The goal of the drug education and testing program (hereinafter "program") for UM student-athletes (hereinafter "athletes") is to promote a drug-free environment. The purpose of the program is to safeguard the health and safety of all athletes and competitors, by providing assistance to those who are found to engage in abuse of certain chemical substances (hereinafter "substances"), contributing to the education of athletes and the public, and maintaining appropriate standards of behavior in intercollegiate sports. One phase of the program focuses on substances that are commonly believed to be (and are hence referred to as) "performance-enhancing" drugs [defined and listed in Appendix A] and the concern here is to avoid a situation where athletes feel compelled to take these health-endangering substances in order to feel that they are competitive. A second phase of the program relates to so-called (and are hence referred to as) "street drugs" [defined and listed in Appendix B] and the concern here is not that athletes at the college level are more likely than other students to take such substances but only that there is evidence that their use may impair performance and reaction time to the point where injury to the athlete or others may occur during what is often highly physical competition.

Education and counseling are cornerstones of the program. These program components are designed to alert athletes and their coaches to the potential harm from substance abuse. A systematic method for testing athletes is another phase of the program, since studies have shown that education alone is insufficient. Procedures used in the implementation of this part of the program are designed to be fair, assure reliability of the tests, and safeguard the privacy of the participants. Great effort has been expended to ensure that the least intrusive means are used to accomplish the goals of this program. To the extent permitted by law, information obtained in the operation of the program shall be treated with the utmost confidentiality.

The use of marijuana for medicinal purposes is not exempted from this policy, and any positive tests due to marijuana use will be treated as a violation of this policy. Institutionally, UM’s policy on medical marijuana is:

*Although Montana state law permits the use of medical marijuana, i.e., use by persons possessing lawfully issued medical marijuana cards; federal laws prohibit marijuana use, possession, and/or cultivation at educational institutions and on the premises of other recipients of federal funds. The use, possession, or cultivation of marijuana for medical purposes is therefore not allowed in any University of Montana housing or any other University of Montana property; nor is it allowed at any University sponsored event or activity off campus.*

UM student-athletes could be subject to a violation of the UM policy as well as a violation of the UM Drug Education and Testing Program for any positive tests involving marijuana. Finally, marijuana is also a banned substance under NCAA policy.

**FRAMEWORK FOR THE DRUG EDUCATION AND TESTING PROGRAM**

I. **Educational Component**

   A. Each team and coaching staff will meet annually and as often as deemed necessary with a qualified member of the University staff to discuss the dangers of substance abuse. These sessions will include information regarding the use of illegal substances, misuse of alcohol, and the dangers of using reputedly performance-enhancing substances such as anabolic steroids and amphetamines as well the health dangers of mixing otherwise legal prescription medication with alcohol and/or other substances.

   B. The program will draw upon the specialized skills of University personnel. Members of the staff of the Curry Health Center Physicians, and Counseling & Psychological Services (CAPS), as well as others, will serve as discussion group leaders, as sources of information about abuse, and, in appropriate cases, as therapists.

II. **Counseling Component**

   A. The University will identify properly trained counselors to assist in this program. The services of these counselors will be made available to athletes and coaches if further information or treatment is required.

   B. To the extent permitted by law, all counseling will be confidential. A system of referral to professionals in Curry Health Center and other appropriate University departments shall be utilized. Athletes and coaches shall be informed of the availability of these resources and methods of entering these programs.

   C. Consistent with Montana law, individual counseling with licensed medical or psychological personnel will be privileged. Since some athletes are minors, it may be appropriate in individual cases to attempt to obtain parental consent or to encourage the athlete to allow parental or spousal involvement in the treatment program.

   D. For a student-athlete who is required to receive counseling as a consequence of a positive drug test, the first counseling session must occur no later than three (3) weeks after notification of the positive test. Written verification by the counseling program must be provided by the student-athlete to the Head Athletic Trainer. The costs associated with counseling and/or evaluation, if applicable, are the responsibility of the student-athlete.
III. **Testing Component**

A. The testing program will be confidential and utilize methodology with appropriate sensitivity and specificity, to minimize the likelihood of inaccuracy.

B. The testing program will consist of two phases:
   1. Random drug screening to test for substances [cf. App. A and B]; and
   2. Reasonable suspicion drug screening to test for substances [App. A and B].

C. The testing program will contain these major requirements:
   1. **Notification**
      a. A statement of the University of Montana's policy with respect to substance abuse will be provided to each athlete and all members of the coaching staff on at least an annual basis. This statement will provide information on education and counseling programs as well as the protocol for the conduct of tests.
      b. A list of possible substances for which tests may be conducted and their generic names will be included.

   2. **Consent**
      a. A consent form for athletes indicating that he/she had received the information described in number one above and that the athlete agreed to participate in the program will be returned to the head certified athletic trainer at the time of the pre-participation physical exam. This signed consent form will be a precondition for participation. In addition, the consent form will give the athlete the option to submit information that he/she is taking one or more substances under medical supervision.

   3. **Testing Protocol**
         (i) Throughout the year, student-athletes will be randomly selected to provide a urine specimen, for submission to the Designated Drug Testing Laboratory (hereinafter "laboratory"). Although the selection process will be random, a computerized weighting system or similar mechanism (which will be documented) may be used, so that athletes in sports where a given substance is more likely to be abused will be more likely to have their sample tested and those exhibiting inordinate weight gain or other behaviors associated with substance abuse will be more likely to be tested.

         (ii) Initial urine collections will be carried out under the auspices of the athletic training staff. The athletic training staff will code the specimens for identification. The team physician and/or head certified athletic trainer will be the only individuals retaining the records correlating the identifying numbers with the appropriate names. The lab will identify the urine samples by number only as the corresponding names will not be given to the laboratory.

         (iii) When the split specimens are submitted to the laboratory, one specimen will be screened for substances, while the second specimen will be properly refrigerated by the laboratory and held for a second test, if necessary. The laboratory will conduct an initial broad screen of the specimen. If the athlete’s specimen tests positive during the initial screen, the laboratory will then conduct an in-depth test for the specific drug and the level of the drug, using a testing procedure of high specificity and very high reliability. The student-athlete will be considered to have tested positive only if both results are positive.

         (iv) The complete list of all test results will be provided to the Director of Intercollegiate Athletics (hereinafter “AD”), Head Athletic Trainer (hereinafter “Head ATC”), and Team Physician. The Head ATC will in turn notify the individual athletes of the test results. At that point, the student-athlete, upon request, will be given a copy of the test results and the opportunity to rebut or explain them. If a student-athlete accepts the positive result, s/he will be subject to the appropriate level of sanctions described in Section IV.

         (v) If a student-athlete denies a positive result, s/he has three options, all of which are at the student-athlete’s own expense:

            i. The student-athlete can provide a new urine specimen at the time of notification and request that the new specimen be submitted to the laboratory for testing; or,

            ii. The student-athlete can request that the reserved second specimen at the laboratory be tested; or,

            iii. The student-athlete can request that the reserved second specimen be sent to a different laboratory, provided the laboratory is certified or is selected from a list of laboratories approved by the University as being of good repute. Normal chain of custody procedures will be followed.

         (vi) If the student-athlete tests negative utilizing one of the three options in (v) above, the student-athlete will be considered to have a negative test result and will not be subject to any sanctions. However, if the test is returned as positive, the student-athlete will be subject to the appropriate level of sanctions described in Section IV.

         (vii) Those student-athletes testing positive are subject to future random, unannounced drug testing.

      b. Drug Screening to Test for "Street Drugs" or "Performance Enhancing Substances" Upon Reasonable Suspicion.

         (i) If the AD, Senior Women’s Administrator (SWA), Head Coach and/or Head ATC have a reasonable suspicion that a medical evaluation and drug test of a particular athlete will produce evidence of improper substance use, then the athlete will be asked to provide a specimen. The following criteria shall be considered sufficient on its own to constitute reasonable suspicion:

            i. Student-athlete self-report
            ii. Direct observation of drug use by a reliable informant;
            iii. Direct observation by coaches, athletic trainers, or team physicians of physical and mental deficiency or medically indicated symptomology of drug use, aberrant conduct, or unexplained absenteeism;
            iv. Common sense conclusions about observed or reliably described human behavior upon which practical people ordinarily rely (e.g., significant changes in behavioral patterns, athletic or academic performance, visual evidence of injection or “track marks”);
            v. Police or court determination that the student-athlete has used or possessed prohibited drugs, or frequented a site where drug use was occurring;
vi. A demonstrated history of use of prohibited drugs, either through prior legal convictions or prior positive tests for prohibited drugs through any testing program, including prior institutions attended. It also includes prior test results that fall below the established laboratory criteria for a positive test, but indicate a lower concentration level of the banned substance.

(ii) The actual testing procedure under this phase will utilize the same procedures outlined above for the random testing phase. The procedure following a positive test result will be the same as under 3(a) above.

IV. Sanctions, Hearings, and Reinstatement

A. Sanctions
   a. First Positive Drug Test
      (i) Suspension from practice and competition until subsequent tests show significant declining levels of the prohibited substance. (These subsequent tests are for the sole purpose of determining changing substance levels and return to participation. Even if these tests show levels at or above the thresholds stated in Appendices A and B, they will not be considered additional positive tests with regard to sanctions.) For health and safety reasons, return to participation will be determined by the team physician. In some cases, the team physician may determine that it is necessary that the student-athlete test negative before returning to participation. Athletes must be retested at the time and place determined by the Athletic Department. Each failure to submit to retesting will be treated as a positive test (see b and c below). During the period of time that a student-athlete may be suspended from athletic participation, the student-athlete remains eligible to utilize other athletic services such as athletic training, weight training and academic services.
      (ii) Referral to, and required participation in counseling and drug education and/or evaluation of the drug use problem through existing university or public programs, if available, or a private qualified counselor. This will be at the student’s expense.

b. Second Positive Drug Test
   (i) In addition to the consequences stated above for a first positive drug test, a student-athlete who tests positive for a second time, will be subject to a 10% contest suspension. The suspension will take effect immediately following completion of confirmation of a positive test result. The suspension will apply to the championship phase of the sport (if applicable) and will carry over into the following year if it is not possible to complete the suspension in the current year. Finally, for student-athletes who are not competing due to redshirt, year of residency, academic eligibility issues, or injury, the suspension will occur during the following year when the student-athlete is eligible/able to compete.
   (ii) Forfeiture of all rights as a student-athlete including termination of all athletics financial assistance.

B. Hearing and Reinstatement
   a. Hearing
      (i) Athletes subject to a sanction under the terms of this program will be entitled to a hearing before an appeal committee composed of the Senior Associate Athletic Director/SWA, the Faculty Athletics Representative and the team physician or designee. A request for an appeal must be made by the student-athlete in writing and submitted to the Senior Associate Athletic Director/SWA within 48 hours of notification of confirmation of a positive test result. The written request MUST include the rationale for the appeal. The Appeal Committee will have three (3) business days after receipt of the written request to determine the date, time and location of the appeal hearing. Every reasonable effort will be made to schedule the appeal in as timely a manner as possible. An extension of time for the hearing may be granted upon a showing of good cause. A student-athlete who is appealing a Second or Third positive test result is not eligible for competition during the appeal process.
      (ii) During the appeal hearing, the student-athlete may have an advocate or other representative present if the student-athlete so desires. However, if this individual has legal training and/or is a lawyer, this must be indicated in the student-athlete’s written request so that the University may have a representative of campus Legal Counsel attend the hearing as well. The student-athlete must present his or her own case. The proceedings will be confidential.
      (iii) The Appeal Committee will make a recommendation to the Director of Athletics. The decision by the Director of Athletics regarding sanctions is final.

b. Reinstatement
   (i) A student-athlete who has been dismissed from the team (in the case of a third positive drug test) may apply for reinstatement to the Athletic Director after one calendar year from the date of dismissal, if the following have been met:
      i. Submission of evidence of successful completion of a professional counseling program;
      ii. Submission of evidence of negative test results obtained at the student’s expense within the last six months;
      iii. Demonstrated commitment on the part of the student-athlete to abide by the UM drug education, testing and treatment program;
      iv. Consent to regular unannounced testing if reinstated; and,
      v. The Head Coach must consent to the potential reinstatement to the team.
      vi. The student-athlete must have remaining eligibility per NCAA rules in order to seek reinstatement. Loss of a year of participation due to positive drug test sanctions does not satisfy the requirements for a waiver of the NCAA rules.
   (ii) Reinstatement to the team does not include reinstatement of athletic scholarship. The Head Coach retains that decision authority.

C. Notifications
   Drug test results are confidential. However, individuals with a need to know will be notified of positive drug test results. This includes the following:
   • Director of Athletics
   • Team Physician
• Senior Associate Athletic Director/SWA
• Head Coach
• Necessary assistant coaches as needed
• Sport direct supervisor
• In the case of minors under the age of 18 years, the student-athlete parent(s)/legal guardian(s)

D. The athlete will not be subject to Campus Student Conduct Code proceedings or sanctions as a result of a positive drug test(s). Also UM will not voluntarily supply personally identifiable test data or results of a test to any law enforcement agency and will develop procedures to assure that only information necessary to the purposes of this program is retained and all other information concerning the test results is destroyed.

V. **Specimen Collection Procedure and Chain of Custody**
   A. Upon selection the athlete will present himself/herself at the appropriate collection site. The student-athlete will be required to wear shorts and a t-shirt during specimen collection. The medication and consent forms will be completed by the athlete, and the signed consent form will be given to the athletic trainer. Initial urine collections will be carried out under the auspices of the athletic training staff.
   B. The urine sample will be collected in a manner that seeks to minimize invasion of personal privacy while insuring the integrity of the collection process. Under Plan A, "the athlete has the option to furnish the specimen while being observed by a monitor of the same sex, although this will not entail direct observation of the act of urination. Alternatively, athletes have the option to elect Plan B, whereby the athlete will be asked to dress down to t-shirts and gym shorts or to change into other appropriate attire such as a gown which covers private parts of the body. They will then provide their sample in a private closed stall, which will be visually checked before and after the specimen collection. A monitor of the same sex will be present in the lavatory to listen for normal sounds of urination, to guard against tampered samples, and to ascertain accurate chain of custody. When the container is returned to the monitor, he or she will ascertain the approximate temperature, measure pH with a chemistry dipstick and record the results on the appropriate chain of custody form. If at any time during the testing procedure the monitor has reason to believe that an athlete is tampering with the sample, he or she can stop the procedure and determine whether the observed collection method is necessary.
   C. The athlete will be given a coded form and will observe that the code number is applied to their specimen and complete the form attesting to proper specimen collection. The authorized staff member will place the specimen in a secure area until specimen delivery.
   D. Any athlete who refuses to participate will be referred to the team physician. Participation in the drug program is a requirement for the intercollegiate athletic program.
   E. Upon completing sample collection, the authorized staff member in charge for that day will make arrangements for the specimens to be taken to the laboratory. Medication forms and the "Sample Form" will accompany the specimens. A complete chain of custody, from specimen collection through testing and return of test results, will be assured, and complete documentation of same maintained. A member of the laboratory will be designated to inspect the samples to ascertain the presence of all samples by code number and sign the sample transfer form. The medication forms and sample forms will be prepared in duplicate and a set of forms retained by the laboratory staff and the authorized staff member. The Code Number Assignments will be received by the team physician from the head certified athletic trainer within 24 hours of the completion of specimen collection. The team physician and/or head certified athletic trainer will place these forms in a secure place.
   F. The laboratory staff will notify the team physician and/or head certified athletic trainer if any sample is unsatisfactory for analysis or if there is any evidence of insecure sealing of the sample container. The team physician will instruct the athletic trainer to collect an additional sample within 48 hours or as soon as possible.
   G. Evidence of use of a banned substance will be obtained from analysis of the athlete's urine by screening techniques performed by an appropriately accredited laboratory. Before judging a test positive, an initial positive screen shall be verified by another test designed to assure high reliability.
   H. The laboratory director will provide the team physician and/or head certified athletic trainer with a list by code number of all specimens, positive and negative for banned substances. The team physician and/or head certified athletic trainer will contact the athlete and inform him/her of the results of the sample, and the procedures specified in the testing protocol will be followed.

VI. **Amendments and Modification to the Program**
   The UM Drug Education and Testing Program may be modified or amended at any time. All amendments or modifications shall be in writing and shall be incorporated into the Program statement upon the approval of the Athletic Director. Such amendments or modifications shall apply to and be effective for all student-athletes in the intercollegiate athletics program upon notification of and acknowledgment by the student-athletes of receipt of the policy as amended. Amendment or modification of the Program does not negate any positive tests obtained and any sanctions imposed under the previous policy.

The Department of Athletics resource for questions related to NCAA banned drugs and the use of nutritional supplements is JC Weida, Head Athletic Trainer. Student-athletes, athletic staff and coaches are encouraged to see him with any questions regarding banned drugs and use of nutritional supplements.
APPENDIX

Preface. The University's drug testing program in intercollegiate athletics is based upon a presumption against the use of any artificial chemical substances that are not medically necessary (i.e. taken under orders of a physician, with notice to the head certified athletic trainer). If an athlete has any questions about a given drug, then he/she should feel free to consult the training staff, and if the staff does not have an immediate answer, the question will be researched by those participating in our educational program.

In an effort to be as specific as reasonably possible and to limit testing to circumstances where it is strictly necessary (where education will not suffice, where there is a serious health concern, and where there is likely to be a problem of abuse due to belief in performance-enhancing effects), the University has designated a list of performance-enhancing and street drugs that is more limited than the NCAA list of banned drugs. The University does, however, specifically reserve the right to add to Appendices A and B at any time (with appropriate notice prior to testing for the substances added), as new evidence becomes available about new drugs or new problems with old drugs. The criteria noted above (seriousness of health concerns and likelihood of abuse despite education) will be used in determining whether to add drugs to the list.

The following substances are banned for use by athletes unless proven to be medically necessary:

APPENDIX A
REPUTEDLY 'PERFORMANCE ENHANCING' SUBSTANCES

1. Anabolic steroids and diuretics.
2. Amphetamines, cocaine and related psychomotor and central nervous system stimulants.

APPENDIX B
'STREET DRUGS'

1. Amphetamines, including:
   - Amphetamine (Adderall, Dexedrine), Methamphetamine, MDMA (Ecstasy), MDEA (Eve), MDA (Adam), Phentermine (Adipex-P), PMA
2. Opioid Analgesics, including:
   - Codeine (Tylenol #3, Tylenol #4), Morphine (Avinza, Kadian, MS Contin), Hydrocodone (Lortab, Vicodin, Norco), Hydromorphone (Dilaudid, Exalgo), Oxycodone (OxyContin, Percocet), Dihydrocodeine (Synalgos DC), Oxymorphone (Opana)
3. Marijuana.
4. Cocaine/Crack
5. Synthetic Cannabinoids – SPICE
6. Synthetic Cathinones – BATH SALTS
7. Specimen Validity, including:
   - Nitrates, Chromates, Specific Gravity

APPENDIX C
Thresholds

<table>
<thead>
<tr>
<th>Drug Class</th>
<th>Screening</th>
<th>Confirmation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marijuana</td>
<td>20 ng/mL</td>
<td>5 ng/mL</td>
</tr>
<tr>
<td>Cocaine/Crack</td>
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<td>50 ng/mL</td>
</tr>
<tr>
<td>Opiates</td>
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<td>100 ng/mL</td>
</tr>
<tr>
<td>Amphetamines*</td>
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<td>250 ng/mL*</td>
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<tr>
<td>Benzodiazepines</td>
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<td>Barbiturates</td>
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<td>100 ng/mL</td>
</tr>
<tr>
<td>Phencyclidine (PCP)</td>
<td>20 ng/mL</td>
<td>10 ng/mL</td>
</tr>
</tbody>
</table>

*Amphetamines includes MDMA (Ecstasy), MDEA (Eve), MDA, and PMA