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*Rev. 0120*

# **URINE LABORATORY INFORMATION CHECKLIST**

## ***NATIONAL LABORATORY CERTIFICATION PROGRAM (NLCP)***

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<b>DATE Rev. No.</b>	<b>CHANGE</b>	<b>QUESTION NO.</b>
December 12, 2018 Rev. 1218	Revisions to the urine laboratory information checklist are documented in separate document: <i>Summary of Changes - December 2018, NLCP Manual for Urine Laboratories</i>	multiple sections
January 1, 2020 Rev. 0120	Revisions made to the urine laboratory information checklist for consistency with the oral fluid laboratory information checklist	multiple sections

**NATIONAL LABORATORY CERTIFICATION PROGRAM  
URINE LABORATORY CHECKLIST**

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## ***I. URINE LABORATORY INFORMATION CHECKLIST***

### **A. Instructions for the Laboratory**

#### **Pre-inspection Materials**

Before each scheduled inspection, the NLCP sends instructions to the laboratory listing the required pre-inspection materials with due dates for provision. The required materials depend on the inspection type (e.g., initial inspection, maintenance inspection, records audit, special inspection). The following describes some items that may be required.

#### **1. NLCP Urine Laboratory Information Checklist (Sections B and C)**

The laboratory provides up-to-date information to the NLCP on its drug testing operation (i.e., staffing, facility, and procedures) using the NLCP Urine Laboratory Information Checklist (Sections B and C). The information is maintained in NLCP records and is verified by the inspection team (i.e., inspectors, records auditors) at each NLCP inspection.

#### **2. Laboratory Operation Schedule/Inspection Schedule**

The laboratory provides a schedule of its operations specific for urine to the NLCP, listing the days and hours for various processes (e.g., receiving, accessioning, initial testing, confirmation aliquotting, confirmatory drug test extractions, certification). Using this schedule, NLCP staff prepare a tentative schedule for the inspection team. To adequately assess operations on every shift, inspectors will periodically inspect processes that occur during off-shifts. The lead inspector determines the final schedule for the inspection team at most NLCP inspections. The lead auditor determines the final schedule for a records audit. Inspectors should note any changes to the schedule in their checklist submission.

#### **3. Key Staff Interview List**

The laboratory provides a Staff Interviews List to the NLCP, listing key staff, their job titles, and work schedules. NLCP staff select individuals from the list to be interviewed at the inspection and return the list to the laboratory, instructing the laboratory to ensure that the selected individuals are available for interview during the inspection. In addition to interacting with laboratory staff in the course of the inspection, the inspection team conducts formal interviews (i.e., 10 – 15 minutes each) with each selected staff member individually to evaluate their knowledge and ability to fulfill job duties.

#### **4. Laboratory Computers and Information Systems (Section P)**

To facilitate the inspection of the laboratory's computers and information systems, the NLCP directs the laboratory to perform a self-assessment using Section P,

Laboratory Computer Systems. The laboratory will answer Section P checklist questions and provide explanatory comments (e.g., describe procedures and records) to support those answers. The laboratory provides the completed Section P to the inspection team at the beginning of the inspection.

5. Floor plan of the laboratory

The floorplan must clearly identify areas (e.g., accessioning, testing, certification, reporting), clearly indicate how the areas are secured and what security devices are utilized (e.g., which walls are outside walls; which are secured up to the ceiling; the location and type of security devices such as magnetic key cards, cipher locks, padlocks; location of secured storage areas such as refrigerators or freezers and how they are secured). The laboratory must indicate areas where regulated and non-regulated testing, processing, and data review occur in the same area, and where regulated and non-regulated specimens or records are stored in the same area (i.e., short-term and long-term specimen and records storage areas).

6. Laboratory data packages

The laboratory provides data packages to the NLCP: one for a positive specimen and one for a specimen that was reported as adulterated, substituted, or invalid based on specimen validity testing (i.e., invalid-abnormal pH, invalid-inconsistent creatinine and specific gravity results, or invalid-possible <adulterant> activity). These data packages should contain all chain of custody forms, worksheets, initial drug test data, screening/differential specimen validity test data, initial specimen validity test data, confirmatory specimen validity test data, confirmatory drug test data, and reports pertaining to the specimen. The program-required format for data packages is described in Section R of the NLCP Manual for Urine Laboratories. These must be recent specimens, processed since the last NLCP inspection using the laboratory's current procedures. The laboratory must provide test data for all samples in the confirmatory drug test batch. Note: if the laboratory uses more than one technology for initial drug tests (e.g., immunoassay, LC-MS/MS) or confirmatory drug tests (e.g., GC-MS, GC-MS/MS, LC-MS/MS), the laboratory must also provide drug test batch data and associated documents for a drug positive sample tested using each technology.

7. Hotel list

The laboratory provides a list of several hotels/motels located in close proximity to the laboratory and to the airport. Hotels selected should ensure the safety and welfare of the inspectors during the inspection. During the inspection, inspectors should notify the RP of alternate hotel suggestions and notify the NLCP of suggestions after the inspection.

## 8. Directions

The laboratory provides a clear, precise map with directions describing the routes from the airport to the hotels and from the hotels to the laboratory.

### **Non-Negative Specimen List (NNSL)**

Prior to each NLCP inspection that includes a records audit, the NLCP notifies the laboratory of the specified audit period (e.g., the six-month period ending one month prior to the month of the inspection). The laboratory is required to identify all regulated urine specimens reported during that time period as positive, adulterated, substituted, invalid, rejected, reconfirmed, or failed to reconfirm. In addition, the laboratory must identify all specimens received for testing from an Instrumented Initial Test Facility (IITF), *including specimens reported as negative*. The laboratory must submit to the NLCP a list of these specimens, with specific information for each specimen. The laboratory also provides a monthly summary for the records audit period listing the numbers of regulated specimens reported as positive, adulterated, substituted, invalid, negative, rejected, reconfirmed, or failed to reconfirm.

The NLCP provides instructions for the NNSL to the laboratory prior to the inspection. These instructions include, but are not limited to, the following:

1. Format for NNSL spreadsheet
2. NNSL categories:
  - The laboratory will provide information concerning results reported for the following NNSL categories: amphetamine/methamphetamine/enantiomers, methylenedioxymethamphetamine (MDMA)/methylenedioxyamphetamine (MDA), benzoylecgonine, codeine/morphine, 6-acetylmorphine (6-AM), hydrocodone/hydromorphone, oxycodone/oxymorphone, phencyclidine, cannabinoids, adulterated, invalid, substituted, and rejected.
  - If the laboratory has tested a regulated specimen for an additional Schedule I or II drug upon request of a federal agency and reported the specimen as positive (i.e., drug present at or above the cutoff used for the test), the laboratory must submit a separate NNSL sheet for that drug.
  - If no specimen is identified for a specific category, the laboratory must submit that sheet indicating "None."
3. Specimens to be included on the NNSL:
  - Specimens reported positive, adulterated, substituted, invalid, rejected, reconfirmed, and failed to reconfirm.
  - Specimens received for testing from an IITF, *including those reported negative*.

The laboratory must remove all known NLCP performance testing (PT) samples.

#### 4. Requirements for records assembly

The NLCP selects specimens from the submitted NNSL for review during the inspection and provides the selected list to the laboratory and to the lead auditor. The laboratory must organize and assemble records for each of the selected specimens to facilitate their review by the audit team during the inspection. At a minimum, records must be assembled by NNSL category and in chronological order, to facilitate their location within labeled storage folders/boxes. Auditors must be able to retrieve all records (excluding failed batches) pertaining to a specimen on the selected NNSL with a minimum of assistance from the laboratory staff.

During the inspection, the inspection team should alert the Responsible Person (RP) when a record appears to be missing. The lead auditor and the RP will prepare an inventory of records for the selected specimens on the NNSL that were not available for review. The RP must forward the missing records to the NLCP for subsequent review and follow-up.

#### **Laboratory Preparation Criteria List**

Prior to each inspection, the NLCP sends a Laboratory Preparation Criteria List to the laboratory, listing materials that must be available for the inspection team upon their arrival at the laboratory. Materials include a copy of the standard operating procedures (SOP) manual for each inspection team member, NLCP PT records, personnel files, quality assurance (QA) records, calibrator and control records, reagent records, validation records, a timeline of any changes in calibrator or control criteria and acceptance limits during the records audit period, and documentation of security procedures (e.g., access rosters and visitor logs for each secured area). Other items may be requested for review prior to or during the inspection.

All materials should be in the inspectors' work area **before** the arrival of the team. The laboratory must also take steps to ensure the security of these records when they are unattended during the inspection. All inspectors and auditors should be given access to the inspectors' work area (e.g., each given their own key, access card, or code).





B-4. List the changes made by the laboratory (e.g., new instrumentation, new or revised analytical procedures, new or revised software) **since the last NLCP inspection**, and effective date of each change:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B-5. Days/hours of operation of the forensic urine drug testing laboratory:

\_\_\_\_\_ days per week; \_\_\_\_\_ hours per day

If < **7 days**, indicate the day(s) that the laboratory is routinely **not** operational:

\_\_\_\_\_

B-6. Does the laboratory have a U.S. Drug Enforcement Agency (DEA) registration?

YES NO

If **YES**, for which schedules?

\_\_\_1 \_\_\_2 \_\_\_2N \_\_\_3 \_\_\_3N \_\_\_4 \_\_\_5

If **NO**, explain how reference materials containing controlled substances are acquired:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B-7. Describe the relevant State licensure requirements for urine forensic toxicology for the State in which the laboratory is located:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B-8. List laboratory certifications/licenses:

\_\_\_ States (List): \_\_\_\_\_

\_\_\_ CLIA/HCFA<sup>1</sup> (List Specialties): \_\_\_\_\_

\_\_\_ CAP<sup>2</sup> (List Specialties): \_\_\_\_\_

\_\_\_ NLCP (Specify Matrix): \_\_\_\_\_

\_\_\_ Others (Specify): \_\_\_\_\_

<sup>1</sup>Clinical Laboratory Improvement Amendments(CLIA)/Health Care Financing Administration (HCFA)

<sup>2</sup>College of American Pathologists (CAP)

- a. Are any of the laboratory's certifications and/or licenses for a specialty that is not related to workplace drug testing based on the qualifications of an RP or Alt-RP? YES NO

If **YES**, list each specialty with the department name, location, and the name of the individual (i.e., RP or Alt-RP). **Note:** see also Question B-11 below.

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B-9. List name, job title, education, and licenses/certifications for the following key staff:

- Note:** (1) May attach separate sheet listing additional key staff  
 (2) Indicate (\*) individuals new to the positions in the last 6 months

	Name	Job Title	Education	License/ Certification
<b>RP(s)</b>				
<b>Alt-RP(s)</b>				
<b>Certifying Scientist(s)</b>				
<b>Certifying Technician(s)</b>				
<b>Supervisor(s)</b>				

<b>Other Key Staff</b>				

a. Is licensure and/or certification required for any of the above positions in the State in which the laboratory is located? YES NO

If **YES**, describe requirements:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

B-10. If there is more than one RP, briefly describe how the RPs share the responsibilities for HHS-certified laboratory operations and procedures for urine and for any other matrix for which the laboratory is certified, and for non-regulated workplace drug testing.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

B-11. If an RP has any technical and administrative responsibilities that are not related to workplace drug testing (e.g., in another laboratory department or location), list the RP's name, department name and location, the individual's responsibilities, and the amount of time spent (hours/week) on those responsibilities.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

B-12. Describe the administrative relationships that exist for the **key staff** of the forensic drug testing laboratory (see B-9 above):

a. To whom does the RP(s) report? \_\_\_\_\_

b. Who evaluates the performance of the RP(s)? \_\_\_\_\_

\_\_\_\_\_

c. What staff administratively report **directly** to the RP(s)? \_\_\_\_\_

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d. The RP(s) evaluates the performance of which staff members?

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e. Which staff members do not report to the RP(s)? \_\_\_\_\_

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B-13. Does the laboratory test any federal agency specimens for drugs other than those specified in the HHS authorized drug test panel? YES NO

If **YES**, list the drug(s) and answer a and b below:

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a. Does the laboratory have a copy of the HHS waiver for a federal agency to test the additional drug(s) on a routine basis? YES NO

b. Does the laboratory maintain written authorization from federal agencies to test the additional drug(s) on a case-by-case basis? YES NO

B-14. Does the laboratory perform additional specimen validity testing for urine specimens (e.g., for a biomarker or for a specific adulterant other than those required by the HHS Guidelines)? YES NO

If **YES**, list the measurand for each test and answer questions a and b below:

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a. Does the laboratory have approval from the NLCP to perform the test(s)? YES NO

b. Does the laboratory perform the tests on all regulated urine specimens? YES NO

If b is answered **NO**, list the conditions or clients for which specimen validity testing is performed:

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B-15. Average number of urine specimens analyzed by the laboratory each day for drugs of abuse **during the six months preceding submission of Sections B and C (both regulated and non-regulated specimens):**

Specify the months \_\_\_\_\_

Total urine specimens/day \_\_\_\_\_

How was this number derived? \_\_\_\_\_

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B-16. The total number of individuals who have authorized unescorted access to the secure forensic drug testing laboratory facility:

\_\_\_\_\_ individuals

The numbers of individuals with authorized unescorted access to secured laboratory areas, by role:

\_\_\_\_\_ Staff processing or testing workplace drug testing specimens

\_\_\_\_\_ Support personnel (customer service, IT, maintenance)

\_\_\_\_\_ Other. List each additional role/job title: \_\_\_\_\_

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B-17. List the total numbers of staff who are trained and routinely perform the following activities **for regulated urine specimens:**

Activity	No. of Individuals
Accessioning	
Initial drug testing	
Screening/initial specimen validity testing	
Confirmatory specimen validity testing	
Specimen preparation (e.g., extraction)	
Confirmatory drug testing	
Certification	

**C. Laboratory Procedures** (completed by the laboratory)

**NOTE:** Before using an electronic Federal Custody and Control Form (ECCF) system for regulated specimens, an HHS-certified test facility must submit a detailed plan and proposed standard operating procedures (SOPs) for the ECCF system to the NLCP for review and authorization, and undergo an onsite inspection.

C-1. Provide a description of the laboratory's procedures for the following:

**Security**

- Building
- Department
- Specimens
- Records

**Note:** (1) *Insert here.*  
(2) *Do not exceed a total of one page.*

C-2. Provide a description of the laboratory's procedures for the following:

**Specimen Receiving/Accessioning**

- Receipt of specimen packages, how they are handled, receipt of specimens received with a paper custody and control form (CCF), receipt of specimens received with an ECCF, who reviews the accuracy of the information on the custody and control forms and how discrepancies are documented.
- Handling problems with specimen bottles and/or custody and control forms.
- Assignment of laboratory accession numbers.
- Location of all temporary storage areas.

**Note:** (1) *Insert here.*  
(2) *Do not exceed a total of one page.*

C-3. Provide a description of the laboratory's procedures for the following:

**Aliquotting Procedures**

- Aliquotting of the original specimen bottles (i.e., who and where).
- Amount of specimen aliquoted for each test.
- Aliquotting procedure for initial and confirmatory drug and specimen validity tests (including description of automated aliquoting equipment).
- Transfer of aliquots from the individuals performing the aliquotting to those who will be testing the aliquots.

**Note:** (1) *Insert here.*  
(2) *Do not exceed a total of one page.*

C-4. Provide a description of the laboratory's procedures for the following:

**Specimen Accessioning**

- Introduction and/or aliquotting of blind controls into the test batches by accessioning personnel.
- If applicable, preparation and submission of blind samples as donor specimens from external sources.

**Note: (1) Insert here.**  
**(2) Do not exceed a total of one page.**

C-5. Provide a description of the laboratory's procedures for the following:

**First and Second Initial Drug Tests**

- Handling and testing of aliquots by laboratory personnel.
- Maintenance of chain of custody during the testing.

**Note: (1) Insert here.**  
**(2) Do not exceed a total of one page.**

C-6. Provide a description of the laboratory's procedures for the following:

**First and Second Initial Drug Tests**

- How batches are constituted (e.g., how many specimens are in a batch, whether a batch is constituted in one session or specimens are added to the batch throughout the day, whether regulated and non-regulated specimens are tested in the same batch).
- The distribution of specimens, calibrators, and controls within each batch.
- The acceptance criteria for calibration and for each control (open and blind) in each batch and when and by whom these are evaluated and documented.
- The criteria for accepting all donor specimen results or only a partial number of donor specimens in a batch.
- For alternate technologies (as applicable), the criteria for accepting, re-preparing, or reinjecting a specimen.

**Note: (1) Insert here.**  
**(2) Do not exceed a total of one page.**

C-7. Provide the following information for the first and second initial drug tests:

Describe the procedure(s) and acceptance criteria for calibration:

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Describe the method used to calculate the concentrations/results of analytes:

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C-8. Provide a description of the laboratory's procedures for the following:

**Specimen Validity Tests (Initial, Confirmatory and Screening/Differential)**

- Handling and testing of aliquots by laboratory personnel.
- Maintenance of chain of custody during the testing.
- List additional specimen validity tests (e.g., for a biomarker or for a specific adulterant in addition to those required by the HHS Guidelines).
- For each additional specimen validity test: the decision points and what constitutes abnormal results.

**Note: (1) Insert here.**  
**(2) Do not exceed a total of one page.**

C-9. Provide an outline or a legible flowchart that comprehensively describes the laboratory's Specimen Validity Testing.

**Note: (1) Insert here.**  
**(2) Do not exceed a total of one page.**

- a. List any changes to the specimen validity testing outline/flowchart during the time period of the NNSL audit, with the effective date of each change.

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C-10. Provide a description of the laboratory's procedures for the following:

**Specimen Validity Tests (Initial, Confirmatory and Screening/Differential)**

- How batches are constituted (e.g., whether a batch is constituted in one session or specimens are added to the batch throughout the day, whether regulated and non-regulated specimens are tested in the same batch).
- The distribution of specimens, calibrators, and controls within each batch.
- The acceptance criteria for each control (open and blind) in each batch and when and by whom these are evaluated and documented.
- The criteria for accepting all donor specimen results or only a partial number of donor specimens in a batch.

**Note: (1) Insert here.**  
**(2) Do not exceed a total of one page.**

C-11. Provide the following information for the Specimen Validity Tests (i.e., initial, confirmatory, and screening/differential tests):

Describe the procedures and acceptance criteria for calibration:

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Describe the method used to calculate the concentrations/responses of measurands:

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C-12. Provide a description of the laboratory's procedures for the following:

**Confirmatory Drug Tests**

- Handling and testing of aliquots by laboratory personnel.
- Maintenance of chain of custody during the testing.

**Note: (1) Insert here.**  
**(2) Do not exceed a total of one page.**

C-13. Provide a description of the laboratory's procedures for the following:

**Confirmatory Drug Tests**

- How batches are constituted (e.g., how many specimens are in a batch, whether a batch is constituted in one session or specimens are added to the batch throughout the day, whether regulated and non-regulated specimens are tested in the same batch).
- The distribution of the donor specimens, calibrators and controls within each batch.
- The acceptance criteria for each control (open and blind) in each batch and when and by whom these are evaluated and documented.
- The criteria for accepting, re-preparing, or reinjecting a specimen.

**Note: (1) Insert here.**  
**(2) Do not exceed a total of one page.**

C-14. Provide the following information for the Confirmatory Drug Tests:

Describe the requirements for calibration including criteria for exclusion of unsatisfactory calibrators:

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Describe the method used to calculate the concentrations of analytes for each calibration procedure used by the laboratory:

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Describe the procedures used to assess internal standard recovery (i.e., the sample or samples used to establish the acceptance range for the batch, any exclusion criteria).

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Describe the procedures used to calculate ion ratios and assess acceptability (i.e., the sample or samples used to establish acceptance ranges for the batch).

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C-15. Provide a description of the laboratory's procedures for the following:

**Certification/Reporting Procedures**

- Review of all calibration and control data.
- Review of chain of custody forms for the specimen and for all aliquots.
- Review of specimen data.
- Documentation and certification of results (i.e., procedures for paper CCFs, combination electronic/paper CCFs, and electronic CCFs, including use of electronic signatures by certifying technicians and certifying scientists).
- Release/reporting of results.
- Verification of information (e.g., CCF and computer resident results).

**Note:** (1) *Insert here.*  
(2) *Do not exceed a total of one page.*

C-16. Provide a description of the laboratory's procedures for the following:

**Electronic Reporting Procedures**

- Reporting using an ECCF system: ECCF system provider(s) name and address; ECCF reporting procedures including how ECCF data are secured (e.g., during transmission and storage); reporting methods; how MROs access completed ECCFs.
- Web-based reporting: where report data are sent (i.e., website addresses; location and ownership of servers); file formats; external service provider(s) name and address (including cloud-based service providers); how report data are secured (i.e., during transmission and storage); how MROs access reports.
- Release of computer-generated electronic reports (i.e., methods other than above).

**Note:** (1) *Insert here.*  
(2) *Do not exceed a total of one page.*

C-17. Provide an example of the laboratory's computer-generated electronic report for each of the following laboratory results:

- Negative
- Negative, Dilute
- Rejected
- Cocaine Metabolite Positive
- 6-AM/Codeine/Morphine Positive
- Hydrocodone/Hydromorphone Positive
- Amphetamine/Methamphetamine Positive
- D-Methamphetamine (if applicable)
- Invalid Result
- Substituted based on Creatinine and Specific Gravity
- Substituted based on Biomarker (if applicable)
- Specimen Adulterated: pH
- Specimen Adulterated: Other (if applicable)
- Split Specimen: Reconfirmed
- Split Specimen: One or More Primary Specimen Results Not Reconfirmed

C-18. Does the laboratory use an off-site computer information system? YES NO

If YES,

Address: \_\_\_\_\_

\_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

C-19. Provide a description of the laboratory's procedures for the following:

**Disposition of Specimens and Aliquots**

- Handling of original specimen bottles and aliquots after testing is completed.
- Procedure for transferring positive, adulterated, substituted, and invalid specimens to long-term frozen storage.

**Note: (1) Insert here.**

**(2) Do not exceed a total of one page.**

**Complete the C Tables:**

- Table C-1-a-1.** Immunoassay Initial Drug Test Methods and Instruments
- Table C-1-a-2.** LC-MS/MS Initial Drug Test Methods
- Table C-1-a-3.** Initial Drug Test Methods and Instruments – Liquid Chromatography.
- Table C-1-a-4.** Initial Drug Test Methods and Instruments – Tandem Mass Spectrometry
- Table C-1-b.** Immunoassay First Initial Drug Test Calibrators and Controls
- Table C-1-c.** Immunoassay Second Initial Drug Test Calibrators and Controls
- Table C-1-d.** Initial Drug Test Calibrators and Controls – LC-MS/MS
- Table C-2-a-1.** Initial Specimen Validity Test Methods and Instruments  
(continued on **Table C-2-a-2** as needed)
- Table C-2-b-1.** Confirmatory Specimen Validity Test Methods and Instruments (continued on  
**Table C-2-b-2** as needed)
- Table C-2-c-1.** Screening/Differential Specimen Validity Test Methods and Instruments  
(continued on **Table C-2-c-2** as needed)
- Table C-2-d-1.** Initial Specimen Validity Test Calibrators and Controls  
(continued on **Table C-2-d-2** as needed)
- Table C-2-d-3.** Confirmatory Specimen Validity Test Calibrators and Controls  
(continued on **Table C-2-d-4** as needed)
- Table C-2-d-5.** Screening/Differential Specimen Validity Test Calibrators and Controls
- Table C-3-a.** Confirmatory Drug Test Methods
- Table C-3-b-1.** Primary Confirmatory Drug Test Methods and Instruments – Gas  
Chromatography
- Table C-3-b-2.** Alternate Confirmatory Drug Test Methods and Instruments – Gas  
Chromatography
- Table C-3-b-3.** Primary Confirmatory Drug Test Methods and Instruments – Liquid  
Chromatography
- Table C-3-b-4.** Alternate Confirmatory Drug Test Methods and Instruments – Liquid  
Chromatography
- Table C-3-c-1.** Primary Confirmatory Drug Test Methods and Instruments – Mass Spectrometry
- Table C-3-c-2.** Alternate Confirmatory Drug Test Methods and Instruments – Mass Spectrometry

- Table C-3-c-3.** Primary Confirmatory Drug Test Methods and Instruments – Tandem Mass Spectrometry
- Table C-3-c-4.** Alternate Confirmatory Drug Test Methods and Instruments – Tandem Mass Spectrometry
- Table C-3-d-1.** Primary Confirmatory Drug Test Calibrators and Controls
- Table C-3-d-2.** Alternate Confirmatory Drug Test Calibrators and Controls
- Table C-4-a.** AMPS Enantiomer Test Methods
- Table C-4-b.** AMPS Enantiomer Calibrators and Controls
- Table C-4-c.** AMPS Enantiomer Result Calculation