Policy on Toxicology Screening
Intensive Outpatient Program Substance Abuse
Medication-Assisted Treatment

Policy and Procedure

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Originated By:               Approved By:  
Jonathan Ciampi             Helena Rouhe

Purpose: Monitoring client substance abuse usage requires clients and staff to follow a standardized procedure so physicians and clinicians can determine appropriateness to the Bright Heart Health programs and monitor client safety.

Policy: Upon admittance to the program, client’s are obligated to have a drug screen for opioids (including prescription opioid analgesic compounds), benzodiazepines, barbiturates, cocaine, methadone (and its metabolites), buprenorphine, and amphetamines. Then, client’s will be required to provide drug screens once per month, with the date selected randomly.

Procedure(s):
1. Upon entry client will be required to provide a drug screen.
   a. Intake Staff communicates with client that drug screens are required. Client may visit a drug screen provider (e.g., Quest Diagnostics, Lab Corp or local clinic) to be tested or have one completed by Bright Heart Health staff.
   b. Drug screen must check for opioids (including prescription opioid analgesic compounds), benzodiazepines, barbiturates, cocaine, marijuana, methadone (and its metabolites), buprenorphine, amphetamines, and alcohol.
   c. Drug screens must be provided directly to Bright Heart Health from the provider. Client’s are not allowed to submit drug screen results.
2. Monthly, Client’s must provide updated drug screens randomly.
   a. Drug screen must check for opioids (including prescription opioid analgesic compounds), benzodiazepines, barbiturates, cocaine, marijuana, methadone (and its metabolites), buprenorphine, amphetamines, and alcohol.
   b. Drug screens must be conducted with a Bright Heart Health staff member or provided directly to Bright Heart Health from a drug testing provider. Client’s are not allowed to submit drug screen results themselves.
3. Failure to provide a drug screen will result in the discharge of the client. Clients delayed in providing a drug screen will be reported to the Primary Physician and Primary
Therapist. Continued delays will result in a case review to determine if the client is appropriate to remain in the program.

4. The Clinical Director will ensure compliance to this policy.