

Beat Your Drug Test

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Adapted from Paul Cary

Two Best Practices

■ random testing

- ◆ The schedule of drug testing is truly random and unpredictable. The probability of being tested on weekends and holidays is the same as other times.
- ◆ SEVEN day week

■ witness collection

- ◆ Collection of test specimens is witnessed directly by a staff person who has been trained to prevent tampering and substitution producing fraudulent specimens.

How to beat a drug test: *simple!*



Avoid problems by doing it right!

- Same way every time
- Monitor your chain of evidence
- Same questions every time
- Assume fraud and trust no one

Random Testing

- if you schedule your drug testing, your clients will “schedule” their drug usage
- what is truly random?
- element of surprise as a therapeutic tool
- if participants know in advance when they will be tested, they can adjust the timing of their usage or take tampering countermeasures
- nights, weekends, holidays

Witnessed Collections

- direct, full frontal observation
- single most important aspect of effective drug testing program
- urine collections not witnessed are of little or no assessment value
- denial component of substance abuse requires “direct observation” collections of participants

How to take a drug test correctly



Sample Collection:

- pre-collection preparation
 - ◆ site selection
 - ☞ minimize access to water sources
 - ☞ use an area with a scant floorplan
 - ☞ find privacy & security
 - ◆ gather supplies beforehand
 - ◆ obtain proper collection receptacle
- removal of outer clothing

Sample Collection: (continued)

- wash hands prior to donation
- “witness” collection
 - ◆ additional clothing removal
 - ◆ body inspection
 - ◆ squat and cough (females)
 - ◆ All underwear on the ground
- label sample correctly

Sample Collection: (continued)

- accept sample & inspect
 - ◆ temperature (90-100° F)
 - ◆ color (no color → diluted ?)
 - ◆ odor (bleach, sour apples, aromatics, vinegar, etc.)
 - ◆ solids or other unusual particulates
- store sample properly
- forensic sample - custody & control

R-U-CLEAN
PASS NOW!
TESTWEDDER

The WEDGE

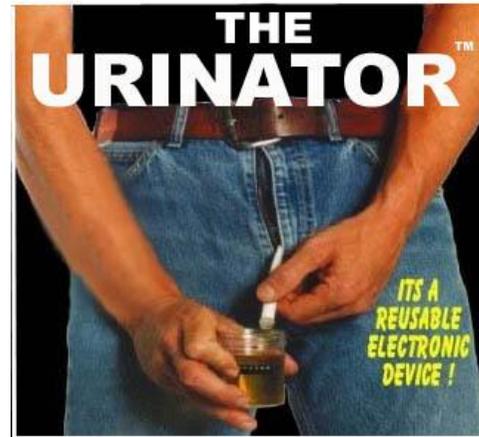
Eliminate the bacteria that cause tooth decay, gum disease, and bad breath. It's the only dental hygiene product that can reach the hard-to-clean areas of your mouth. **WEDGES** are made of a special material that can reach the hard-to-clean areas of your mouth. **WEDGES** are made of a special material that can reach the hard-to-clean areas of your mouth.

6. Inside Package

NOT ACTUAL SIZE !

1. The WEDGE
2. Fill Bottle
3. Temperature Strip
4. Tube Clamp
5. Clean Swab
6. Clean Gloves
7. Closed Cell Foam

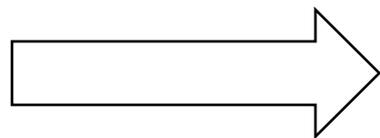
And Easy To Read Directions.



The urinator the ultimate urine testing device only \$149.95.

A digitally temperature controlled unit that is reusable, reliable and by far the most superior product on the market.

Rocket
Scientist





Substitution

Start...stop...start

Squat and cough forcefully 3 times



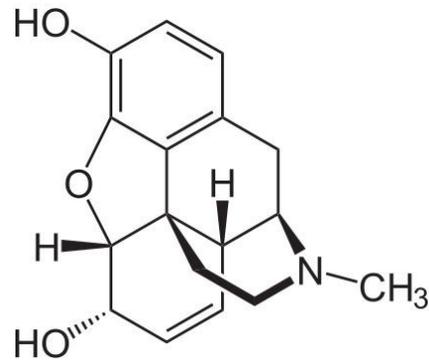
Drug Testing Specimens

- urine - current specimen of choice
 - ◆ generally readily available - large quantities
 - ◆ contains high concentrations of drugs
 - ◆ good analytical specimen
 - ◆ provides both recent and past usage
- alternative specimens
 - ◆ breath
 - ◆ hair
 - ◆ sweat - patch test
 - ◆ saliva - oral fluids

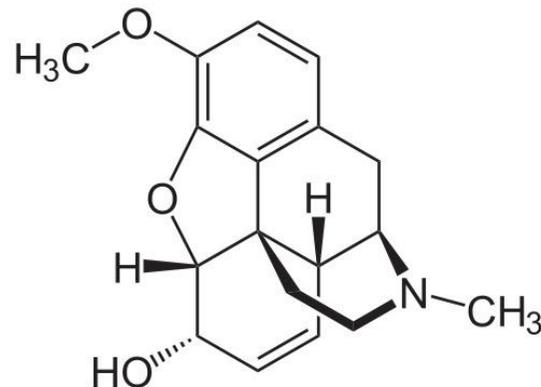
Defining Opiates: Natural

- from botanical source

- morphine



- codeine



Defining Opiates: Semi-Synthetic

- oxycodone
- oxymorphone
- hydrocodone
- hydromorphone
- heroin (diacetylmorphine)* (yes, and no-actually synthesized from morphine)

NOT Opiates: compounds that are narcotics, but not truly opiates

- methadone
- tramadol
- fentanyl
- meperidine (Demerol)
- propoxyphene (Darvon)
- buprenorphine (Suboxone)
- generally will not test positive using an “opiate” test

Most Abused Substances

- alcohol
- cannabinoids (marijuana)
- prescription pain medications (opiates)
 - ◆ (excluding tobacco)

In 2010,

Enough prescription painkillers were prescribed to medicate
EVERY AMERICAN ADULT EVERY 4 HOURS

For 1 Month

PBS 2013

The # of Prescription Medicine Abusers in 2010 was

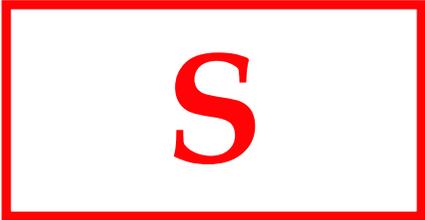
8.76 MILLION

NSDUH 2011

**Most abused prescription
Drugs fall under 3 categories:**

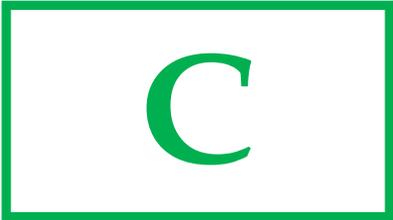


(# of Abusers of Prescription Drugs) DRUGABUSE.GOV



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Screening= dip sticks,
instant read cups; rapid
result swabs, etc.



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Confirmation=gas or
other chromatography
analysis

Potential opiates detected in a screening test:

- heroin
- codeine & morphine
- oxycodone
- hydromorphone
- hydrocodone
- oxymorphone

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Why is testing for opiates so complicated ?

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- when testing for THC, cocaine, alcohol, PCP - test involves detection of a single compound
- testing for opiates - testing for an entire class of drugs
- the cross-reactivity problem

Categories of Misused/ Abused Pain Medications

- opiates (oxycontin, vicodin, percocet)
- non-opiate pain management (tramadol, soma)
- ORT/MAT - suboxone
- OTC (dextromethorphan, diphenhydramine, sleep aids - Sonnex)

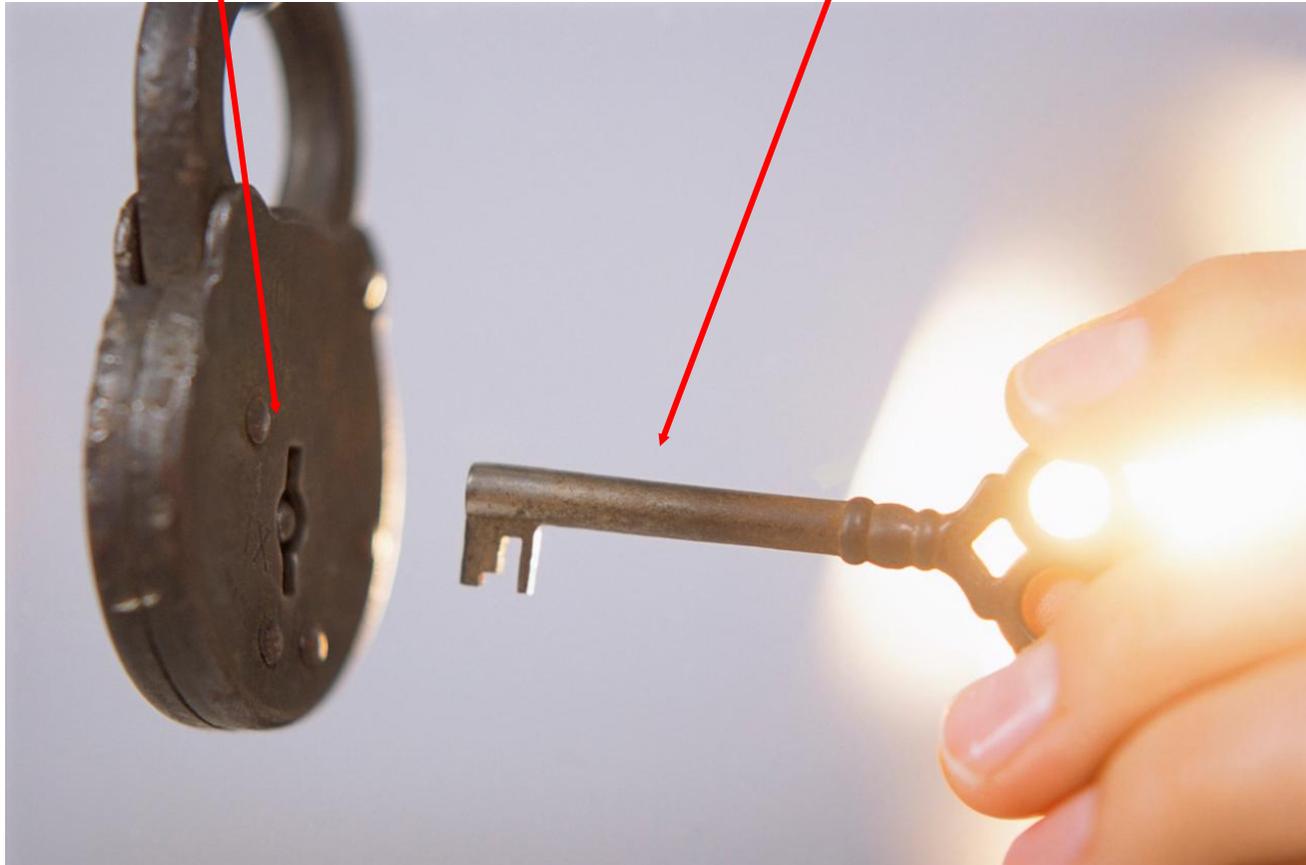
X standard opiate screening tests will not detect

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Drug tests & cross reactivity:

Drug Test

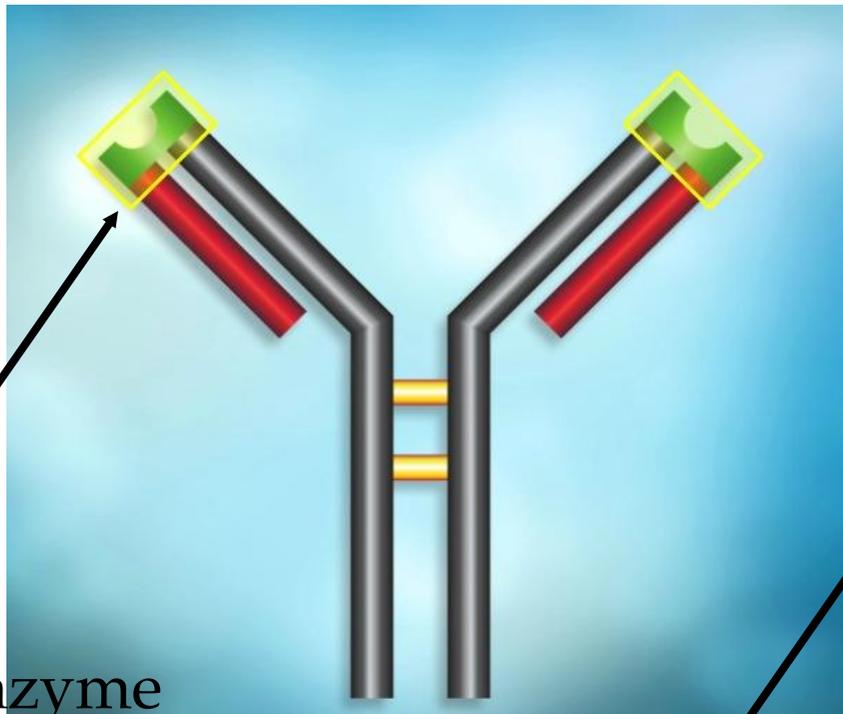
Drug



Drug tests & cross reactivity:

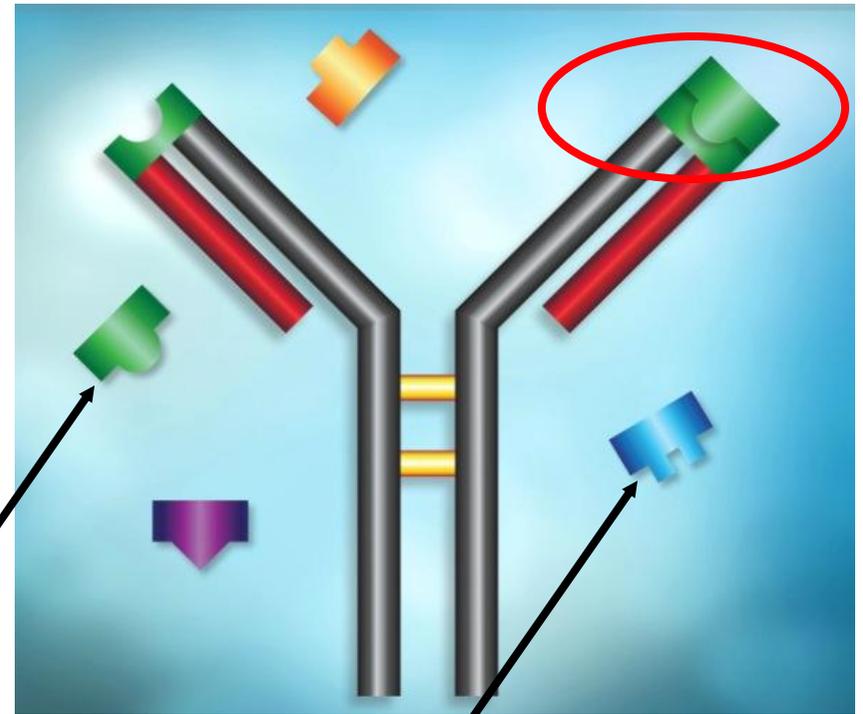
Immunoassay screening tests

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opiates enzyme

opiates fit = positive test



methadone doesn't fit = negative test

Drug tests & cross reactivity:

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morphine	100%
codeine	200%
heroin	80%
hydrocodone	75%
hydromorphone	45%
oxycodone	20%

Drug tests & cross reactivity:



(300 ng/mL opiate cutoff test)



150 ng/mL codeine



1500 ng/mL oxycodone



If oxycodone is a major substance of abuse in your jurisdiction, you should consider a separate drug test for oxycodone as part of your initial screening analysis.

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Opiate (Screen) Testing

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- opiate class drugs
- illicit & prescription drugs
 - ◆ heroin
 - ◆ codeine & morphine
 - ◆ differential response to other opiates (hydrocodone, oxycodone)

Opiate Testing

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- negative result
- indicator of abstinence for opiate drugs
- non-compliance/ diversion for prescription medication

Opiate Testing

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- positive result
- abstinence failure/relapse
- compliance for prescription drug use
 - ◆ confirmation may assist in differentiation of stimulant use/abuse
 - ◆ 6-AM analysis for heroin

Opiate Confirmation Metabolites

Parent Drug: Codeine

Metabolites: Norcodeine, Morphine

Parent Drug: Morphine

Metabolites: Normorphine

Parent Drug: Heroin

Metabolites: 6-monoacetyl morphine (6-AM),
Normorphine, Morphine

Parent Drug: Oxycodone

Metabolites: Oxymorphone, Noroxycodone,
Noroxymorphone

C

Opiate Confirmation Metabolites

Parent Drug: Hydrocodone

Metabolites: Hydromorphone, Norhydrocodone

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Parent: Hydromorphone (may only as parent drug)

Metabolites: undetectable conjugated metabolites

If the goal of opiate testing is to differentiate between non-heroin opiates and the use of heroin - **confirm** positive opiate screening tests and request analysis of 6-AM (the heroin metabolite).

Opiates - Results Interpretation

- positive results indicate presence of opiates
- most opiate assays not reactive toward synthetic narcotic analgesics; meperidine (Demerol), propoxyphene (Darvon), methadone, pentazocine (Talwin), fentanyl (Sublimaze), buprenorphine (Suboxone)
- poppy seed interference



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Opiates - Confirmation Interpretation

- Morphine positive (confirmed):
 - ◆ morphine use
 - ◆ codeine use
 - ◆ heroin use
 - ◆ poppy seed ingestion
- Codeine positive (confirmed):
 - ◆ codeine use
 - ◆ poppy seed ingestion



Typical Cutoff Levels

screening vs. confirmation

■ amphetamines	1000 ng/mL	500 ng/mL
■ benzodiazepines	300 ng/mL	variable
■ cannabinoids	20 & 50 ng/mL	15 ng/mL
■ cocaine (crack)	300 ng/mL	150 ng/mL
■ opiates (heroin)	300/2000 ng/mL	variable
■ phencyclidine (PCP)	25 ng/mL	25 ng/mL
■ alcohol	20 mg/dL	10 mg/dL

◆ do not use federal DOT opiate cutoff!

◆ **Confirmation** is GC/MS or LC/MC etc.

Drug testing is an excellent tool for the abstinence monitoring of court clients, however it provides limited information for the differentiation between the appropriate therapeutic use of prescribed medications and the misuse/abuse of those same drugs - regardless of the specimen tested. **It is ONLY a tool.**

Alternative Control Strategies (other than drug testing)

Client Signed Releases

get HIPAA and 42 CFR releases

- doctors
- dentists
- other healthcare professionals
- pharmacies

Healthcare Contact Form

- form used by clients to document contact with healthcare professionals
- clients required to use contact form for each visit where medications are being used during a procedure or prescribed for use
- sanction for failure to use form
- place requirement in client contract
- client seek prior permission to see doctor

I (client name), am a participant in drug court. This program is a court monitored recovery program for addicts. As a result, I am subject to frequent and random drug testing. Therefore, I must report to the court my visit today. As I am in recovery, I would respectfully request that you take this into consideration and offer non-narcotic medications, if possible, when drugs are necessary for my medical treatment.

Physician (Name) _____

Physician (Signature) _____

If you have any questions or concerns, please feel free to call the court and talk to my case specialists.

If this patient fails to present this form to the nurse and physician prior to receiving medication or a prescription for medication, please notify the court.

Please list the medications prescribed today:

Other Control Strategies

- search & seizure (client contract)
 - ◆ car, home, possessions
 - ◆ NO poppy seeds, period.
- pill counts
- no out-of-state prescriptions
- use of specified pharmacies
- loss of completion credits/time while on certain prescription meds

Electronic Prescription Monitoring

- database all scheduled prescriptions for a specified time period
 - ◆ patient/client
 - ◆ prescriber/doctor
 - ◆ dispenser/pharmacy
- does not violate HIPAA

Electronic Prescription Monitoring

- powerful tool for law enforcement
 - ◆ reduce “pill mill” doctors
- reduce prescription abuse of all kinds
- available in nearly all states