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Psychology

Australian Health Practitioner Regulation Agency

## Urine drug screening (UDS)

### Information and requirements for health practitioners and students

#### Introduction

This document provides information about the requirements of the National Health Practitioner Boards (National Boards) and the Australian Health Practitioner Regulation Agency (AHPRA) for urine drug screening (UDS).

The primary role of the National Boards and AHPRA is to protect the public. Further information about the role of the National Boards and AHPRA can be found at [www.ahpra.gov.au](http://www.ahpra.gov.au).

UDS is a monitoring and rehabilitative tool used by the National Boards and AHPRA to assess compliance with conditions and/or undertakings on the registration of a health practitioner or student ('registrants'). Conditions or undertakings may arise from an assessment, investigation or hearing into a registrant's health, performance or conduct, or be imposed when granting or renewing registration.

When a Board is concerned about a registrant's use, misuse or abuse of drugs or illicit substances, it may impose conditions on their registration or accept an undertaking, requiring UDS. A number of other conditions or undertakings may also apply (for example, limiting their prescription or possession of scheduled medicines, or requiring them to undergo treatment with one or more health professionals).

The National Boards and AHPRA acknowledge that participation in UDS may be inconvenient, intrusive and expensive but the Board's priority is to protect the public. UDS is currently the best means by which the Boards can be satisfied that the registrant is free of drug use and able to continue safely in practise or training. When conditions or undertakings are in place requiring a registrant to participate in UDS, the registrant is required to do so whether or not they are actually practising their profession or studying.

**The registrant is responsible for ensuring they comply fully with all conditions and/or undertakings on their registration, including those relating to UDS. They are also responsible for the cost of complying with conditions and undertakings requiring them to undergo UDS.**

Full compliance with all of the requirements specified in this document is mandatory. A breach of a condition or undertaking, including these requirements relating to UDS, may result in the National Board taking disciplinary action against the registrant. This includes, but is not limited to, circumstances when the registrant fails to provide samples when required, or produces positive UDS results.

The possible consequences of a confirmed breach of these requirements include action from a National Board to:

- increase the frequency or duration of UDS
- add testing methods, such as hair analysis, as a condition on registration
- take Immediate Action to protect the public, such as suspension of registration or imposition of more stringent conditions
- caution the registrant
- take any other action permissible under Part 8 of the National Law

The National Boards and AHPRA require the collection and testing of urine samples to be carried out in accordance with Australian Standard AS/NZS 4308:2008 "*Procedures for specimen collection and the detection and quantitation of drugs of abuse in urine*" (Australian Standard). The National Boards and AHPRA also have requirements for UDS that fall outside the scope of the Australian Standard.

The information below aims to help registrants understand the National Boards' and AHPRA's requirements for UDS and the operation of the Australian Standard. Registrants who need to undergo UDS do not need to separately familiarise themselves with the Australian Standard, and AHPRA is not able to provide copies to registrants. Anyone wishing to purchase a copy of the Australian Standard should contact Standards Australia ([www.standards.org.au](http://www.standards.org.au)).

AHPRA supports communication between registrants and their National Board. Registrants required to undergo UDS will be managed by one of AHPRA's offices, most commonly in the state or territory in which the registrant practises, studies or lives.

AHPRA will advise registrants required to undergo UDS which AHPRA office they will be managed by and will provide contact details for the compliance officer who will oversee their case.

### Drugs and substances to be tested for

The National Board will determine the particular drugs or substances that each registrant is required to be tested for, on a case by case basis.

The Australian Standard specifies that the following drugs or classes of drugs must be included in UDS:

- Amphetamine type substances
- Benzodiazepines
- Cannabis metabolites
- Cocaine metabolites
- Opiates

In addition, some providers of UDS services also include additional drugs or substances in their standard screening. This varies from one service provider to another, but may include substances such as alcohol or methadone.

A National Board may specify that only substances covered by the Australian Standard are required to be screened for. However, when necessary, the National Board may also require testing for specific substances not included in the Australian Standard. This will involve additional testing of each sample, and is likely to increase the cost of UDS to the registrant. The registrant will be informed by AHPRA of the drugs and/or substances required to be included in their UDS.

Examples of drugs that require additional testing, through UDS or other testing methods include:

- Synthetic and semi-synthetic opioids, such as fentanyl, methadone and pethidine
- Propofol
- Tramadol
- Zolpidem

Registrants undergoing UDS are required to ensure that all pathology referrals or request forms correctly state all drugs and/or substances that their samples must be tested for.

### Frequency and duration of urine drug screening

The National Board will determine the frequency at which the registrant must provide samples for UDS. Frequencies are expressed as a minimum number of screens per month, and vary from high frequency (minimum 12 screens per month) to low frequency (minimum 1 screen per month).

Registrants undergoing UDS will be informed of the minimum number of samples they are required to provide for screening each month, and the corresponding **UDS Group**. (See 'Urine drug screening groups' below).

The National Board initially determines how often screening is required, case by case. Factors considered in determining the appropriate initial screening frequency include:

- The nature of the drugs or substances concerned, for example if a registrant has been using drugs that are rapidly cleared from the body, a higher initial screening frequency will be necessary

- The severity and history of the registrant's drug or substance use, misuse or abuse
- The registrant's practice environment, and the level of risk to the public they may present if they were to practise their profession while drugs or other substances are present in their body
- The extent to which the registrant is undertaking supportive or rehabilitative treatment
- Recommendations from the registrant's treating practitioners
- Recommendations from independent health assessors
- The registrant's past history of compliance with UDS requirements (if applicable)

Registrants undergoing UDS may request that the National Board reduce the frequency of their screening. These requests will be granted only when the registrant has demonstrated a high level of compliance with their screening requirements (i.e. the registrant has provided samples for UDS at all times when required, and no drugs or substances have been detected over a significant period of time).

In deciding whether or not to grant a request to reduce the frequency of UDS, the National Board may also consider reports and opinions from the registrant's treating practitioners and independent assessors.

In most circumstances the National Board will take a 'step down' approach to reducing the frequency of a registrant's UDS. This means that as registrants continue to comply with their UDS requirements and produce negative results consistently, the National Board may reduce the frequency of screening (either of its own accord, or after a request by the registrant) until the registrant has reached the lowest frequency UDS group.

A further and final step down, when registrants are contacted directly by AHPRA five times per year to provide samples for UDS, is also available to the National Boards.

The duration of UDS that a registrant is required to undergo depends largely on their level of compliance with their screening requirements and their progress in supportive or rehabilitative treatment programs. A National Board may specify a minimum duration that a registrant is required to undergo UDS, but will not normally specify a set duration.

The National Board will review the adequacy of the current screening requirements for the registrant, and may immediately increase the registrant's frequency of UDS, or extend any minimum duration of screening, if a registrant does not comply with their UDS requirements, for example by:

- failing to provide samples when required
- providing dilute or otherwise unsuitable samples
- producing confirmed positive UDS results.

Registrants who have had their authority or endorsement in relation to certain drugs limited or revoked, and subsequently have those privileges restored, may also have their screening frequency increased. This is necessary to ensure the registrant remains free of drug use at times when drugs may have become more accessible to them.

The National Board makes the final decision about the appropriate frequency of UDS.

### **Sample collection and chain of custody**

All samples for UDS are required to be collected and handled consistent with the Australian Standard at a minimum. The simplest way for registrants undergoing UDS to make this happen is to provide their samples at a laboratory or collection centre that is accredited as complying with the requirements of the Australian Standard.

Practitioners must also ensure that samples are provided under direct observation. Where it is not possible for the practitioner to adhere to this requirement, they must make a written request to the Board seeking approval of alternate arrangements. If the sample is not provided under direct observation, all necessary measures to comply with the Australian Standard must be in place at the point of collection. This is required to ensure sample integrity and ensure it is preserved during transport and analysis (also referred to as 'chain of custody').

Depending on the state or territory in which the registrant is located, AHPRA may direct them to provide samples for UDS at one or more specific laboratories or pathology service providers that are compliant with the Australian Standard.

When the registrant is not directed to provide samples with specific laboratories or providers, they may choose any laboratory or provider that is fully compliant with the Australian Standard, and that can meet any specific additional testing required by the National Board. It is the registrant's responsibility to confirm with the laboratory or provider whether they are accredited to the requirements of the Australian Standard.

The AHPRA office in the registrant's state or territory is able to provide the names of laboratories or pathology service providers accredited to the Australian Standard. However AHPRA cannot provide advice or information about specific locations, opening hours and the cost of services.

The Australian Standard requires that a correctly completed chain of custody form must accompany each urine sample. It is the registrant's responsibility to ensure the collector completes the form, and if unsure, the registrant should verify with the collector that they have completed the chain of custody form. If the subsequent UDS report states that the chain of custody is incomplete, the registrant may be asked to provide a written explanation.

The registrant may also be asked to complete a declaration, or make a statement about any drugs, medicines or other substances they have taken recently. The registrant must provide complete and accurate information about all prescription, over the counter and complementary medications taken since last presenting for UDS.

Experience has shown National Boards and AHPRA that registrants are more likely to comply with their UDS requirements if they regularly attend one or two particular laboratories or collection centres to provide their urine samples. This also tends to ensure that results are provided to AHPRA in a more consistent and timely manner.

When, due to exceptional circumstances a registrant needs to provide a sample for UDS at a different location, or with a different laboratory or service provider, they must ensure that:

- the collection, handling and analysis of the sample is conducted in accordance with the Australian Standard
- the alternate laboratory or provider can facilitate any additional testing for specific drugs or substances that is required
- a copy of the results will be provided directly to AHPRA.

When a registrant knows in advance that they will not be able to provide samples for UDS through their normal provider, they should contact AHPRA to provide the details of the alternate arrangements they have made. This will allow AHPRA to confirm the suitability of these arrangements. When advance notice is not possible, registrants must provide AHPRA with the details of the alternate location or provider where they provided their sample within five days.

### **Registrants practising or residing in rural or remote areas**

Residing or practising in a rural or remote area is not in its own right a suitable excuse for a registrant required to undergo UDS to fail to do so.

The National Boards and AHPRA recognise that in some parts of Australia access to collection centres and pathology service providers accredited to the Australian Standard may be limited. When a registrant believes that it is impractical for them to attend for screening at an accredited provider, they must make alternate arrangements for the collection and analysis of urine samples.

Alternate arrangements for UDS will be subject to approval by the National Board. Examples of alternative collection arrangements that have been approved in the past include a local general practitioner, or medical or nursing staff at the local hospital.

In these circumstances, the registrant is responsible for making the necessary alternate arrangements for the collection of urine samples and requesting approval for this. The decision will be made by the National Board. Registrants must be aware that they may be unable to practise their profession until the National Board has approved alternate arrangements.

Failure to comply with these requirements may constitute a breach of conditions or undertakings relating to UDS, and may lead a National Board to take further disciplinary or regulatory action.

## Urine drug screening telephone number

The National Boards and AHPRA operate a randomised system for registrants undergoing UDS. Registrants are allocated a screening group from one to five and a telephone service is used to inform registrants of the specific days on which the groups are required to screen.

The requirements for registrants undergoing UDS in screening groups one to five are as follows:

1. The registrant is required to call the urine drug screening telephone number **1800 633 654** every weekday after 6.00am local time to learn if their screening group is required to provide a sample for UDS on that day. The audio message on the urine drug screening telephone service is played in a continuous cyclical manner. If a registrant calls and connects part way through the message, the registrant is required to remain on the line until the entire message is heard.
2. In some states and territories, accredited collection centres may be able to collect urine samples on weekends and public holidays. The registrant will be advised by the AHPRA office in their state or territory whether they are also required to call the urine drug screening telephone number on weekends and/or some or all designated public holidays.
3. If the registrant is required to provide a sample for UDS, they must provide it no later than 8.00pm on the same day. The National Board may vary this requirement to specify a particular time of the day by when the registrant must provide samples for UDS (this is usually done when the registrant has a history of using very short acting drugs or substances). The registrant must familiarise themselves with the opening hours of the laboratories or collection centres that they attend. Presentation for UDS after 8.00pm will be considered a 'missed test' and may constitute a breach of these requirements.
4. Samples for UDS are to be provided at accredited laboratories or collection centres that meet the collection and chain of custody requirements of the Australian Standard (refer to the section 'Sample collection and chain of custody'). For registrants located in areas where there is no access to accredited collection centres, the National Board will approve alternate sample collection arrangements on a case by case basis.
5. The results of urine drug screens are normally provided to the registrant's treating practitioner(s). The registrant is also responsible for ensuring that AHPRA is provided with a copy of all UDS results in a timely manner. AHPRA address and contact details will be provided to each registrant at the commencement of UDS.
6. The registrant is responsible for payment direct to the laboratory, collection centre or pathology service provider. This includes the cost associated with any additional testing or confirmatory testing of samples that may be required.
7. Registrants required to undergo UDS must contact the urine drug screening telephone number and provide samples for screening whether or not they are actually practising their profession or studying.

## Urine drug screening groups

The following table describes the screening requirements of the five UDS groups.

UDS GROUP	MINIMUM NUMBER OF SCREENS PER MONTH
1	12
2	8
3	4
4	2
5	1

An additional screening group (Group six) is available to National Boards when a registrant has demonstrated a high level of compliance with their UDS requirements.

Registrants allocated to Group six will be required to screen up to five times per year and are not required to call the urine drug screening telephone number every day. However, they must comply with the following requirements:

- AHPRA will randomly contact the registrant up to five times per year when a screen is required
- The registrant must provide a sample for UDS before 8.00pm on the day they are contacted
- The registrant must provide at least two reliable contact telephone numbers on which they can be contacted
- As with higher frequency screening, registrants may be required to provide a sample on weekends or public holidays (subject to the availability of screening services)
- Any application for leave is to be made as per the requirements specified below (refer to the section 'Leave of absence from screening')
- Non-compliance with these requirements, including an inability by AHPRA staff to contact the registrant on the telephone numbers they have provided, may result in the registrant's UDS frequency reverting to one of the other five groups

### **Positive urine drug screening results**

The Australian Standard specifies that, when a UDS result indicates the presence of one or more drugs or substances in the sample, further confirmatory testing is required. This confirmatory testing is conducted using Gas Chromatography – Mass Spectrometry (GC-MS).

A UDS that detects the presence of drugs or substances covered by the Australian Standard is not considered to be a positive test result until the confirmatory testing is complete. The registrant is required to authorise the confirmatory testing of the sample, and is responsible for the cost incurred.

Where the National Board has directed that testing for additional drugs or substances over and above those covered by the Australian Standard is required, confirmatory testing is usually not necessary as the additional testing is specific for the drugs or substances concerned.

Any registrant who returns a confirmed positive result may be in breach of these requirements or the conditions and/or undertakings on their registration. The registrant will be notified in writing (and in some cases also verbally) and required to explain the positive result. The National Board may require registrants to sign a Statutory Declaration to this effect.

The National Board will consider any confirmed positive result and the registrant's explanation when deciding whether to take further action.

### **Taking other drugs, medications and substances**

A number of prescription and over the counter (OTC) medications, and ingredients in some foods, may cause positive UDS results. Registrants undergoing UDS should take care to avoid these substances as they will be responsible for the cost of confirmatory testing (as described in the Australian Standard) if a positive UDS result occurs (refer to the section 'Positive urine drug screening results').

If a registrant consumes a medication or food that may affect their UDS results they must notify AHPRA as soon as possible, and no later than five days after the event.

### **Prescription medications**

It is common for registrants required to undergo UDS to also have conditions or undertakings in place that restrict them from taking medications other than those prescribed by their treating practitioners. When a registrant required to undergo UDS is also taking prescribed medication this may affect UDS results.

The National Boards and AHPRA do not seek to intervene in the treatment regimens of registrants. However for AHPRA to assess UDS results in light of any prescribed medications, registrants undergoing UDS are requested to inform AHPRA of any prescribed medications that they take, and the name of the prescriber.

## **Over the counter medications**

Registrants undergoing UDS are prohibited from using any over the counter (OTC) preparations containing narcotic derivatives such as codeine (e.g. non-prescription compound analgesics and some cough medicines) and sympathomimetics such as pseudoephedrine (contained in many cold and flu medications) unless prescribed by a treating practitioner.

If such medications are taken, the registrant must inform AHPRA as soon as possible (and no later than five days after the event), and provide written confirmation from their treating practitioner of the circumstances and medication(s) prescribed.

Care should also be exercised when taking other OTC preparations, including vitamin supplements and complementary medicines, as some may lead to positive UDS results. Weight loss supplements and medications should generally be avoided, as they may contain stimulant substances, which can elicit a positive result for amphetamine type substances.

Complementary medicines 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 any medicines, then they should be avoided.

## **Poppy seeds**

Registrants undergoing UDS must not consume any food containing poppy seeds, as these can contain small amounts of morphine, which may trigger a positive result for opiates. Poppy seeds are found in a range of foods such as muffins, cakes, breads and crisp bread.

A UDS showing a positive result for opiates, in circumstances where AHPRA has not been informed that medication containing opiates has been prescribed, will require confirmatory testing as described in the Australian Standard.

The confirmatory test (using GC-MS) is intended to identify which specific drugs or substances are present in the urine sample. The registrant will be required to authorise the GC-MS confirmatory testing of the sample, and will be responsible for the cost incurred.

The National Boards will not accept poppy seed consumption as an explanation for a UDS result that is positive for opiates and may consider taking further action against the registrant.

## **Quinine**

Health practitioners are also to avoid ingestion of substances containing quinine, such as tonic water and bitter lemon. Quinine can potentially lead to confounding UDS results.

## **Missed screens**

If a registrant becomes aware that they have failed to present for screening when required, they must immediately notify AHPRA in writing, and explain why they failed to screen.

The circumstances and explanation for the missed screen will be reviewed by the National Board. The registrant's history of compliance and frequency of missed screens will also be considered. If the National Board considers the frequency of missed screens reflects non-compliance, it may take further action.

## **Dilute samples**

Under the requirements of the Australian Standard, a sample for UDS is considered to be dilute when the creatinine level in the sample is below 1.76 mmol/L. Dilute samples are considered to be unsuitable for analysis under the Australian Standard.

A dilute sample does not necessarily indicate a deliberate attempt by the registrant to affect their UDS results. However, registrants must ensure that they are not excessively hydrated to minimise the likelihood of a providing a dilute sample.

Should a registrant provide a dilute sample for UDS, they will be notified in writing and reminded to take the necessary steps to avoid further dilute tests. Such steps may include reducing fluid intake before providing a sample and changing the time of day the registrant attends for screening.

Registrants providing dilute samples may also be required by the National Board or AHPRA to provide an additional sample within a specified period of time.

Should a registrant continue to provide dilute samples for screening, they will be required to explain to the National Board. The National Board may require that this explanation be in the form of a Statutory Declaration.

A registrant that continues to provide dilute sample for UDS may ultimately be required to undergo additional testing through another method, such as hair analysis.

### **Leave of absence from screening**

A registrant may be granted leave from UDS on an ad-hoc basis to travel interstate or overseas, or in exceptional personal circumstances. Leave from screening may also be approved for religious holidays relevant to the registrant.

Leave will not be granted when doing so would prevent or limit the National Board's and AHPRA's capacity to adequately monitor the registrant's compliance with the conditions and/or undertakings. This includes leave from screening on regular days of the week to facilitate the registrant's work or study requirements.

Registrants must make written application for leave from screening at least five business days before the anticipated leave. Requests should be submitted to the AHPRA office in the registrant's state or territory. Leave from screening will not be granted for verbal requests.

Requests for leave from screening are considered on a case by case basis. In considering the request, the National Board and AHPRA may also take into account the registrant's screening frequency, history of compliance, and the number of requests for leave already granted. The National Board or AHPRA may grant the request for leave from screening, or may require the registrant to continue screening while on leave if it will be possible for them to do so.

When extraordinary circumstances prevent a registrant providing at least five business days notice, the written request must be provided (by fax or email) as soon as it becomes apparent that leave is required. The registrant must identify the date(s) of leave required and the reason. The registrant must then contact their AHPRA compliance officer by telephone within one hour to confirm that the request has been received.

The circumstances and the registrant's history of compliance will be taken into account in deciding if leave will be granted. If leave is granted, the registrant may be required to provide an additional sample for screening before commencing leave.

Failure to comply with these leave of absence requirements may constitute a breach of conditions or undertakings relating to UDS, for which the National Board may take further action.

### **Leave of absence from screening due to illness**

Absence from UDS may be granted for illness only when the absence is supported by a medical certificate. The medical certificate must confirm the medical condition that caused the registrant to be unable to attend for UDS, or produce urine for screening.

When a registrant is unable to attend for UDS due to illness, they must immediately inform AHPRA that this is the case. A copy of the medical certificate verifying the registrant's illness must be provided to AHPRA within five days.

Failure to comply with these requirements may constitute a breach of conditions or undertakings relating to UDS, for which the National Board may take further action.

### **Additional screens**

In addition to the usual screening requirements for each screening group (as communicated by the urine drug screening telephone number), further screens may be required at any time by the National Board or AHPRA. When this is the case, the registrant is required to provide a sample for screening as instructed, and irrespective of the daily message on the urine drug screening telephone number.

Circumstances when additional screens may be required include when a registrant has:

- been granted leave from screening (including for extraordinary circumstances or due to illness), an additional screen may be required before commencing and/or immediately upon returning from leave



- failed to attend for screening on a day on which they were required (i.e. a missed screen)
- provided a dilute sample or a sample that is otherwise unsuitable for UDS under the requirements of the Australian Standard (e.g. it has failed the checks for adulterants, temperature, or the chain of custody is incomplete)
- produced a positive result, in order to determine whether the drug or substance is still present in the registrant's body.

Registrants required to provide an additional urine sample for screening will often be required to provide that sample within a specified timeframe. For example, if contact is made at 10.00am, the registrant may be required to provide the additional urine sample before 3.00pm on the same day.

Refusal of a registrant to fully comply with the requirements relating to an additional screen will be considered by the National Board, which may take further action.

### **Operational failures of the urine drug screening telephone number**

The urine drug screening telephone number uses reliable technology, and service interruptions are rare. If for some reason the urine drug screening telephone number is not operational on any particular day, so registrants do not receive the message advising which groups are required to screen, no screens will be required on that day.

Registrants identifying that the urine drug screening telephone number is not operational must contact AHPRA immediately to inform their case officer. The AHPRA case officer will confirm the operability of the telephone number and initiate investigation of any fault detected. The following day all registrants are required to call the urine drug screening telephone number as normal.

If a fault affecting the urine drug screening telephone number is not expected to be rectified by the next day, AHPRA will contact affected registrants to advise them of the temporary measures that will be put in place.