



HEALTH AFFAIRS

ASSISTANT SECRETARY OF DEFENSE
WASHINGTON, D. C. 20301

12 DEC. 1977

MEMORANDUM FOR Assistant Secretary of the Army (MGRA)
Assistant Secretary of the Navy (MRA&L)
Assistant Secretary of the Air Force (MRA&I)

SUBJECT: Urinalysis Selective Testing

Reference OASD(HA) memorandum, subject, Urinalysis Selective Testing Study (U), dated 24 August 1976.

Recently the Laboratory Methodology Subcommittee of the Tri-Service Committee for Drug Abuse Testing reviewed the selective testing prescribed by the reference and found it to be working in a less than satisfactory manner. A primary fault found with selective testing is that any commander-directed urinalysis -- which comprises the bulk of all urinalysis today -- would not necessarily include testing for the common drugs of abuse. Depending upon the laboratory to which it is sent, the sample would be tested for opiates and then it may or may not be selected for testing for other drugs. Yet the individual whose urinalysis is directed by a commander is just that individual who the commander has reason to suspect of drug abuse, and his sample should be thoroughly checked for all of the prevalent drugs of abuse. Again, in the case of samples submitted from a commander-directed urinalysis sweep, all are not tested for all drugs, thus presenting the commander of the swept installation with a false picture of the drug abuse prevalence at his installation.

Further, with the cessation of random urinalysis, all laboratories are capable of conducting many more tests than they are presently handling.

The committee recommended that the sample technique of testing -- 8 percent of incoming samples for certain drugs cease, and that the laboratories return to a 100 percent testing of urine samples for common drugs of abuse. Initially, it is recommended that all laboratories test all incoming samples for opiates, amphetamines and barbiturates, and that the laboratory in Wiesbaden, Germany, also test all samples for methaqualone. In the future, the Subcommittee recommended, the drugs for which the laboratories should test should be based upon the results of a review of other indicators, e.g.,

Drug Enforcement Administration intelligence data, military service law enforcement and investigative agency findings, and the results of short, intensive urinalysis sweeps of suspect areas or installations.

The Laboratory Methodology Subcommittee recommendation is approved, and the referenced memorandum is rescinded. The effective date for the increased testing is 1 January 1978.

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