

U.S. PROBATION OFFICE
DISTRICT OF MASSACHUSETTS
NOTICE TO DEFENDANTS IN DRUG TESTING

I, _____, (ID# _____) understand that I have been Court ordered to submit to substance abuse testing at the direction of the U.S. Probation Office as a condition of my Probation/Supervised Release. As part of the drug testing program I understand I must do the following:

- Provide at least 30ml of fresh unadulterated urine within two (2) hours of my arrival at the U.S. Probation office.
- Refrain from consuming excessive amounts of fluids immediately before or for extended periods prior to submitting a urine sample. I understand I must not consume more than 8 oz. of water (½ can of soda) one (1) hour prior to my drug test. I understand excessive consumption of fluids may indicate waterloading to avoid detection of illegal drug use.
- I understand that if because of the water content in my urine, the specific gravity (a measure that compares the weight of urine to the weight of water) of the sample is below 1.003 I may be asked to remain at the U.S. Probation office for up to two hours with limited fluid consumption (8 oz. or less) to provide another sample.
- I understand my samples will be checked for creatinine, a natural breakdown of protein found in urine commonly used as a marker of dilution. I understand that if my sample has a creatinine level of less than 20 mg/dL it will be treated as an adulterated sample, unless the reading is the result of a verified medical condition.
- I understand that providing diluted or adulterated samples, or stalling, are violations of the U.S. Probation office drug testing policy, and could result in adverse action, including the revocation of my Probation/Supervised Release.
- I understand I must not take prescription medications without a valid prescription issued in my name. I understand I must provide the U.S. Probation Office valid medical documentation about any prescription medication I take.

I understand the above requirements and that failure to comply with these requirements could

result in revocation of Probation/Supervised Release .

Defendant

U.S. Probation Officer

Date

Date

Random Urinalysis Program Instructions

Call **1-866-659-3809** Sunday through Thursday between the hours of 3:00 p.m. and 11:59 p.m. **ONLY**. Enter your Client ID# found at the top of this form and on the front of your card and follow the instructions provided. When the recorded message instructs you, report the following day to the site noted on front of this card during reporting hours. Prescribed medication **MUST** be brought to reporting site.

Violations of Phone Reporting Program

1. Failure to call in daily
2. Failure to appear for testing at reporting site during designated hours
3. Stall or insufficient urine sample provided for testing
4. Positive urine results for drug/alcohol use
5. Tampering with provided specimen