The purposes of the School of Nursing Drug Screen Policy are to comply with regulations of area health care agencies, to provide optimal care to patients, and to support the university zero tolerance policy related to illicit use of substances as stated in the Troy University Oracle Student Handbook and the Troy University Faculty Handbook. Students must abide by the drug screen policies of each health care agency in which a student is assigned for clinical practicums. Area agencies require that students not be involved in the sale, manufacture, distribution, purchase, use, or possession of alcohol or non-prescribed drugs. Also, students may not use prescription drugs illegally.

Students will submit authorization allowing either the medical office of Dr. Peter DiChiara or LabCorp Laboratories to collect and test body fluids for the presence of illicit drugs and verify results through Dr. Peter DiChiara or CertifiedBackground.com, respectively. In addition to initial screening that will occur when the student is admitted to the School of Nursing, students may be subject to testing per agency affiliation agreement and/or for cause, such as, slurred speech, impaired physical coordination, inappropriate behavior, or pupillary changes. Test results are confidential with only the School of Nursing director, appropriate program director, and clinical faculty of the student’s clinical courses notified.

In the event that a student is suspected of illicit use of substances while participating in clinical practicums, the director of the program must be notified immediately and the behavior indicating that a student may be under the influence of drugs must be validated by two professional persons (faculty, nurses, physicians, etc.). The suspected individual will be asked to have a drug screen done immediately at his/her own expense and to have a report sent to the director of the program as soon as possible (within 24 hours). The person will be dismissed from all School of Nursing activities until the issue is resolved. Permission to make up work, such as clinical experiences, will be granted based on the drug screen report. If the test is positive for the use of medication that has been prescribed for the student, the student may be allowed to make up clinical practicums. If the test is positive for the use of medication that has not been prescribed for the student, the student will not be allowed to make up clinical practicums.

Student failure to submit to a drug screen, attempting to tamper with, contaminate, or switch a sample will result in the student not being allowed to meet course objectives for clinical practicums; therefore, progression in the program will not be permitted.

Students who test positive for one or more illicit drugs may not continue in clinical practicums and therefore cannot meet objectives for clinical courses. Students who test positive for illicit drugs (in their first drug screen required by Troy University School of Nursing) are notified by their program director. If the student denies having used an illicit drug, the student will be given the option of re-testing at his/her expense within the following 24 hours of the notification – the student must provide proof of the date and time of the drug screen re-test to the program director. HOWEVER, A STUDENT WILL NOT BE ALLOWED TO PARTICIPATE IN A CLINICAL EXPERIENCE AT ANY TIME A DRUG SCREEN RESULT IS POSITIVE! If the second drug screen is also positive, the student must withdraw from the program and may apply for readmission. In order to be considered for readmission, the student must submit a letter from a treatment agency verifying completion of a drug treatment program. Readmission is not guaranteed. If the student is readmitted and tests positive for substance abuse a second time, the student is not eligible for continuation or readmission to the School of Nursing. If the second (re-test) drug screen is negative, the student will be allowed to continue in the nursing program, BUT THE STUDENT WILL BE REQUIRED TO HAVE AT LEAST ONE RANDOM DRUG SCREEN AT HIS/HER EXPENSE DURING THE TIME HE/SHE CONTINUES IN THE NURSING PROGRAM. (This random drug screen will be at a time determined by the student’s instructor/program director, and proof that the drug screen was conducted within 24 hours of written notification to the student must be submitted to the program director within the 24 hours.) If the random drug screen is positive, the student must withdraw from the nursing program, and he/she is not eligible for continuation or readmission to the School of Nursing.
If a student tests positive for a prescribed drug, the student must contact the (Medical Review Officer) University physician and the physician must give the student approval to practice in the clinical area and the physician will notify the School of Nursing director. All test results will be filed in the School of Nursing and shall remain confidential.

**Procedure**

1. Students will be notified by the School of Nursing in advance of the date and time for the initial screening.
2. Students will be required to sign a consent form allowing testing of body fluids for illicit drug content. The consent form will be filed in the School of Nursing.
3. LabCorp Laboratories (www.LabCorp.com) or the office of Dr. Peter DiChiara in Troy are the approved labs for processing School of Nursing drug screens.

**Procedure for Drug Testing at LabCorp through CertifiedBackground.com**

**Troy (ry25), Montgomery (ro72), Phenix City (ry24), and Dothan (tb37) Campuses**

Before going to a LabCorp collection site, students must go online to www.CertifiedBackground.com and click on "Students". In the Package Code box, students must enter the package code noted above in parentheses based on campus location and select a method of payment and pay the fee for drug testing. After paying the drug testing fee, students will receive an email from CertifiedBackground.com directing them to the closest LabCorp collection site location. **Advance payment is required through Certified Background before completing the drug test at a LabCorp Laboratory.** The deadline for submission of drug testing results will be announced by the course instructor. Drug testing is required before students are permitted to attend their first clinical practicums.

**Procedure for Drug Testing through the Office of Dr. Peter DiChiara in Troy, AL**

Students on the Troy campus have the option of going to Dr. Peter DiChiara or a LabCorp Laboratory for testing. Students must go to the office of Dr. Peter DiChiara, 1350 Hwy 231 S., Suite B, Troy, AL and request a drug screen. Students going to Dr. Peter DiChiara will pay his office for the drug test at the time of testing and will NOT pay online to Certified Background.

4. The student will pay the cost of the initial drug screen and all future drug screens.
5. The student shall provide photo proof of identification upon arriving at the specimen collection site. LabCorp Laboratory will provide instructions for specimen collection.
6. LabCorp Laboratory will report results to Certified Background.com for processing by their Medical Review Officer and reporting to the TROY School of Nursing program. Dr. Peter DiChiara as the Troy University Medical Review Officer will review and report drug tests processed through his office. Results of all drug tests are reported to the Director of the School of Nursing and Program Directors.
7. If the results are positive, the student, the director of the program, and the director of the School of Nursing will be notified and the student will not be allowed to attend clinical practicums. The student will be referred to appropriate resources for assistance in dealing with substance abuse.
8. If the student is not allowed to attend clinical practicums and therefore cannot meet course requirements, he/she must withdraw from the program and may apply for readmission (IF the positive result was with the initial screening).

Revised 12-04-02, 04-16-04, 06-09-04, 07-15-05, 08-02-06, 06-22-09, 07-27-10
Student Nurse Drug Screening Policy and Procedure Agreement

I have read, understand, and agree to the Troy University School of Nursing Substance Abuse, Drug Screen, Policy and Procedure. I hereby release Troy University, Troy University School of Nursing, Certified Background.com, LabCorp Laboratories, and the office of Dr. Peter DiChiara from any claim in connection with the Drug Screen Policy and Procedure.

I understand that should any legal action be taken as a result of the Drug Screen Policy and Procedure, that confidentiality can no longer be maintained.

I hereby consent to submit to a urinalysis and/or other tests as shall be determined by the Troy University physician in preparation for participation in clinical practicums for the purpose of determining substance use.

I agree that specimens for the tests will be collected by personnel in the office of Dr. Peter DiChiara or by employees of LabCorp Laboratories and that LabCorp Laboratories will analyze the specimens.

I further agree to, and hereby authorize, the release of the results of said tests to the Troy University designated Medical Review Officer (MRO), and from the MRO to the Director of the School of Nursing and to the Program Director (ASN, BSN, or MSN). Positive results will be reported to the School of Nursing Director by the MRO.

I understand that the current use of drugs and/or alcohol shall prohibit me from participating in clinical practicums. I understand that clinical practicum courses are required in order to graduate from the nursing programs at Troy University. I further understand that I will be subject to the same rules as the health care employees in the facilities where I will be participating in clinical practicums. I understand that prior to participation in clinical practicums, I must submit to a drug screen by LabCorp Laboratories or the office of Dr. Peter DiChiara and provide a certified negative drug screen result to the program (ASN, BSN, Graduate Nursing) in which I am enrolled.

I further understand that if I fail to provide such a certified negative drug result I will be unable to participate in the clinical portion of the School of Nursing program in which I am enrolled.

I further understand that in addition to initial screening that will occur when I am admitted to the School of Nursing, I am subject to testing per agency affiliation agreement and/or for cause should I exhibit signs/symptoms of substance abuse (such as slurred speech, impaired physical coordination, inappropriate behavior, pupillary changes, or other signs/symptoms).

I further agree to hold harmless Troy University, Troy University School of Nursing, Certified Background.com, LabCorp Laboratories, the office of Dr. Peter DiChiara and the MRO from any liability arising in whole or in part from the collection of specimens, testing, and use of the results from said tests in connection with excluding me from participation in clinical practicums.

I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced by anyone to sign this document.

A copy of this signed and dated document will constitute my consent for Certified Background.Com and LabCorp Laboratories or the office of Dr. Peter DiChiara to perform the drug screen and to release the results of any drug screen to Troy University. I direct that LabCorp hereby release the results to Troy University.

Signature ___________________________  Printed Name ___________________________  Date ________________

Witness’ Signature ___________________________  Printed Name ___________________________  Date ________________

(This signed copy is to be given to the Program Director.)