.

(B) Purpose of Policy

To provide collection of urine specimens and administer Breathalyzer tests in a manner that demonstrates trust and respect while taking reasonable steps to prevent falsification of samples.

(C) Procedure

1. The patient will be responsible for providing a urine drug screen and Breathalyzer test as requested, which will be based on the individual’s diagnosis, progress in treatment, history of use, or at the providers discretion
2. The staff will be responsible for the following:
 - a. Explain the procedure to the patient. If necessary, provide fluids to help the patient void.
 - b. In circumstances where there are concerns of falsification of samples; to ensure the integrity of the specimen collected, program staff may maintain visual contact during the drug screen process; however, it is recognized that a client’s psychosocial and trauma history must be considered when making a decision to maintain visual contact. In those circumstances where it is considered necessary, observed urines will be implemented using the following protocol:
 - i. Program staff will be present in the room with the patient providing a sample;
 - ii. Program staff must directly watch the urine go from the patient’s body into the collection container
 - c. The therapist and psychiatrist will be notified of (+) results. Results will be held confidential; however, they may be used in therapeutic confrontation of the patient during an individual meeting.
3. Patients are required to provide a urine drug screen and Breathalyzer test on their initial visit.
4. Patients missing an appointment will be automatically drug screened and tested upon return to programming.
5. Patients are made aware of potential consequences of (+) results prior to starting treatment.
6. The therapist in collaboration with the treatment team will determine appropriate response for continued (+) results.

7. Failure to provide a drug screen will be discussed as part of the treatment team process at which time treatment options and appropriate clinical approaches will be explored. Options may include discharge of the patient from programming.

<p>Approved by:</p> <p><u>/s/</u> <u>08/26/2020</u> Richard Swaine CPA Chief Executive Officer - UTM C Date</p> <p><u>/s/</u> <u>08/10/2020</u> Cheryl McCullumsmith, MD, PhD Chair/Medical Director Department of Psychiatry Date</p> <p><u>/s/</u> <u>08/10/2020</u> Virginia York, LPC Outpatient Administrative Director Department of Psychiatry Date</p> <p><i>Review/Revision Completed By: Department of Psychiatry Administration</i></p>	<p>Review/Revision Date: 10/21/2019 02/13/2020 08/07/2020</p> <hr/> <p>Next Review Date: 08/07/2023</p>
<p>Policies Superseded by This Policy:</p>	