



You have been instructed to participate in Drug testing at the Cherokee County Drug Lab.

The Cherokee County Drug Lab facilitates drug and alcohol testing in coordination with the Cherokee County Court System and Cherokee County Accountability Courts.

In order to comply, you must complete the attached forms and return to Heather Hays via email hahays@cherokeega.com or by delivering them to the Drug Lab during collection hours.

Lab collection hours are 6:00am -10:00am, 7 days a week. Afternoon hours are available for non-accountability court participants 2:00pm-6:00pm, Monday-Friday. Afternoon hours exclude holidays.

The Cherokee County Drug Lab is located at the Historic Courthouse in downtown Canton. The address is 100 North Street, Suite G23, Canton, GA 30114. The Drug Lab entrance is located on the backside of the building.

Once forms are complete and returned you will begin calling the hotline **678-261-5870** nightly and report for testing as directed.

A valid form of identification is required at the time of testing. Payment for drug testing is required at time of service. Acceptable forms of payment are money order/ certified check or credit/debit card payments (additional fee.) The cost of a drug test is \$35.00.

Please follow all signs posted at the Lab and prepare appropriately for testing.

To contest a drug test result and request forensic confirmation, a payment of \$65.00 must be brought to the Drug Lab during collection hours within seven (7) days from the date of the test.

Please visit our website for additional information:

<https://www.cherokeega.com/Drug-Lab/>

Thank you,

Heather Hays

Lab Supervisor

HAHays@cherokeega.com

678-493-6578

TESTING INFORMATION SHEET

CLIENT

First Name: _____ Middle Name: _____ Last Name: _____
Social Security #: _____ - _____ - _____ State ID# (SID): _____
Date of Birth: ____/____/____ Race: _____ Sex: _____ Offender #: _____

ADDRESS

Address: _____
City: _____ State: _____ Zip Code: _____
Home Telephone #: () _____ - _____ Pager/Cell Phone #: () _____ - _____
Email Address: _____

TESTING COLOR

Brown White Purple Ivory Blue Sage Orange **No less than** _____ **times per** _____

READ AND SIGN BELOW

By signing this document, I am stating to the Court under penalty of perjury that the information contained herein is true and correct. I consent to urine drug screenings for the purpose of detecting the use of prohibited substances. I understand that all screens will be performed by certified lab technicians, trained to perform such screens. I consent for the Cherokee County Drug Lab to release results of my urine drug screenings to the referring agency. I understand that screenings for dilution and adulterants may also be performed and detection of attempts to dilute or adulterate my sample will be reported to the referring agency. I understand that I may request confirmation testing, at my own expense, on any positive, dilute, or adulterated sample within 72 hours. I also consent for the Cherokee County Drug Lab to receive results of any confirmation testing and that results of such confirmation testing shall be released to the referring agency. I hereby release the facility that releases such information to the Cherokee County Drug Lab from any and all liability for complying with this authorization. I understand that any disclosure made is bound by Part 2 of Title 42 of the Code of Federal Regulations governing confidentiality of donor records and that recipients of this information may re-disclose it only in connection with their official duties. I understand that this consent will remain in effect for the length of time prescribed in the court order. The referring agency is responsible for providing the Cherokee Drug Lab with any revocation of this release. I understand the cost for each drug test is \$35.00 and will be paid prior to collection of specimen.

Signature of Person Under Supervision

Date

Witness

Date

Referring Agency (circle one): CANP GPM AFP DFCS JUV CCPS DA SOL MISC. _____

For Office Use Only

Please send results to: _____

Date information received by Cherokee Drug Lab Office: _____

___W ___Q ___T

CHEROKEE COUNTY DRUG LAB

CHEROKEE COUNTY HISTORIC COURTHOUSE
100 NORTH STREET, SUITE G23
CANTON, GEORGIA 30114
TELEPHONE: 678-493-6578

Consent to Release Information

Referring Agency: _____ Contact: _____

Case or referral number: _____ Phone: _____

Email for results to be sent to: _____

I, _____, hereby consent to urine drug screenings for the purpose of detecting the use of prohibited substances. I understand that all screens will be performed by certified lab technicians, trained to perform such screens.

I consent for the Cherokee County Drug Lab to release results of my urine drug screenings to the referring agency. I understand that screenings for dilution and adulterants may also be performed and detection of attempts to dilute or adulterate my sample will be reported to the referring agency.

I understand that I may request confirmation testing, at my own expense, on any positive, dilute, or adulterated sample. I also consent for the Cherokee County Drug Lab to receive results of any confirmation testing and that results of such confirmation testing shall be released to the referring agency. I hereby release the facility that releases such information to the Cherokee County Drug Lab from any and all liability for complying with this authorization.

I understand that any disclosure made is bound by Part 2 of Title 42 of the Code of Federal Regulations governing confidentiality of donor records and that recipients of this information may re-disclose it only in connection with their official duties.

I understand that this consent will remain in effect for the length of time prescribed in the court order. The referring agency is responsible for providing the Cherokee County Drug Lab with any revocation of this release.

Signature of Donor Date

Witness Date

Donor's DOB

URINE ABSTINENCE TESTING AND INCIDENTAL DRUGS OF ABUSE EXPOSURE CONTRACT

Because urine tests used for drugs of abuse testing are very sensitive, consumption of certain products can result in positive screens. In order to preserve the integrity of the testing program, it is necessary to restrict and/or advise persons scheduled for random tests regarding the use of certain products.

Since it is difficult to remember which drugs to avoid, this medication list has been prepared for you. The list includes what you can take and what you must avoid. You have to take responsibility for all drug use because not every physician, pharmacist, or dentist knows about the court-ordered testing requirement you are under.

If you have a particular problem, be sure to discuss it with your probation officer. No drug of any kind is to be taken without providing proof to your probation officer. When you show up for testing, you must always note on the paperwork you sign any prescription or over-the-counter medications you have taken.

Inform physicians, dentists, pharmacists, and all other persons involved in your receiving medications that you are randomly tested for drugs of abuse. **This is extremely important since a positive test will be a violation of your probation/ program and may result in your incarceration.**

DRUGS THAT CAN BE TAKEN

Do not use any amount beyond what is recommended

Actifed	Clinoril	Motrin	Tagamet
Advil (OTC)	Clinoril (Rx)	Mucinex	Teldrin
Advil Cold	Comhist	Nalfon	Tessalon Perles
Afrin	Coricidin HBP	Naproxen	Theraflu
Aleve	Dimetapp	Ornade	Toradol
Alka-Seltzer Cold	Dramamine	Pepcid	Triaminic
Alka-Seltzer Plus	Feldene (Rx)	Pepto-Bismol	Tums
Allegra	Hismanal	Polarmine	Tylenol (OTC)
Allerest	Ibuprofen	Roloids	Zyrtec
Aspirin	Imodium A-D	Seldane	
Benadryl	Maalox/Mylanta	Sudafed PE	
Claritin	Meclomen (Rx)	(Phenylephrine HCL)	
Tylenol Cold			

DRUGS THAT ARE NOT TO BE TAKEN

Do not use, consume, or apply any of these drugs

It is **YOUR** responsibility to limit exposure to products and substances detailed below. It is **YOUR** responsibility to read product labels, to know what is contained in products you use and consume, and to inspect these products **BEFORE** using them. **Use of products in violation of this contract will NOT be allowed as an excuse for a positive test result.**

ALCOHOL

Aftershave Lotion	Hair Tonics	Mouthwash	Sterno
Extracts (Lemon, etc.)	Medical Alcohol	Perfumes	Wood Alcohol

ANALGESICS

Darvocet N-100	Fiorinal	Parafon Forte	Talwin
Darvon, Darvon CPD	Norflex	Robaxin, Robaxisal	Wygesic
Equagesic	Norgesic	Soma	Ultram

ANTICHOLINERGICS/ANTISPASMODICS

Atropine	Hyoscine	Librax	Valpin
Belladonna (and derivatives)	Kinesed	Pro-Banthine	
Donnatal	Levsin PB	Scopolomine	

BARBITURATES

Amytal Na	Donnatal	Nembutal	Surital
Brevital	Eskobarb	Pentothal	Tuinal
Butabarbital	Luminal	Phenobarbital	
Butisol Na	Mebaral	Seconal	

BROMIDES

Bromo Quinine	Dr. Miles' Nervine
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COUGH SYRUPS CONTAINING

Codeine	Hycodan	Oxycodone
Dextromethorphan	Hydrocodone	Tussionex

FOOD AND OTHER INGESTIBLE PRODUCTS

CBD Oil	Kava Kava	Poppy Seeds (<i>Do not ingest anything with poppy seeds</i>)
E-Cigarettes or Vaporizer	Kratom	Sure-Jell (Pectin)
Pens	Phenibut	

HALLUCINOGENS

Bufotenine (Dimethyl Serotonin)	Ibogaine	Marijuana (THC)	STP - Serenity Tranquility
Diethyltryptamine (DET)	Ketamine	Mescaline	Peace (DOM, 2,5-
Dimethyltryptamine (DMT)	LSD (Lysergic Acid diethylamide)	Peyote	Dimethoxy-4-
Hashies		Psilocin	methylamphetamine)
Hashish		Psilocybin	

DRUGS THAT ARE NOT TO BE TAKEN (CONTINUED)

Do not use, consume, or apply any of these drugs

MINOR TRANQUILIZERS

Ativan	Librium	Paxipam	Versed
Equanil	Meproamate	Serax	Vesprin
Klonopin (Clonazepam)	Milpath	Trancopal	Xanax
Librax	Miltown	Tranxene	
Libritabs	Pathibamate	Valium	

NARCOTICS/OPIATES/OPIOIDS

A.P.C. with Demerol	Fiorinal 1, 2, 3, or 4	Numorphan	Stadol
B & O Suppettes	Heroin	Oxycodone	Sublimaze
Bancap HC	Hycodan	Oxymorphone	Suboxone (Buprenorphine)
Cocaine	Hydrocodone	Pantopan	Synalgos-DC
Codeine	Hy-Phen	Paregoric	Talacin
Damason-P	Innovar Injection	Pentazocine	Talwin
Darvocet	Leritine	Percobarb	Opium and Opium Tinctures
Darvon	Levo-Dromoran	Percocet	Tussionex
Demerol	Lomotil	Percodan	Tylenol 1, 2, 3, or 4
Dilaudid	Lorcet	Phenaphen 1, 2, 3, or 4	Tylox
Dolene	Lortab	Phenazocine	Ultram
Dolophine	Mepergan Forte	Propoxyphene Hydrochloride	Vicodin
Empirin 1, 2, 3, or 4	Methadone	Roxicet	Zohydro
Empracet	Morphine	Roxicodone	Zydone
Fentanyl-Sublimaze	Nubain	Soma (Carisoprodol)	

OVER THE COUNTER (OTC)

Antihistamines: Dristan, Contac, Sominex, Nytol, NyQuil	Caffeine Preparations: NoDoz, Vivarin	Decongestants: Dextromethorphan (DM)	Diet Aids: Dexatrim
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SEDATIVES/SLEEPING AIDS

Alurate	Compazine	Methaqualone (Sopor)	Quaaludes
Ambien	Compoz (OTC)	Milpath	Restoril
Amytal	Dalmane	Miltown	Secobarbital
Ativan	Deprol	Nembutal	Secondal Sodium
Butalbital	Doriden	Noludar	Serax
Butalbital Acetaminophen	Equanil (Meproamate)	Nytol (OTC)	Sleep-eze (OTC)
Caffeine	Halcion	Paraldehyde	Sopor
Butisol	Klonopin	Parest	Valium
Carbital	Limbitrol	Phenobarbital	Veronal
Centrax	Luminal	Phenobarbital Sodium	Vistaril (Atarax)
Chloral Hydrate (Noctec)	Lunesta	Placidyl	Xanax

STIMULANTS

Adderall	Dexaspan	Mazanor	Preludin
Adipex-P	Dexatrim	Melfiat	Prolamine
Apidren	Dexedrine	Methamphetamine	Ritalin
Benzedrine	Didrex	Methedrine	Sanorex
Bontril	Efed II	NoDoz	Tenuate
Cylert	Eskatrol	Plegine	Vyvanse
Desbutal	Fastin	Pondimin	
Desoxyn	Ionamin	Prelu-2 TR	

DRUGS THAT ARE NOT TO BE TAKEN (CONTINUED)

Do not use, consume, or apply any of these drugs

SUPPLEMENTS

Supplements (including herbal, pre-workout, protein, creatine, etc.) will not be approved to take while you are on probation. Supplements may interfere with testing and will be subject to confirmation testing at your own expense. If you take any supplements while on probation, it is at your own risk.

SYNTHETICS

Synthetic Cannabinoids - Synthetic Marijuana, K2, Spice

Synthetic Cathinones - Methylenedioxypropylvalerone (MDPV), Mephedrone, Methyloone

Bath Salts, Molly, Glass Cleaner, Plant Food

VOLATILE SUBSTANCES/INHALANT ANESTHETICS

Anesthetics	Banana Oil	Glue	Pentothal
Amyl/Butyl Nitrite (also called Liquid Gold and Poppers)	Fluothane	Nitrous Oxide	Surital
	Freon	Paint Thinners	
	Gasoline	Penthrane	

This is not an exhaustive list. New drugs hit the market daily. Unless the drug appears on the **DRUGS THAT CAN BE TAKEN** list, notify your probation officer before ingesting any drug. When testing, be sure to indicate on your paperwork **ALL** drugs, prescription and over-the-counter, that you have consumed. **Remember! When in doubt, do not use, consume, or apply.**

I have read and understand my responsibilities. My signature implies my consent.

PARTICIPANT/ DONOR SIGNATURE

DATE

PRINT NAME OF PARTICIPANT/ DONOR

WITNESS

DATE

DILUTE DRUG SCREENS

Dilute drug screens occur when an individual drinks too much fluid/ liquid of any kind in a short period of time, usually in an effort to flush their system of alcohol or drugs.

We encourage everyone to drink at least 8-10, 8-ounce glasses of water each day to maintain a healthy body system. Your body will maintain homeostasis, an equilibrium, in which you take in fluids and excrete waste fluids in the urine according to your body's needs. This occurs normally in the absence of kidney disease.

Creatinine is a by-product of protein metabolism; any unused creatinine is dissolved in the urine as a waste product. It is easily measured in relationship to the amount of fluid in which it is dissolved. For drug screening purposes, there is no other reason to measure creatinine other than to be able to tell whether or not a person is trying to dilute their urine. The more fluid in urine, the less creatinine can be measured. The less fluid in urine, the more creatinine can be measured. The normal level of creatinine in urine ranges from 60 mg/dL to 300 mg/dL. A dilute urine sample means that the creatinine level is equal to or below 20 mg/dL. This also occurs normally in the absence of kidney disease. The creatinine levels can change daily, but most people will have a "normal" value range most of the time.

Eating extra protein, exercising, running have no significant effect on the creatinine level measured in urine due to the body's built-in equalizer, homeostasis. The only thing that affects a dilute sample is the amount of fluid taken in within a short period of time prior to providing the urine sample. If you are seeing results that show you are getting close to a dilute sample, try to stop drinking any fluids 2-4 hours prior to providing the sample. Then resume your normal fluid intake. You should not "hold" your urine for a long time before giving a sample. This is not good for your bladder and will not have a significant effect on urine dilution. Try to avoid more than 1-2 cups of tea per day since tea is a diuretic. In other words, it causes your body to make extra urine and may throw off your normal body balance if taken in excessive amounts. This can lead to a dilute urine sample. Avoid products that claim to "beat a drug test". These usually are nothing but a diuretic in disguise.

If you have a medically diagnosed kidney disease you will need to bring proper documentation from your physician that states specifically why you might test with dilute urine specimens. This should be done prior to admission into the program and may be a reason to exclude you from participation in the program.

If you have any questions or concerns, please discuss them with the court, your counselor, program manager, or program nurse, and your physician.

Participant Signature

Date

Witness

Date

Frequently Asked Questions Regarding Dilute Specimens

What is a dilute specimen?

Dilute specimens are urine samples that have a creatinine level of less than 20mg/dL.

Okay, so what is Creatinine?

Creatinine (not to be confused with creatine) is a by-product of muscle metabolism. It is produced at a fairly steady rate throughout the day. Having a low concentration of creatinine in your urine is not normal.

The most common method of specimen tampering is dilution. Dilution is sometimes called flushing or water-loading, and it is a method promoted by “beat your drug test” websites and products. Diluting is a way to lower the concentration of drugs or alcohol in your system by making your urine more like water, measuring creatinine tells us how concentrated your urine is – whether it’s more like urine or more like water.

It seems like we’re getting sanctioned for dilute specimens all the time. Is low creatinine really that abnormal?

Healthy people rarely produce specimens with creatinine levels below 20mg/dL. In one study of over 22,000 people, less than 1% had dilute specimens. The average creatinine level was 130mg/dL. In a setting like ours where people are randomly drug tested, dilutes are 10 times more common! Sounds a little suspicious, doesn’t it?

But even if I get a dilute, if my test is negative, why should I be sanctioned?

To quote Paul Cary, the expert on this issue, “negative or ‘none detected’ results should never be interpreted as indicating no drug use (abstinence), because if, in fact, drugs were present, they probably could not be detected by the test... [A] creatinine level of less than 20mg/dL (associated with a drug test) is nearly always an attempt by the donor to avoid drug use detection regardless of how much liquid was consumed in order to achieve this result.”

So what’s the bottom line?

If you get a dilute, we don’t know why or how your creatinine level got that low. It is YOUR RESPONSIBILITY to control what you put in your body; this includes monitoring your fluid intake and not drinking excessive quantities of water in a short amount of time. If you have questions about your creatinine level, contact Court staff, FIS medical staff, or see your physician.

Participant Signature

Date

Witness

Date

Cherokee County Drug Lab
Historic Courthouse
100 North Street, Suite G23
Canton, GA 30114
T. (678) 493-6578

<https://www.cherokeega.com/Drug-Lab/>



testday

For testing through the Cherokee County Drug Lab, please follow the instructions below:

1. **Call 678-261-5870 daily 12:01 AM - 9:59 AM. YOU MUST CALL THE HOTLINE 7 DAYS PER WEEK, 365 DAYS PER YEAR, INCLUDING WEEKENDS AND HOLIDAYS.**
2. The initial audio prompts will play.
 - Press 1 for English
 - Press 2 for Spanish
3. Enter your social security number.
 - If you do not have a social security number, enter your assigned ID number: _____
 - The call will end if no ID is entered, or the ID is entered incorrectly, after 3 attempts.
4. Listen for one of the following messages:
 - Yes, you must test today. I repeat, you must test today.
 - No, you do not test today. I repeat, you do not test today.

****If you receive any other response, please contact the Lab.****
5. If you are called to test, you must report to the Cherokee County Drug Lab **between 6:00am and 10:00am and/or 2:00pm and 6:00pm*** for a drug/alcohol screening.
***Afternoon hours only available for non-accountability court participants and excludes holidays and weekends.**
 - The Lab is located in the basement of the Historic Court House. The Lab address is 100 North Street, Suite G23, Canton, GA, 30114. Enter on the backside of the building.
 - You **MUST** take with you a money order/ card payment (no cash) for \$35.00 and a valid photo ID.
 - Failure to report during the above time period or failure to bring payment and photo ID will result in a missed test, which may be considered a violation of your probation.
6. At the end of the call, a confirmation code will play.
 - This is a 4-digit, random number, you may write down to confirm with your Probation Officer/ Case manager that you did call in and check the hotline.

WEBSITE INSTRUCTIONS

1. Visit <https://doi.testday.com/>
2. Enter the PIN# 1497
3. Enter your ID# (social security number or assigned ID number)
4. Press "Submit"

I understand that I must begin calling 678-261-5870 today after 12:00AM. I understand I must bring a current photo I.D. and a \$35.00 Money Order/ Card payment (additional fee) to be allowed to test.

Donor _____

Date _____

Court Services _____

Date _____