



# EXECUTIVE REGULATION

Montgomery County Fire and Rescue Commission

No.: 13-89AMII

Effective Date:

May 9, 1991

TITLE: DRUG SCREENING PROCEDURE FOR  
VOLUNTEER APPLICANTS

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Montgomery County Fire and Rescue Commission Regulation on:

## DRUG SCREENING PROCEDURE FOR VOLUNTEER APPLICANTS

Issued by: Montgomery County Fire and Rescue Commission  
Regulation No. 13-89AMII  
Authority: Code Section 21-4B(e)(2)  
Supersedes: Regulation No. 13-89AM  
Council Review: Method (2) under Code Section 2A-15  
Register Vol. 7, Issue 12

Effective Date: May 9, 1991

- SUMMARY:** The proposed regulation establishes a drug-use screening procedure required for all individuals who apply to serve as a volunteer firefighter/rescuer, emergency medical service member, or medical attendant with an independent fire and rescue corporation in Montgomery County.
- DEADLINES:** Montgomery County Register Comment: February 1, 1991  
Montgomery County Fire Board Comment: February 1, 1991  
Fire and Rescue Corporations Comment: February 1, 1991  
Dept. of Fire and Rescue Services Comment: Feb. 1, 1991
- ADDRESS:** All comments pertaining to the proposed regulation must be sent to Kevin P. Maloney, Chairman, Montgomery County Fire and Rescue Commission, 12th Floor, 101 Monroe Street, Rockville, MD 20850.
- STAFF:** For further information, you may contact Steve Davis, Executive Director, Montgomery County Fire and Rescue Commission, on 217-2461.
- BACKGROUND:** The use of illicit drugs or misuse of controlled substances, alcohol, or other psychoactive drugs by a fire and rescue department volunteer would create unsafe conditions for firefighters, medical attendants, and the community. To prevent the occurrence of such unsafe conditions, the Fire and Rescue Commission is establishing



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this regulation which requires that all applicants to become active volunteers provide proof of a "medically acceptable" rating by the Montgomery County Occupational Medical Examiner which includes a negative result from a drug screening test. A similar policy is in effect for paid firefighters/rescuers.

## Sec. 1. Purpose.

To establish a procedure by which individuals who apply for volunteer membership to any of the fire and rescue corporations in Montgomery County are screened for the use of drugs, and are required to provide proof of a medically acceptable rating by the Occupational Medical Section which includes a negative result from a drug screening test prior to acceptance.

## Sec. 2. Applicability.

This regulation applies to all independent fire and rescue corporations in Montgomery County and to all individuals who apply to serve as volunteer active members.

## Sec. 3. Definitions.

- (a) Active Membership. Individuals who are eligible to participate in fire and rescue operations, including incident responses and operation of apparatus and equipment. This category includes the Rescuer and the Medical Attendant member.
- (b) Chain of Custody Procedure. A specimen security system that ensures the specimen cannot be tampered with without detection and insures that the specimen is not confused with another specimen. The procedure is consistently followed by both Occupational Medical Section and the examining laboratory for every specimen obtained. The procedure is attached as Appendix B.
- (c) Confirmed Positive Test Results. The result of an immunoassay screen of a urine sample which indicates the presence of a drug above the laboratory's cut-off levels (as established by the test manufacturer and/or the National Institute on Drug Abuse), which has not been prescribed by a licensed health care



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provider or has not been used for the purpose for which it was prescribed, and is then confirmed by gas chromatography/mass spectrometry (GC/MS).

- (d) **Drugs.** Substances that may be abused, including amphetamines, barbiturates, benzodiazepines, cannabinoids, cocaine, ethanol, methadone, methaqualone, opiates, phencyclidine (PCP), and propoxyphene.
- (e) **Medical Examiner.** A qualified physician designated by the Occupational Medical Section (OMS) who shall act as the Medical Review Officer.
- (f) **Notification Form.** A form which the applicant must complete and sign indicating his/her receipt of the notification as contained in Appendix A. The form explains that the results of the test will be released only to the applicant and the Medical Examiner, states the name and address of the laboratory performing the test, and informs the applicant of the option to have the same specimen independently tested at another State-certified laboratory at the applicant's expense if a positive test result occurs.
- (g) **Pre-Acceptance Drug Screening.** The process under which applicants submit to a drug urinalysis conducted by the Montgomery County Occupational Medical Section.

#### Sec. 4. Responsibility.

- (a) All volunteer applicants for active membership must sign a notification form prior to submitting to the pre-acceptance drug screening test procedure.
- (b) All volunteer applicants for active membership must appear at the test site at the appointed time and submit to the test procedure established by the Occupational Medical Section.
- (c) The Occupational Medical Section must strictly adhere to its established Chain of Custody testing standard, as described fully in Appendix B.



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- (d) Each fire and rescue corporation must ensure that all of its applicants for active membership are screened for substance abuse and that applicants are permitted to become volunteer members only after receipt of a "medically acceptable" rating from the Medical Examiner. Each corporation must notify its applicants that they must submit to pre-acceptance drug screening and require them to complete the notification form prior to scheduling the examination.

## Sec. 5. Procedure.

- (a) All individuals who apply for active membership with a fire or rescue corporation in Montgomery County must submit to a drug urinalysis conducted by the Montgomery County Occupational Medical Section and provide proof of a "medically acceptable" rating from the Medical Examiner before acceptance.
- (b) Volunteer applicants for active membership are required to read and sign a notification form prior to arriving at the Occupational Medical Section for the pre-acceptance drug screening.
- (c) The County Occupational Medical Section will obtain a urine sample in accordance with Chain of Custody collection and handling procedures, to ensure that the urine specimen cannot be tampered with without being detected, and to attest to the manner in which the sample was collected. The Occupational Medical Section will submit the sample for analysis to an independent laboratory, which will maintain Chain of Custody handling of the specimen. The independent State-certified laboratory will follow rigorous quality control and personnel standards and participate in a proficiency testing program as outlined by the Department of Health and Human Services and National Institute on Drug Abuse. The laboratory will maintain frozen storage of positive samples for one year and will provide certification by a toxicologist of all positive reports to verify the accuracy and use of the Chain of Custody procedure in determining the presence of the following drugs:



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Amphetamines  
Barbiturates, long acting and short acting  
Benzodiazepines  
Cannabinoids (Marijuana)  
Cocaine  
Ethanol (Alcohol)  
Methadone  
Methaqualone (Quaalude)  
Opiates (Morphine, Codeine, Dilaudid)  
Phencyclidine (PCP)  
Propoxyphene (Darvon)

- (1) If the immunoassay screen of a urine sample results in a positive test result indicating the presence of a listed drug above the cut-off level, the laboratory will automatically perform a confirmation test by gas chromatography/mass spectrometry (GC/MS) on the same specimen. If a substance is present at a level below the predetermined cut-off, the test report will be reported as negative. The cut-off levels are those established for the above substances by the National Institute on Drug Abuse (NIDA) and/or by the test manufacturer.
- (2) If the GC/MS analysis of the same urine sample provides a positive test result, the results of the first and second tests must be reported to the Medical Examiner and the applicant. The laboratory must report the test results directly to the Occupational Medical Section so that Chain of Custody procedures can be verified and so that the Medical Examiner can determine whether a false positive test result occurred. A false positive test result is a positive test result created by cross reaction with over-the-counter medications, foods, or prescribed medications. (See Appendix C, Follow-up Procedure of Positive Test Results.) An applicant who has a confirmed positive test for ethanol will be reported medically acceptable if the Medical Examiner, after reviewing the applicant's physical examination and blood test results, determines that there are no clinical signs of alcohol



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abuse present. An applicant with a confirmed positive test for a drug other than ethanol will not be given a medically acceptable rating.

- (3) Applicants must be informed of the name and address of the laboratory performing the pre-acceptance drug screening and of their right to have independent testing of the same specimen at their expense at another State-certified laboratory if the specimen produces a positive test result. A partial listing of State-certified laboratories is provided in Appendix E.

- (d) Drug screening results will be used solely to complete the individual's application for volunteer service. The results of this test must not be disclosed to another person or agency for any other purpose, including any administrative, civil, or criminal proceeding, without the written consent of the applicant.

## Sec. 6. Severability.

If a court of final appeal holds that any part of this regulation is invalid, that ruling does not affect the validity of other parts of the regulation.

## Sec. 7. Effective Date.

This regulation is effective 30 days after Council adoption or 90 days after Council receipt if the Council takes no action within 60 days of its receipt.

## Sec. 8. Attachments.

- Appendix A- Applicant Drug Testing Notification
- Appendix B- Chain of Custody Procedure
- Appendix C- Follow-up Procedure of Positive Test Results
- Appendix D- Laboratories Certified by the State of Maryland to Perform Job-Related Drug Screening



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ATTEST:

*Kevin P. Maloney*

Kevin P. Maloney, Chairman  
Fire and Rescue Commission

*2/25/91*

Date

1666d rev 2/15/91 bm

Approved as to form and legality  
Montgomery County, Md. County Attorney's Office

By: *[Signature]*

*2/20/91*

APPENDIX A

APPLICANT DRUG TESTING NOTIFICATION

I, \_\_\_\_\_, understand that a urine screen for the presence of drugs, administered by the Montgomery County Occupational Medical Section, is a condition of my volunteer service. I further understand that the results of this urine screen will be released only to me and the Montgomery County Medical Examiner, and will be used solely to complete my application for volunteer service. The results of this screen will not be disclosed without my written consent to another person or agency for any other purpose, including any administrative, civil, or criminal proceeding.

I, \_\_\_\_\_, have been informed that

\_\_\_\_\_, located at

\_\_\_\_\_, is the certified laboratory which will perform drug testing on my urine specimen collected

on \_\_\_\_\_ in the Occupational Medical Section. I understand that I have the right to request independent testing of the same specimen at my own expense at another certified laboratory if my urine specimen tests positive for drugs or alcohol.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date



## APPENDIX B

### CHAIN OF CUSTODY PROCEDURE

1. The applicant must submit a signed Notification Form prior to testing. A copy of the form will be given to the applicant and the original will be placed in the individual's medical file.
2. The applicant's identity will be accurately established by examination of a driver's license or other valid photo identification whenever possible. Both the photo and signature of the individual should be compared. A copy of the photo identification will be dated, initialed by an OMS staff person, and placed in the applicant's medical file. If no photo identification is available, identification by a corporation representative may be substituted.
3. The applicant must provide a medication history which includes any over-the-counter drugs, sleeping medication, tranquilizers, pain medication, allergy and cold medications, and muscle relaxants taken within the last 30 days.
4. The applicant must provide a dietary history which covers the previous few days.
5. The medical attendant must explain the collection procedure to the applicant.
6. The laboratory provides sealed urine containers to the OMS for drug screening. The medical attendant must check the container in the presence of the applicant to ensure that it is clean and has not been tampered with.
7. The medical attendant must open the container in the presence of the applicant and hand the open container to the individual as the applicant enters the bathroom. The bathroom is private and located within the clinic.
8. The applicant may not take a coat, jacket, purse, bag, etc. into the bathroom.
9. Upon exiting the bathroom, the applicant must hand the specimen directly to the medical attendant waiting outside the bathroom door.
10. The medical attendant must ensure that the sample is kept in visual sight of both the applicant and the medical attendant.
11. The specific gravity and pH of the sample will be determined immediately in the applicant's presence. If the specific gravity is 1.000 or less or if the specific gravity is 1.030 or greater, the specimen must be discarded and another specimen will be collected under direct observation. If the pH is 5.0 or less or if the pH is 8.5 or greater, the specimen must be discarded and another specimen will be collected under direct observation.

12. If direct observation of the urine collection is required, a medical attendant of the same sex must be present in the bathroom.
13. In the presence of the applicant, the medical attendant must immediately write the date and the applicant's name on the white label of the container and place a "CONFIDENTIAL" tape across the container's cap.
14. The applicant must immediately initial the white label on the container and the "CONFIDENTIAL" tape on the cap. The medical attendant must inform the applicant prior to initialing that initialing the specimen is the applicant's acknowledgement of ownership of the specimen.
15. The laboratory requisition form must be completed in the presence of the applicant. The applicant must check the accuracy of the identifying information. The name of the applicant must be identical on both the requisition and the specimen bottle. The applicant must initial the requisition form.
16. The requisition form must be accurately completed with the following information:
  - 1) name of the applicant;
  - 2) whether the specimen collected was observed;
  - 3) whether the specimen was received directly from the applicant;
  - 4) the drug test profile number;
  - 5) the specimen collection date and time; and
  - 6) the signature of the person responsible for collecting, handling, storing or packaging the specimen at the collection site.
17. The original laboratory requisition must be wrapped around the specimen container and both will be sealed in a security bag provided by the laboratory. A copy of the requisition must be placed in an outside pocket on the same bag and sealed. A second copy will be placed in the applicant's medical file.
18. The sample must be stored in the OMS clinic refrigerator until picked up by the laboratory courier. The refrigerator is located in a secured area which is visible to the staff at all times.
19. Specimens will be picked up daily by the laboratory courier. If a specimen is collected after the daily pickup, the specimen must be secured under lock and key.
20. Both the courier and an OMS staff member must sign off in a log book attesting to an unbroken seal of the security bag.

## FOLLOW-UP PROCEDURE OF POSITIVE TEST RESULTS

1. The laboratory must send confirmed positive test reports to the **Medical Examiner**. The report will include the results of both the initial screening test and the confirmation test. The laboratory's toxicologist must send a confidential letter to the **Medical Examiner** certifying the accuracy and reliability of the confirmed positive test results and adherence to chain of custody procedures.
2. The **Medical Examiner** must inform the applicant of a confirmed positive test result. The applicant will have the opportunity to discuss the test results with the **Medical Examiner**.
3. The **Medical Examiner** will review the applicant's medical and dietary history to learn whether a medication or food substance may have created a false positive result. If the physician suspects a false positive result, the applicant may submit additional information about medication and a dietary history, or submit to another drug screen.
4. If the applicant has a confirmed positive drug test result, the **Medical Examiner** will provide a copy of the laboratory report to the applicant within 30 days of the date of the test.
5. If an applicant has a confirmed positive drug test result and the individual has indicated on the test notification form a desire for retesting at another laboratory, the OMS will notify the laboratories involved. The first laboratory is responsible for transporting the specimen to the second laboratory while maintaining chain of custody procedures. The second laboratory will send a report of retesting and documentation of chain of custody to the **Medical Examiner** with a copy provided to the applicant.
6. The **Medical Examiner** may advise the applicant of counseling and rehabilitation resources.

LABORATORIES CERTIFIED BY THE STATE OF MARYLAND AND NIDA  
TO PERFORM JOB-RELATED DRUG SCREENING

Below is a partial listing of certified laboratories authorized to perform job-related drug screening. The cost of drug screening with confirmation of positive results varies and may cost \$150 or more. If the applicant selects a laboratory which is not listed, he or she will be required to provide documentation of current State and Federal certification to perform drug screening.

METPATH, INC.  
1 Malcolm Avenue  
Teterboro, NJ 07608

National Center for Forensic Science  
Maryland Medical Laboratory  
1901 Sulphur Spring Road  
Baltimore, MD 21227

American Medical Labs., Inc.  
11090 Main Street  
Fairfax, VA 22030

Compuchem Laboratories, Inc.  
P.O. Box 12652  
3308 Chapel Hill Nelson Hwy  
Research Triangle Park, NC 27709

Roche Biomedical Laboratories, Inc.  
1447 York Court  
Burlington, NC 27218

SmithKline Bio-science Laboratories  
11425 Cronhill Road  
Owings Mills, MD 21117

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