



Aboriginal and Torres Strait Islander Health Practice	Occupational Therapy
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Australian Health Practitioner Regulation Agency

Undertaking drug and alcohol screening for health assessments

Information for applicants and registrants

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Purpose

This information details the requirements for applicants, health practitioners and students who have been required to undertake drug and alcohol screening by:

- a health assessment under section 169 of the Health Practitioner Regulation National Law Act 2009 (the National Law), or
- a National Board under section 80 of the National Law.

The Board and AHPRA acknowledge that participation in drug and/or alcohol screening may be inconvenient and intrusive. However, the priority of all Boards and AHPRA is to protect the public.

Blood testing, urine drug screening and/or hair testing are currently the best means to assess if someone is affected by drugs and/or alcohol and able to commence or continue safely in practice or clinical training.

You will be required to participate in drug and/or alcohol screening prior to your health assessment, regardless of whether you are actively practising or studying. You may be required to attend some or all types of screening outlined below. The cost of testing for this assessment will be met by the Board.

Types of drug and alcohol screening

Urine drug screening (UDS)

Substances subject to screening

UDS will include testing for all substances detailed in Appendix A and the substance of use (where not detailed in Appendix A).

Supervision

Collection of samples must occur under direct observation (Level 1 supervision) with the collector standing in front of you directly observing the passage of urine from the urethra to the container. It is your responsibility to ensure that the collection of samples is under direct observation.

Chain of custody

You need to obtain a chain of custody form from the collection facility which must accompany each urine sample you provide. The form and sample collection and handling must be completed in compliance with the AS/NZS 4308:2008 'Procedures for specimen collection and the detection and quantitation of drugs of abuse in urine' (the Standard).

It is your responsibility to ensure that the collector completes the Chain of custody form and you must sign it at the time of sample collection. This form includes:

- recording the level of supervision, and
- that the temperature of the sample is recorded within 4 minutes of collection.

A Drug information sheet identifying drugs, medications or other substances you have taken in the period prior to the sample being collected must accompany the screen and is to be completed by you. The collector will provide this form also.

Positive UDS results

Where a UDS result indicates the presence of one or more drugs or substances in the sample, further confirmatory testing will be required.

Where further confirmatory testing indicates the presence of one or more drugs or substances and where there is no confirmed prescription, approval or administration by another health practitioner for the drugs or substances detected, the sample is considered to be a positive UDS result.

Dilute urine samples

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 unsuitable for analysis under the Standard.

In some collection centres, a preliminary indication of whether the sample is sufficiently concentrated for reliable analysis may be given at the time of sample collection. This is not to be taken as confirmation that the sample is sufficiently concentrated; only the confirmed laboratory result provided directly to AHPRA will be regarded as an accurate assessment of sample concentration.

You must ensure that you are not excessively hydrated to minimise the likelihood of providing a dilute sample. Such steps may include reducing fluid intake before providing a sample.

Hair testing

Substances subject to testing

Hair testing includes testing for all substances detailed in Appendix A and the substance of use (where not detailed in Appendix A).

Sample collection

You must contact one of the approved collection centres detailed at <http://www.ahpra.gov.au/Registration/Monitoring-and-compliance/Collection-centres.aspx> in advance to make an appointment to provide a hair sample.

You must not alter the length of your hair prior to the required hair test. The hair to be sampled must be head hair of no less than 3 cm length.

If you are not currently able to provide 3cm of head hair for collection, please contact AHPRA as soon as possible.

Body hair, other head hair, is not acceptable for testing.

The collector will cut an approximately pencil-thickness section of hair as close to the scalp as possible and will complete a sample collection form confirming whether your hair:

- has been chemically treated by perming, dying or bleaching, and
- is free from all gels, oils and hair creams when presenting for collection.

A 'Drug Information Sheet' identifying drugs, medications or other substances taken in the three month period prior to the hair test is to be completed by you at the time of the test. The collection centre will provide this to you.

Chain of custody

A chain of custody form must accompany each hair sample. The collection centre will provide you with this. It is your responsibility to ensure that the collector completes the chain of custody form and you must sign it at the time of sample collection.

Positive hair testing results

Where testing indicates the presence of one or more drugs or substances and where there is no confirmed prescription for the drugs or substances detected, the sample is considered to be positive.

Prescribed drugs, other medications, food and substances

A number of prescription, over the counter (OTC) medications and ingredients in some foods may cause positive hair and urine drug screening results. However, for AHPRA to assess drug screening results, those who are undergoing drug screening are required to inform AHPRA of any substances taken at the time of submitting a hair test sample or UDS.

For all prescribed substances you will be asked to provide evidence of the prescription, the name of the prescriber and authority for AHPRA to speak with the prescriber to confirm any substances detected via drug screening.

Blood testing for alcohol consumption

The requirements for blood testing for alcohol consumption are established to assess for alcohol consumption at harmful levels in relevant cases.

Blood markers subject to screening

Blood testing for the use of alcohol includes (but is not limited to) the following tests:

- carbohydrate deficient transferrin (CDT)
- liver function testing (LFT)
- mean corpuscular volume (MCV) and,
- full blood count.

Chain of custody

A chain of custody form must accompany each blood sample. The collection centre will provide you with this. It is your responsibility to ensure that the collector completes the chain of custody form and you must sign it at the time of sample collection. If the subsequent blood test report states that the chain of custody form is incomplete, you will be asked to provide a written explanation at the request of your case officer.

Blood test results

Where a blood alcohol test result indicates probable excess alcohol use (as identified by an elevation in any of the test parameters above normal range) this result will inform the assessment.

Timeframe for testing

You will be advised in writing by the case officer of the date by which drug and alcohol screening is required and must attend **prior** to that date. This will be informed by:

- the substances you are suspected to have used and the detection timeframes
- the date or dates of the suspected use of substances and the date of the National Board decision to require a health assessment
- your nature of practice, scope of practice and practice environment and the level of risk to the public you may present if you were to practise your profession or undertake clinical training while affected by drugs or other substances, and
- the scheduled date and time of the health assessment.

Approved collection centres

All samples are required to be collected at one of the approved collection centres detailed at <http://www.ahpra.gov.au/Registration/Monitoring-and-compliance/Collection-centres.aspx>.

If you are unable to access one of the collection centres due to your location you need to contact your case officer to make alternate collection arrangements.

Alternate arrangements will be subject to approval by the Board. Alternate arrangements must still meet all of the collection and chain of custody requirements and can include, but are not limited to, collection by a local general practitioner or medical or nursing staff at a local hospital when approved by the Board.

Request forms for samples

You must use only request forms that have been provided by the case officer and must not self-refer for drug or alcohol testing under any circumstances. When presenting for a test, you will be required to write that days date on the request form.

When presenting for a test registrants are required to present photo identification as proof of identity to the collector. Photo identification is an identity document that includes a photograph of the holder. The most commonly accepted forms of photo identification are those issued by government authorities, such as a valid driving licence, identity cards or passport.

Receipt of results

Results of drug and alcohol screening are received directly by AHPRA. Copies of drug and alcohol screening results are provided to the independent health assessor to inform the report to the National Board.

Positive results and other testing discrepancies

The National Board may be asked to consider the results of drug and alcohol screening prior to the completion of the health assessment in circumstances if you:

- refuse to undertake drug and alcohol screening as required by the health assessor or the National Board
- fail to attend for drug and alcohol screening within the required timeframe
- deliberately attempt to frustrate drug and alcohol screening (such as shaving head)
- return samples positive for substances that may affect your capacity to practise safely
- return samples unsuitable for analysis (dilute samples, chain of custody incomplete)
- fail to use the pathology referral form issued by the case officer, or
- fail to present for testing at an approved collection centre.

The possible consequences of the National Board consideration include action to:

- take immediate action, such as suspension of registration or imposition of conditions
- caution
- seek cancellation of registration by the tribunal
- refuse the application for registration or renewal, and/or
- take any other action permissible under Part 7 or 8 of the National Law.

As a matter of natural justice when a Board proposes to take action, you will be given the opportunity to make a written or verbal submission to the Board in regard to this proposal. The Board will consider any submission prior to making a decision.

Appendix A: Schedule of Drugs

Substance to be tested	Detection Limits
Amphetamine type substances <ul style="list-style-type: none"> • Amphetamine • Benzylpiperazine • Ephedrine • Methylamphetamine • MDA • MDMA • Phentermine • Pseudoephedrine 	As per AS/NZS 4308:2008
Benzodiazepines <ul style="list-style-type: none"> • Alprazolam • Clonazepam • Diazepam • Flunitrazepam • Nitrazepam • Oxazepam • Temazepam • and/or their metabolites 	As per AS/NZS 4308:2008
Cannabis Metabolites	As per AS/NZS 4308:2008
Cannabinoids	As per AS/NZS 4308:2008
Cocaine Metabolites	As per AS/NZS 4308:2008
Opiates <ul style="list-style-type: none"> • 6-acetylmorphine • Codeine • Morphine 	As per AS/NZS 4308:2008
Anaesthetic Agents <ul style="list-style-type: none"> • Ketamine • Norketamine • Propofol 	<ul style="list-style-type: none"> • 10 ng/mL • 5 ng/mL • 50 ng/ml for hydrolysed urine measuring total propofol or 20 ng/ml for propofol itself and one or more of its metabolites
Anxiolytic Agents <ul style="list-style-type: none"> • Zolpidem • Midazolam 	<ul style="list-style-type: none"> • 10 ng/ml • 10 ng/ml
Synthetic/semi-synthetic Opioids <ul style="list-style-type: none"> • Fentanyl • Norfentanyl • Hydromorphone • Methadone • Oxycodone • Pethidine • Norpethidine • Tramadol 	<ul style="list-style-type: none"> • 0.5 ng/ml • 0.5 ng/ml • 10 ng/ml • 10 ng/ml • 10 ng/ml • 20 ng/ml • 20 ng/ml • 20 ng/ml

Substance to be tested	Detection Limits
Cathinone Analogs (designer stimulants) including piperazine*	Dependent on drug being used
Synthetic Cannabinoids*	Dependent on drug being used
Halucinogens <ul style="list-style-type: none"> • LSD • Nor-LSD • NBOMe derivatives* 	<ul style="list-style-type: none"> • 0.5 ng/ml screen using kits and 0.2 ng/ml for confirmation or using MS techniques • 0.2 ng/ml • This will depend on drug, but likely to be <1 ng/ml