

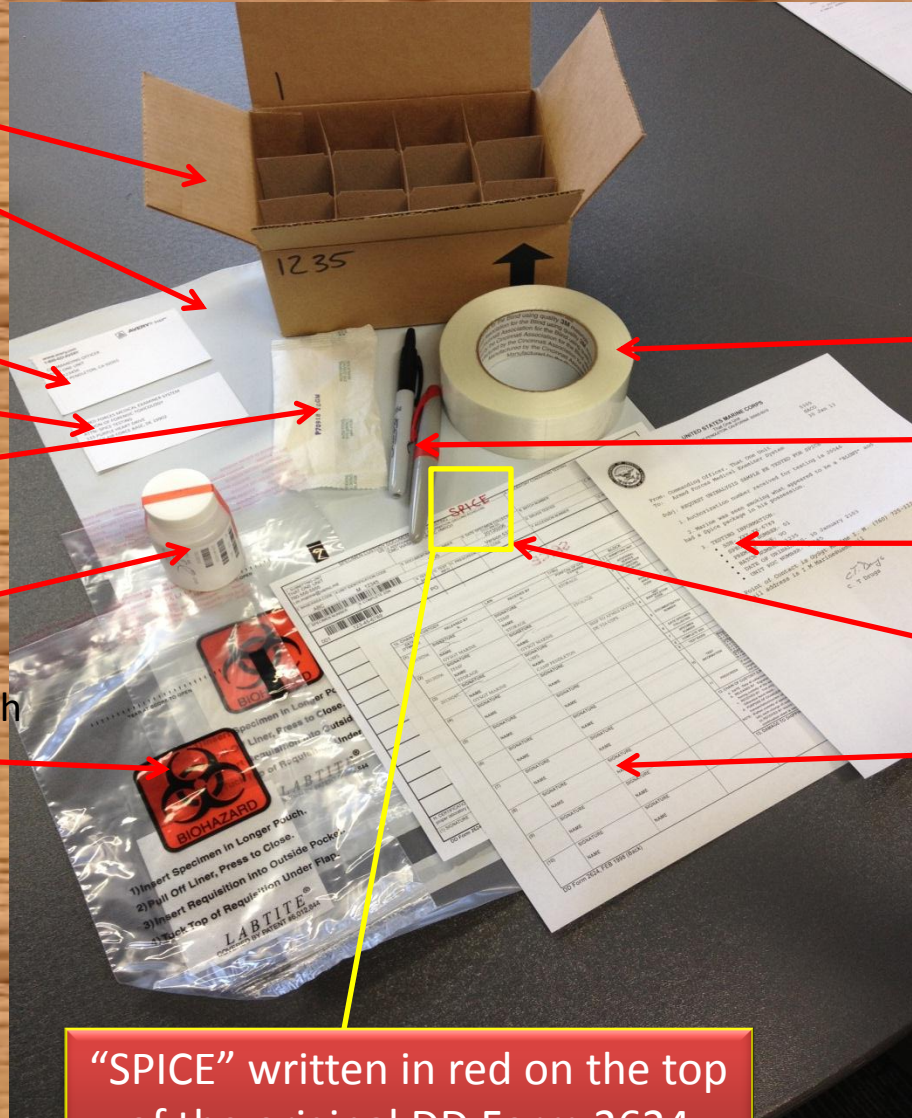
Spice mail-out procedures

COMMANDING OFFICER
THAT ONE UNIT
BOX 123456
CAMP PENDLETON, CA 92055

ARMED FORCES MEDICAL EXAMINER SYSTEM
DIVISION OF FORENSIC TOXICOLOGY
ATTN: SPICE TESTING
115 PURPLE HEART DRIVE
DOVER AIR FORCE BASE, DE 19902

Materials Required

- Batch box numbered with batch number
- Waterproof packaging
- Return label
- Shipping label
- Absorbent pad
- Urine sample to be tested
- (2) waterproof bags for paperwork and (1) for each urine bottle



- Tape to seal the box
- Red and Black marker
- Authorization letter
- Original DD Form 2624
- Copy of DD Form 2624

"SPICE" written in red on the top of the original DD Form 2624

Chain of Custody Requirements

3 Signatures
(minimum)

Pay special
attention to these
boxes

12. CHAIN OF CUSTODY		LAN	THRU	INSTRUCTIONS			
DATE (YYMMDD) a.	RELEASED BY b.	RECEIVED BY c.	PURPOSE OF CHANGE/ REMARKS d.	BLOCK	USA	USN/MC	USAF
(1)	SIGNATURE	SIGNATURE	STORAGE	1	SUBMITTING UNIT Message address of unit submitting urine samples		
20130206	NAME GYSGT MARINE	TEMP NAME STORAGE		2	ADDITIONAL SERVICE INFORMATION (SECOND ECHELON)	Do not use	Message address of second echelon commander to whom submitting unit reports administratively. Optional. May be used to identify the base POC.
(2)	SIGNATURE	SIGNATURE	STORAGE	3	BASE / AREA CODE	Service Code Area	Leave blank for future use. Four-character Base Identification Code (Ex. F123). Comprises the first four characters of the full 10-character Base Identification Number (BIDN).
20130206	TEMP NAME STORAGE	NAME GYSGT MARINE		4	UNIT IDENTIFICATION CODE	Unit Identification Code (UIC or RUC) of unit submitting urine sample.	Do not use
(3)	SIGNATURE	SIGNATURE	SHIP TO AFMES DOVER, DE VIA USPS	5	DOCUMENT/BATCH NUMBER	Do not use	Enter the locally assigned batch number. Each batch of 12 samples, or portion thereof, shall be assigned a separate number by the submitting unit. 3-digit batch number common to all specimens in the shipment (Ex. 301). Comprises the middle part of the full 10-character BIDN assigned to each specimen.
20130207	NAME GYSGT MARINE	NAME USPS NAME CAMP PENDLETON		6	DATE SPECIMEN COLLECTED	Enter the four-digit year, two-digit month, and two-digit day that samples were collected by submitting unit.	
(4)	SIGNATURE	SIGNATURE		7	SPECIMEN NUMBER	Use number pre-printed on form to itemize bottle.	Enter 3-digit sequential specimen number (last 3 characters of full BIDN).
(5)	SIGNATURE	SIGNATURE		8	COMPLETE SSN	Full SSN of person from whom sample obtained.	
(6)	SIGNATURE	SIGNATURE		9	TEST BASIS	Indicate the testing premise to conduct the collection.	
(7)	SIGNATURE	SIGNATURE		10	TEST INFORMATION	Leave blank	Entry required only if additional testing is requested: F = Full Panel; S = Steroids; O = Other drugs - Provide clarification in attached message.
(8)	SIGNATURE	SIGNATURE		11	PRESCREEN	If screened (field tested) prior to submission and found positive, indicate P for positive or N for negative for drug(s) pre-screened. Leave blank if not screened prior to submission to lab.	Not used
(9)	SIGNATURE	SIGNATURE		12. CHAIN OF CUSTODY (LINE (1)). a. DATE - Date of collection/shipment b. RELEASED BY - Signature and printed or typewritten name of the urinalysis coordinator having custody of the samples. c. RECEIVED BY - Use only if physical change of custody is occurring prior to shipment. Otherwise leave blank. d. PURPOSE OF CHANGE/REMARKS - Specify the mode of accountable transportation/system utilized to ship specimens to the lab. NOTE: If when custody of specimens changes other than for shipment (unless hand carried to lab), each change of custody requires line number signature in the (b) RELEASED BY and (c) RECEIVED BY blocks to document changes in custody with comment in block (d). If a continuation sheet is necessary, it must contain information/signatures of blocks (a) - (d).			
(10)	SIGNATURE	SIGNATURE		13. DAMAGE TO SHIPPING CONTAINER/DISCREPANCIES			

DD Form 2624, FEB 1998 (Back)

Reset

Step 1

1. CO generates authorization request letter to be converted to a PDF file or scanned in order to be sent to eric.c.hollins@usmc.mil
2. Eric Hollins will reply with approval or disapproval
3. If approved, Eric will attach the authorization letter with an authorization number
4. The SACO will generate a testing letter containing the authorization number to be sent to AFMES.

Panel 1: Initial Request

UNITED STATES MARINE CORPS
That One Unit
CAMP PENDLETON, CALIFORNIA 92055-8010

5100
SACO
30 Jan 13

From: Commanding Officer, That One Unit
To: Commandant of the Marine Corps (MFC-4)
Subj: SYNTHETIC CANNABINOID TESTING QUOTE REQUEST
Ref: (a) MARADMIN 683/12
(b) MCO 5300.17

1. Request testing quota to conduct synthetic cannabinoid testing for (1) sample, to be collected and shipped prior to 1 February 2013.

2. Point of Contact is OYsgt Marine I. M. (760) 725-1111, or e-mail address is I.M.Marines@usmc.mil

Panel 2: Approval Email

Butler CIV Steven L.

From: Hollins CIV Eric C
Sent: Thursday, January 31, 2013 5:29
To: [REDACTED]
Cc: Butler CIV Steven L.
Subject: RE: Spice test request for [REDACTED]
Attachments: [REDACTED].PDF
Signed By: eric.c.hollins@usmc.mil

Sgt.

Your request is approved.

R.

Eric

---Original Message---
From: [REDACTED]
Sent: Wednesday, January 30, 2013 4:28 PM
To: Hollins CIV Eric C
Cc: Butler CIV Steven L.
Subject: Spice test request for [REDACTED]

Good Afternoon Sir,

Attached is request for Spice testing. We have a case [REDACTED] were found with the substance, in there room. The Marines had consent to testing. Your assistance is appreciated.

R/S
[REDACTED]
[REDACTED]
[REDACTED]
Camp Pendleton, CA 92055
Com: [REDACTED]
Fax: [REDACTED]

Panel 3: Response Email

DEPARTMENT OF THE NAVY
NAVY MEDICAL SERVICE
1400 1ST ST
QUINTON, VA 22084-5005

1400
MFC-4
31 Jan 13

MEMORANDUM

From: Supervisory Drug Demand Reduction Program Manager
To: Commanding Officer, 2d Battalion 11th Marines, 1st Marine Division
Subj: SPICE QUOTA REQUEST
Ref: (a) MARADMIN 683/12
(b) MCO 5300.17

1. In accordance with reference (a), your Spice quota request to test (1) sample using premise Marine's consent (VO) is approved.

2. Your authorization number is 20546.

3. Ensure appropriate procedures are followed when using premise information. For more information, please contact me at (760) 725-1111 or email address is I.M.Marines@usmc.mil.

Panel 4: Final Testing Letter

UNITED STATES MARINE CORPS
That One Unit
CAMP PENDLETON, CALIFORNIA 92055-8010

5100
SACO
30 Jan 13

From: Commanding Officer, That One Unit
To: Armed Forces Medical Examiner System
Subj: REQUEST URINALYSIS SAMPLE(S) BE TESTED FOR SPICE

1. Authorization number received for testing is J0046

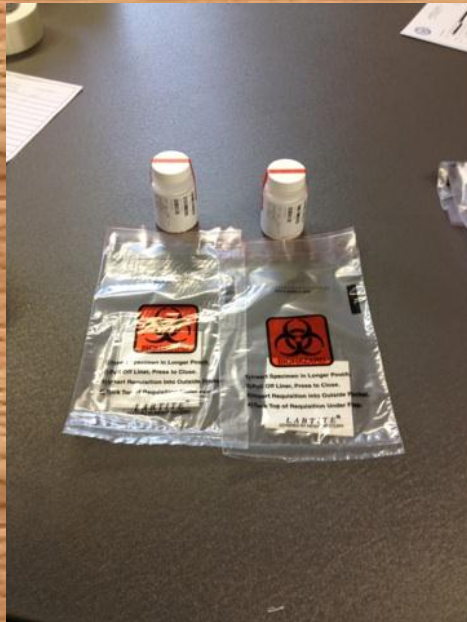
2. Marine(s) was seen smoking what appeared to be a "BLUNT" and had a Spice package in his possession.

3. TESTING INFORMATION:
• SSN- XXX-XX-7891
• SPECIMEN NUMBER- 01
• SSN- XXX-XX-8912
• SPECIMEN NUMBER- 02
• PREMISE CODE: VO
• BATCH NUMBER- 1235
• DATE OF URINALYSIS- [REDACTED]
• UNIT ROC NUMBER- 12

Point of Contact is OYsgt Marine I. M. (760) 725-1111, or e-mail address is I.M.Marines@usmc.mil

C. T Drugs

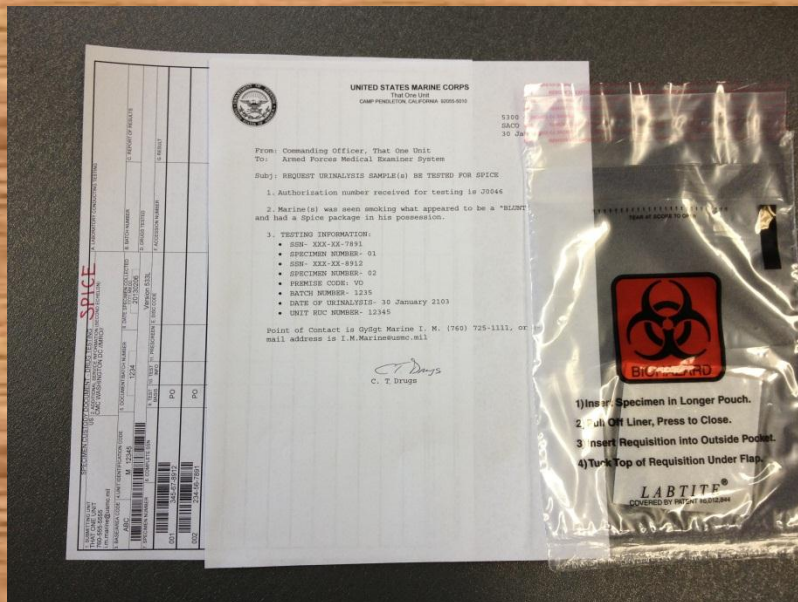
Step 2



Place each sample
to be tested in a
waterproof bag

Seal the bag and place
each bottle in the correct
position in the box

Step 3



- One water proof bag will contain the original DD Form 2624 and the authorization letter generated by the SACO with the authorization number
- The other water proof bag will contain the copy of the DD Form 2624



Seal the bags

Step 4

Place the waterproof bag containing the copy of the DD Form 2624 in the box along with an absorbent pad.



Step 5

Seal the box
long ways as
shown



Step 6



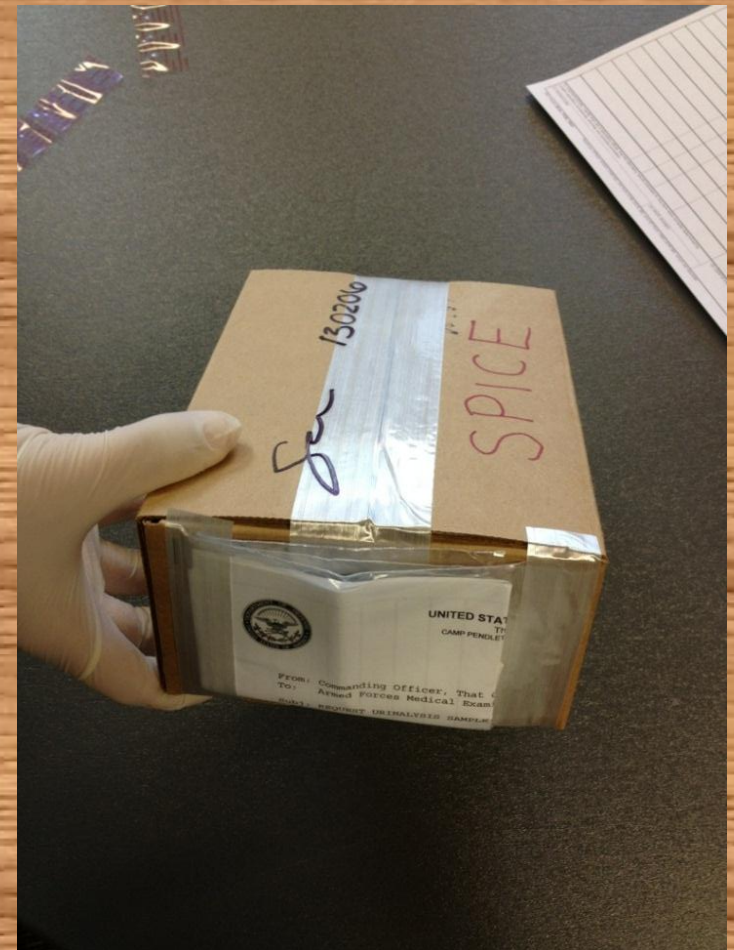
Using the **black** marker, sign and date overlapping the box and tape

Step 7



Using the **red** marker, write the word "SPICE" under the tape

Step 8



Tape the folded waterproof bag containing the original DD Form 2624 and the authorization letter on the side of the box

Step 9

Place the box in the waterproof packaging, let all of the air out and seal the bag.



Step 10

Tape all around the short sides of the box keeping the packaging tight to ensure that there are no loose edges that can catch anything during shipping

DO NOT use masking tape or scotch tape for packaging.

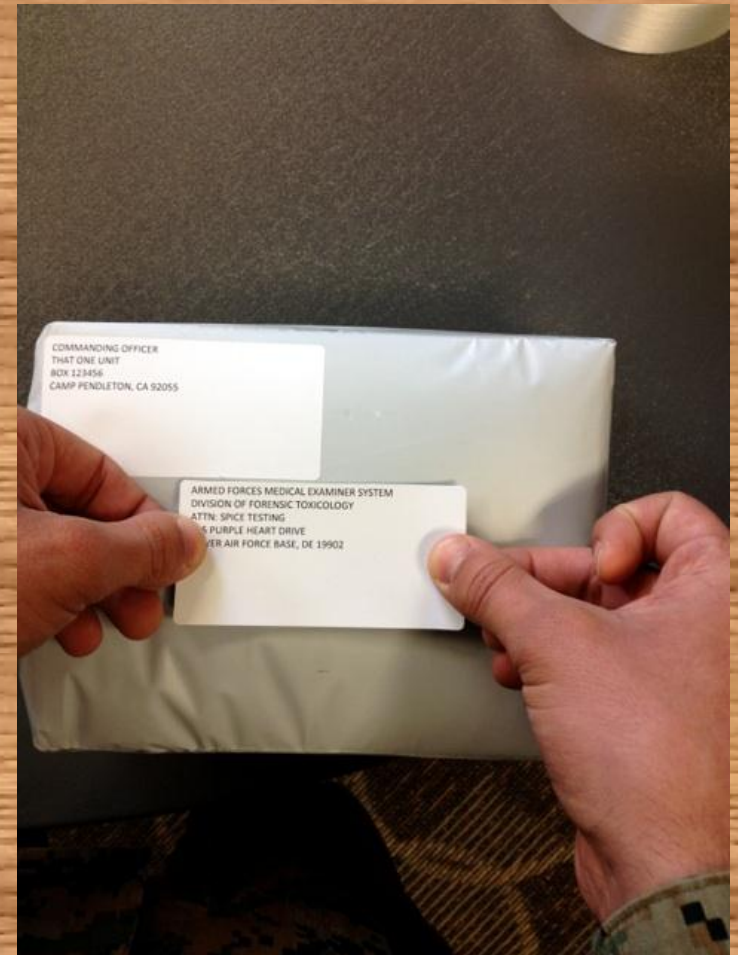
Please use filament tape provided by CSACC.



Step 11



Attach the return label to the top
left hand corner of the box



Attach the shipping label to the
center of the box

Step 12



Bring your package to MCB USPS
Postal for NO COST shipping

FOR YOUR RECORDS

12. CHAIN OF CUSTODY			THRU	INSTRUCTIONS			
DATE (YYMMDD) a.	RELEASED BY b.	RECEIVED BY c.	PURPOSE OF CHANGE/ REMARKS d.	BLOCK	USA	USMC	USAF
(1)	SIGNATURE	SIGNATURE	STORAGE	1	SUBMITTING UNIT Message address of unit submitting urine samples		
20130206	NAME OYSGT MARINE	TEMP NAME STORAGE		2	ADDITIONAL SERVICE INFORMATION (SECOND ECHOLON) Do not use	Message address of second echelon commander to whom submitting unit reports administratively.	Optional. May be used to identify the base POC.
(2)	SIGNATURE	SIGNATURE	STORAGE	3	BASE / AREA CODE Service Code Area	Leave blank for future use.	Four-character Base Identification Code (BIC) / USN. Comprehend the first four characters of the full 15-character Base Identification Number (BIN).
20130206	TEMP NAME STORAGE	NAME OYSGT MARINE		4	UNIT IDENTIFICATION CODE Unit Identification Code (EIC or RUC) of unit submitting urine sample.	Do not use	
(3)	SIGNATURE	SIGNATURE	SHIP TO AFMES DOVER, DE VIA USPS	5	DOCUMENT/BATCH NUMBER Do not use	Enter the locally assigned batch number (last batch of 12 samples, or previous batch, should be assigned a separate number by the submitting unit).	3-digit batch number common to all specimens on the shipment (BIC, RUC). Comprehend the middle part of the full 15-character BIN assigned to each specimen.
20130207	NAME OYSGT MARINE	USPS NAME CAMP PENDLETON		6	DATE SPECIMEN COLLECTED Enter the four-digit year, two-digit month, and two-digit day that samples were collected by submitting unit.		
(4)	SIGNATURE	SIGNATURE		7	SPECIMEN NUMBER Use number pre-printed on form to remove bottle.	Enter 3-digit sequential specimen number (BIN) 3 characters of full BIN.	
(5)	SIGNATURE	SIGNATURE		8	COMPLETE SSN Full SSN of person from whom sample obtained.		
(6)	SIGNATURE	SIGNATURE		9	TEST BASIS Indicate the testing premise to conduct the collection.		
(7)	SIGNATURE	SIGNATURE		10	TEST INFORMATION Entry required only if additional testing is requested: F = Full Panel S = Steroids O = Other drug - Provide clarification in attached message. Leave blank		
(8)	SIGNATURE	SIGNATURE		11	PRESCREEN If screened third test kit prior to submission and found positive, indicate F for positive or N for negative for drug(s) pre-screened. Leave blank if not screened prior to submission to lab.		
(9)	SIGNATURE	SIGNATURE		12. CHAIN OF CUSTODY (LINE 11) a. DATE: Date of collection/shipment b. RELEASED BY: Signature and printed or typewritten name of the unit/analysis coordinator having custody of the samples. c. RECEIVED BY: Use only if physical change of custody is occurring prior to shipment. Otherwise leave blank. d. PURPOSE OF CHANGE/REMARKS: Specify the mode of accountable transportation/system utilized to ship specimens to the lab. NOTE: If chain of custody changes other than the shipment (unless hand carried to lab), each change of custody requires line number signature in the (b) RELEASED BY and (c) RECEIVED BY blocks to document changes in custody with comment in block 10. If a continuation sheet is necessary, it must contain information/signatures of blocks (4) - (10).			
(10)	SIGNATURE	SIGNATURE		13. DAMAGE TO SHIPPING CONTAINER/DISCREPANCIES			

DD Form 2624, FEB 1998 (Back)

Reset



Bring your copy of the DD Form 2624 to be stamped* by the postal clerk

OR

Bring a record book to be stamped* by the postal clerk

*The postal clerk will NOT sign, but will stamp

Congratulations!

You are now fully equipped with the knowledge required for a successful Spice test. All you need to do now is bring your package to a MCB postal office for shipping

- DO NOT write “**SPICE**” on the outside packaging
- NO COST if you utilize MCB USPS post office
- DO NOT use masking tape or scotch tape for packaging
- Return addresses can only be box numbers, not a physical street address (5 lines max)
- Filament tape, Waterproof bags, Waterproof packaging, Batch boxes, Urine bottles, and labels can be acquired from the CSACC Lab

P.O.C.'S

Steven Butler
725-1160

Cpl Swanson (Lab Tech)
725-6268/5538

Rudy Lacroix
725-9878