

Urine (Instant) Point of Care Screen - SOPDRG002S

The following instructions must be completed for this test. A copy of this SOP can be found in your black reference file or online at <https://crystal-health.co.uk/sample-collector-training/>. If any of the below tasks cannot be completed, call Crystal Health immediately on 0161 707 4935.

The specific sample collection details will be emailed to you for each confirmed booking.

PREPARATION OF FACILITIES


THE FOLLOWING TASKS NEED ONLY BE PERFORMED ONCE PER SAMPLE COLLECTION.

- Ensure the facility is adequate incl. lockable storage if required. If not call Crystal Health Group immediately.
- Remove all potential contaminants from the toilet.
- Search for any hidden samples in the toilet area.
- Use tamper evident tape on any window locks.
- Add blue tablets to toilet bowl (and cistern if possible).
- Use tamper evident tape to seal all taps, flush mechanism (and cistern lid if applicable).
- Display the relevant toilet signs.

YOU MUST ALSO PERFORM THE FOLLOWING TO MAINTAIN CHAIN OF CUSTODY

- Ensure the sample collection facility is private and includes adequate fixtures to perform the sample collection e.g. desk/table and chairs.
- Confirm that no other individuals with exception to the test participant, will have access to the sample collection facility while the work is on progress.
- You must comply with GDPR and confidentiality requirements, and not disclose any personal information or materials either purposefully or accidentally.

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	Version	Approval Date	Review Date
	v07.03.22	March 2022	March 2023

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COLLECTION INSTRUCTIONS

- 1) Provide the donor with the DONOR ADVICE SHEET
- 2) Ensure all pre-sample collection details have been recorded on the ROR form (refer to yellow boxes within the sample collection details sent via email)
- 3) Complete Section 1 (Sample Donor Details) of the ROR form
- 4) Complete Section 3 (Proof of Identity) of the ROR form **Refer to troubleshooting and guidance for further instruction**
- 5) Complete Section 4 (Details of Declared Medication) of the ROR form **if illegal drug use is declared then record in Section 9 and call Crystal Health Group immediately.**
- 6) Ask the donor to sign and date Section 5 (Sample Donor Declaration) of the ROR form, after reading the consent on the reverse. **Refer to troubleshooting and guidance for further instruction**
- 7) Ask the donor to remove outer jacket if applicable
- 8) Ask the donor to empty pockets into the valuables/security bag

9) **BREATH ALCOHOL SCREEN ONLY** - Refer to additional SOPDRG006S (Breathalyser instructions)

10) **SALIVA ALCOHOL SCREEN ONLY** - Complete A through F below

A) You put on a pair of gloves

B) Confirm and initial that the donor HAS NOT eaten, drank (except water), smoked, chewed gum or used mouth wash in the last 15 minutes. Record your initial in Section 6 to verify this


C) Allow the donor to choose from 2 sealed saliva strips

D) Explain the collection procedure to the donor - how to use the saliva strip

E) Obtain a saliva sample from the donor - **Refer to troubleshooting and guidance for visual instruction**

F) Allow the saliva strip to activate for 2 minutes and record the result in Section 7 (Alcohol Screen)

ONLY IF APPLICABLE

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COLLECTION INSTRUCTIONS continued

11) Allow the donor to choose from 2 sealed urine drug test cups

12) **ADDITIONAL DRUG TEST STRIPS (if requested)** - Allow the donor to choose from 2 sealed urine drug test strips (refer to your test details for additional drug test strips required)

13) Instruct the donor to put on a pair of gloves

14) You put on a pair of gloves (if not already done so from alcohol screen)

15) Explain the collection procedure to the donor - how to provide a urine sample

16) Obtain the urine sample and observe the temperature strip for colour change. Record the temperature has been checked in Section 8 (Drug Screen: Details & Results) **Refer to troubleshooting and guidance for visual instruction**

17) **ADDITIONAL DRUG TEST STRIPS ONLY** - Dip any additional drug test strips into the urine sample to the indicated dip mark for 10 seconds. Place the drug test strips on the drip tray provided to activate. **Refer to troubleshooting and guidance for visual instruction**

18) Screw the lid closed on the drug test cup

19) After approx. 2 minutes, observe the results on the cup and any additional drug test strips. Record the results in Section 8 (Drug Screen: Details & Results) **Refer to troubleshooting and guidance for visual instruction**

ONLY IF APPLICABLE

20) **NON-NEGATIVE SCREEN RESULTS ONLY** - Complete A to C below **Refer to troubleshooting and guidance for further instruction**

A) Only proceed to laboratory confirmation if authorised (call Crystal Health for confirmation). This will be indicated in Section 1 of your sample collection instructions.


B) Inform the donor that you have been authorised to send the sample to the laboratory for further testing

C) Now use SOPDRG001S (Urine Laboratory screen & confirmation instructions) to decant the original sample into laboratory containers and send to the laboratory.




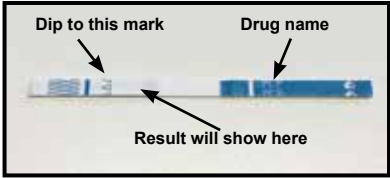
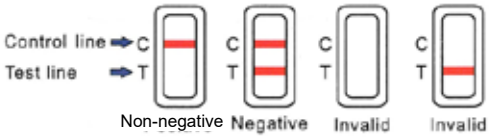
21) Complete Section 11 (Collector's Declaration) of the ROR form


22) Provide all ROR form copies to relevant parties **Refer to troubleshooting and guidance for further instruction**

23) Return all documentation to Crystal Health using the envelope provided

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TROUBLESHOOTING & GUIDANCE			
4) Complete Section 3 of the ROR form (Proof of Identity)	If the required ID is not available and no authorised person is available to verify the identity of the individual, STOP the test and call Crystal Health immediately.		
6) Donor consent - Section 5 of the ROR form	If the donor refuses to provide consent: Complete Section 10 (Non-Conformity)		
10) SALIVA ALCOHOL SCREEN ONLY	The tab end of the saliva strip is to be placed under the donor's tongue for a minimum of 10 seconds (tab face up). Allow to activate for approx. 2 minutes, observe any colour change and record the results.		
16) Obtain the urine sample and observe the temperature strip for colour change. Record the temperature has been checked in Section 8 of the ROR form Please note - images may differ from cups being used.	<p>Insufficient sample: The amount of urine provided does not reach the minimum fill line (without tilting the cup).</p> <p>If there is insufficient sample or the donor cannot produce a sample: Advise the donor to drink 250ml of water at 20 min intervals within a maximum wait period of 2 hours. If no sample can be produced within this period, complete Section 12 (Non-Conformity). Excessive wait times can be recorded on the CONFIRMATION OF TESTING SERVICES form. The donor must be supervised at all times.</p> <p>If the donor refuses to provide a sample: Complete Section 10. (Non-conformity)</p> <p>If the temperature strip on the cup does not activate: A fresh urine sample must be obtained and the procedure repeated using a new cup. If the temperature fails to activate again, STOP the test and call Crystal Health immediately.</p> <p>If you observe any unusual behaviour from the donor or you are concerned that the sample may have been adulterated, STOP the test and call Crystal Health immediately.</p>		 <p>Minimum fill line Temperature strip</p>  <p>Results panel</p>
17) ADDITIONAL DRUG TEST STRIPS (if requested)	Before screwing the lid closed on the drug test cup, dip any additional drug test strips into the urine sample to the indicated dip mark for 10 seconds. Place the drug test strips on the drip tray provided and leave to activate for approx. 2 minutes before reading result.		
19) After approx. 2 minutes, observe the results on the cup and any additional drug test strips. Record the results in Section 8 of the ROR form	<p>In the case of control line failure, decant the urine sample into a new cup and repeat the procedure.</p>		 <p>Control line → C Test line → T</p> <p>Non-negative Negative Invalid Invalid</p>
22) Provide all ROR form copies to relevant parties	WHITE COPY TO CRYSTAL HEALTH	BLUE COPY TO DONOR	YELLOW COPY TO ORGANISATION OR CRYSTAL HEALTH
20) NON-NEGATIVE SCREEN RESULTS ONLY	<ol style="list-style-type: none"> Only proceed to laboratory confirmation if authorised (call Crystal Health for confirmation). This will be indicated in Section 1 of the Test Details form Ensure Section 11 of the Point of Care ROR form has been signed and carbon copies provided to the relevant recipient - regardless of whether the sample goes to the laboratory or not. Now use SOPDRG001S and associated forms to send the urine sample to the laboratory. Call Crystal Health and inform the team that the sample has been sent to the laboratory as a result of a non-negative screen. DO NOT make any reference on the laboratory Chain of Custody (COC) form that a point of care screen has been performed and non-negative result obtained. 		

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