

**University of Colorado School of Medicine**  
**Graduate Medical Education**

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| Policy: Drug Screen Policy |  |  |
| Effective date: 6/1/2013   |  | Revision Date:<br>6/11/2015;<br>6/22/2017;<br>7/7/2017 (editorial);<br>5/15/2019 |

**In this document, “Resident” refers to both specialty Residents and subspecialty Fellows.**

**Policy Statement**

Veteran’s Affairs Medical Center (VAMC): Effective 7/1/2019, the Office of Graduate Medical Education requires that all Residents are subject to VAMC federal requirements which apply to all medical staff. The VAMC requires that all federal employees (including CU GME Residents) are subject to random drug screenings. In accordance with Executive Order 12564 Drug-Free Federal Workplace, Residents are subject to random drug screenings during clinical rotations when scheduled to rotate to at the VAMC.

UCHealth Facilities: Effective 7/1/2017, the Office of Graduate Medical Education requires that all Residents are subject to the medical staff policies at UC Health facilities. The UCHealth *Medical Staff Random Drug Testing* policy requires that medical staff are subject to random drug screenings. In accordance with UC Health policy, Residents are subject to random drug screenings during clinical rotations when scheduled to rotate to a UCHealth facility, including the University of Colorado Hospital.

HCA – HealthONE Facilities: Effective 7/1/2013, HCA – the Office of Graduate Medical Education requires that all Residents are subject to the medical staff policies at HCA - HealthOne facilities. The HCA - HealthOne *Substance Use in the Workplace* policy requires that all employees are subject to drug screening. In accordance with the HCA – HealthOne policy, Residents new to a GME training program and scheduled to rotate to a HCA - HealthONE facility are required to submit to a pre-rotation drug screen prior to starting clinical rotations at a HCA - HealthONE facility.

A negative drug screen is required for participation in any clinical experience.

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### **Rationale**

All health care providers are entrusted with the health, safety and welfare of patients, have access to controlled substances and confidential information and operate in settings that require the exercise of good judgment and ethical behavior. Thus, an assessment of a resident's possible impairment that could diminish the resident's capacity to function in such a setting is imperative to promote the highest level of integrity in patient care.

Clinical facilities that serve as educational and training sites for residents increasingly require drug screening for individuals who provide services within the facility and particularly for those individuals who provide patient care and/or who are at high risk for diversion or tampering of certain substances. In addition, many licensing agencies require that individuals pass a drug screen as a condition of licensure and/or employment. The University of Colorado policy on drugs and alcohol prohibits the unlawful manufacture, distribution, dispensation, possession or use of any controlled substance (illicit drugs of any kind or amount), marijuana (recreational or medical) and the abuse of alcohol by students and employees on university property or as part of any of its activities. It is thus in the interests of both residents and GME to identify and resolve potential issues where a resident may not be allowed to participate in a clinical rotation due to a positive drug screening.

### **Positive Drug or Adulterated/Substituted Screening Results**

Residents who do not pass the required drug screen may face disciplinary action, up to and including termination, in accordance with the appropriate University of Colorado policy. Residents whose test receives an "adulterated" or "substituted" result without a valid medical explanation will be considered a refusal to test. A refusal to take the drug screen will be considered a presumptive positive. Residents may be referred for evaluation and treatment through the Colorado Physicians Health Program (CPHP) or another designated program as a condition for remaining in the program.

### **Additional Policy/Procedure Information**

GME takes patient safety very seriously. It is expected that all Residents will be able to meet the physical and cognitive demands of the clinical setting as well as exhibit sound judgment at all times. Residents who are seriously ill, injured or taking medication that impairs judgment (including, but not limited to, lawfully prescribed medications) may not be able to meet this standard, and therefore may not be suitable for the clinical environment where patient safety is the utmost concern. A determination of any conditions on a resident's ability to participate in clinical experiences or to otherwise proceed in the

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program will be handled on a case by case basis by the Program Director, Department Chair and the Associate Dean for GME. Any resident may be required at any time to submit to immediate drug screening for cause.

### **Pre-Rotation Drug Screen Procedure - HCA HealthONE facilities**

- Residents will be drug screened during the pre-employment immunization screening that all residents are required to undergo during orientation week in a GME Training Program. Residents will be required to complete a Drug Screen Authorization form at the time of the drug screen; this form includes the authorization for results to be released to the designated individual within the GME Office. GME will cover the costs of the drug screen.
- Review of drug screen results will be conducted by the Medical Review Officer of the designated vendor. Passing or failing levels will be determined by the DOT threshold (49 CFR Part 40). Results of the resident drug screen will be reported to the designated individual in GME Office. The drug screen results of residents who receive a positive screen will be reviewed by the Associate Dean for Graduate Medical Education and the Program Director. Any consequences will be communicated to the resident in writing.
- Drug screens that are reported as indeterminate or negative dilute must be repeated, sometimes under direct observation.
- In the event an insufficient specimen is provided during the drug screen the resident will be urged to drink additional fluid (up to 40 ounces), until the resident can provide a sufficient urine specimen or 3 hours have elapsed. If the resident is unable to provide a sufficient specimen after 3 hours, the resident will be given the opportunity to provide a legitimate medical explanation, such as a physician's evaluation documenting a medical reason why the resident is unable to provide an adequate amount of urine. If no acceptable medical explanation is provided according to DOT rules, it will be treated as a refusal to test, which is a presumptive positive.
- After the initial drug screening, residents will be responsible for all costs of any required repeat drug screening.
- Any resident who receives a positive screen, or an "adulterated" or "substituted" result, will be given the opportunity to provide a legitimate medical explanation, such as physician's prescription for the positive result. A medical marijuana prescription will not be accepted as a legitimate medical explanation.
- Drug screen results will be recorded in an internal database within the GME Office and maintained only for the duration of training program for each resident.
- Drug screen results may be reported to a HCA - HealthONE facility in compliance with contractual agreements.
- Unless specified above, the designated vendor for the pre-rotation drug screenings will follow DOT standard procedures for the drug screenings.

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### **Random Drug Screening Procedure – UC Health facilities and the Veteran’s Affairs Medical Center**

- Residents are subject to random drug screenings during their rotations, clinics, and call shifts a UC Health facility or at the Veteran’s Affairs Medical Center to the same extent as medical staff.
  - If not scheduled at the facility during the time of the drug screening, Residents may not be asked to leave another facility in order to be screened.
- The facility will administer and cover the costs of the random drug screening.
- Positive screening results will be reviewed by the Associate Dean for Graduate Medical Education who will notify the Program Director.
- Drug screen results will be recorded in an internal database within the GME Office and maintained only for the duration of training program for each resident.
- Any consequences due to positive screening results will be communicated to the resident in writing.