

**Guidelines for
Medical Staff Policies and
Procedures
for Drug Testing:
*What You Test For,
When, Why and How***

From
California Public Protection & Physician Health, Inc.
and
California Society of Addiction Medicine

2022

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Introduction

Statement of Purpose

Hospital medical staffs, medical groups and others with responsibility for physician health and patient safety use drug testing as one method of assessing the ability of a health care provider to deliver safe patient care. Drug testing is used in several distinctly different situations and different policies and procedures apply to each.

The information in this document is intended to help those who develop and implement the policies and procedures for such drug testing. This includes those involved in potentially disciplining physicians (e.g., Medical Executive Committees) as well as those involved in trying to assist physicians clinically (e.g., Wellbeing Committees).

What This Document Covers and What It Does Not

What is covered: medical staff and medical group policies and procedures, with advice regarding advance preparation, to better obtain useful reports of drug tests when done “for cause” or in response to a “reasonable suspicion,” or post-accident, or as part of an evaluation, or, in some cases, part of a monitoring program.

Neither pre-employment testing nor random testing is specifically addressed in this document, although many of the same principles may apply. Additionally, this document is not meant to substitute for accepted “Drug Free Workplace Policies.” Recommendations regarding Drug Free Workplace Policies are typically made by the state department of labor. While physicians who are employees may fall under such policies, here we are specifically addressing policies to be adopted by the medical staff and/or its wellbeing committee.¹

¹ As noted in The Joint Commission Standards for Medical Staffs, medical staffs are to implement “a process to identify and manage matters of individual health for licensed independent practitioners which is separate from actions taken for disciplinary purposes.” Such a process is most usually implemented by a committee of the medical staff which has come to be known by several different names. Examples are Wellbeing Committee, Physician Health Committee, Physician Aid Committee.” For consistency, in this document, we use **Physician Wellbeing Committee** and by that term mean a committee of the medical staff that is charged with the same responsibilities as are listed by The Joint Commission [MS 11.01.01] and distinguished from a committee charged to address “wellness” or matters related to burnout or professional satisfaction. To distinguish terminology, we follow this definition: “a wellness committee” addresses the quality of life and professional satisfaction for all physicians. “A wellbeing committee”, as used by TJC and this document, addresses an individual physician when addiction, mental health, behavioral issues, the effects of aging are a concern. See Appendix C.