What kind of testing should be done after a positive test?

Once you have the student drug test results from the MRO the next step is adding the student to the follow-up pool. This means it would be reasonable to have a separate pool for follow-up testing to implement a higher testing rate for these students. The other option is to automatically implement a reasonable suspicion testing process with this student for the time periods discussed in this paper.

The question of when is not necessarily determined by your intervals of testing. If you test on a weekly, monthly, or biannual basis, the student should be tested at least once a month, for follow-up minimum. The term for this testing should range from 9 months to 12 months. The key is testing the student in their most vulnerable season to sustain an accurate deterrent effect of RSDT.

Most school systems budgets are not compensating for follow-up testing, even though this is the most important area of care.

The staff needed for follow-up testing is often seen as an issue. Since most schools contract their testing to outside entities, follow-up testing done by a certified collector that is a school staff person makes the collection process less of an issue and more of a deterrent.

Follow-up testing is recommended on a weekly basis for the first 45 days, then monthly for the remainder of the calendar year if funds are permitted. This amount of attention to the follow-up process will ensure a most effective deterrence to alcohol and other drugs.

The argument against this form of follow-up testing has no basis when a comparison of RSDT to DOT, NCAA, Workplace, and Olympic testing. It is apparent those who wish to participate in privileged activities will comply with the process. The students who would rather not comply will either drop out of the activity or be removed for failure to meet policy requirements set forth by the school system. This much concern given for the follow-up can give parents, school staff involved, and the student a true sense of accomplishment once the aftermath has passed. There is a negative aspect to this process which mostly relates to the funds available for testing. However, this is greatly reduced if staff is trained in specimen collection.

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