BOARD REGULATION NO. 2
Series of 2003

SUBJECT: IMPLEMENTING RULES AND REGULATIONS GOVERNING ACCREDITATION OF DRUG TESTING LABORATORIES IN THE PHILIPPINES

Section 1. **Scope:**

These rules and regulations embodied herein shall apply to all government and private drug testing laboratories in the Philippines.

Section 2. **Authority:**

These rules and regulations are issued to implement the provisions of Republic Act 9165: “Comprehensive Dangerous Drugs Act of 2002” consistent with Executive Order 102 s. 1999: “Redirecting the Functions and Operations of the Department of Health”.

Section 3. **Definition of Terms:**

**Accreditation** refers to the formal authorization issued by the DOH to an individual, partnership, corporation or association which has complied with all licensing requirements (input/structural standards) and accreditation requirements (process standards and outcome/output/impact standards) as prescribed in the Manual of Operations for Drug Testing Laboratories issued by the DOH.

**Act** refers to Republic Act No.9165, “The Comprehensive Dangerous Drugs Act of 2002”.

**Applicant** refers to the owner or head of a laboratory that is applying for the issuance of accreditation.

**Applications Service Provider** refers to third party entities that manage and distribute software-based services and solutions to customers across a wide area network from a central data center.
Bureau refers to the Bureau of Health Facilities and Services of the DOH. It shall exercise the regulatory function.

Bureau Director refers to the director of the Bureau of Health Facilities and Services.

Chain of Custody refers to procedures to account for each specimen by tracking its handling and storage from point of collection to final disposal. These procedures require that the applicant’s identity is confirmed and that a Custody and Control Form is used from time of collection to receipt by the laboratory. Within the laboratory, appropriate chain of custody records must account for the samples until disposal.

Custody and Control Form refers to the form used to document the procedures from time of collection until receipt by the laboratory.

CHD refers to the Center for Health Development, which is the DOH Regional Field Office.

Client/Donor refers to the individual from whom a specimen is collected.

Confirmatory Test refers to the analytical procedure to identify and quantify the presence of a specific drug or metabolite, which is independent of the initial test and which uses a different technique and chemical principle from that of the screening test in order to ensure reliability and accuracy.

Cut Off refers to the concentration level set to determine whether the sample is positive or negative for the presence of a drug.

Dangerous Drugs include those listed in the schedule annexed to the Act and its implementing rules and regulations.

DOH refers to the Department of Health.

Laboratory refers to a private or government facility that is capable of testing a specimen to determine the presence of dangerous drugs therein.

NRL refers to the National Reference Laboratory for Environmental and Occupational Health, Toxicology and Micronutrient Assay designated by the Secretary of Health. It is a laboratory capable of doing screening and confirmatory laboratory services, training, and surveillance and external quality assurance program for laboratory tests. Whenever the drug testing laboratory result is challenged, the NRL shall make the final decision.

Procedure Manual refers to the written document giving detailed steps to be followed when undertaking a particular task.

Screening Test refers to a test to eliminate negative specimen from further consideration and to identify the presumptively positive specimen that requires confirmatory testing.
Secretary refers to the Secretary of Health.

Specimen refers to the body fluid that is collected from a person.

Section 4. **Classification of Drug Testing Laboratories:**

Drug testing laboratories shall be classified according to:

1. **Ownership**
   
   1.1. Government – operated and maintained partially or wholly by the national, provincial, city or municipal government, or other political unit, or by any department, division, board or agency thereof.

   1.2. Private – privately owned, established and operated with funds through donation, principal, investment or other means, by any individual, corporation, association or organization.

2. **Institutional Character**

   2.1 Institution-based – a laboratory that is located within the premises and operates as part of an institution (e.g. hospital, medical facilities for overseas workers and seafarers).

   2.2 Freestanding – a laboratory that is located outside the premises of an institution and operates independently.

3. **Service Capability**

   3.1 Screening Laboratory – a laboratory capable of performing screening tests.

   3.2 Confirmatory Laboratory – a laboratory capable of performing qualitative and quantitative examinations of dangerous drugs from the specimen.

Section 5. **Client/Donor of Drug Testing Laboratories**

As enumerated and described in R.A. 9165 Article III Section 36 the following persons shall undergo drug testing:

<table>
<thead>
<tr>
<th><strong>Mandatory Drug Testing</strong></th>
<th><strong>Random Drug Testing</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Applicants for driver’s license.</td>
<td>a. Students of secondary and tertiary schools.</td>
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<tr>
<td>b. Applicants for firearm’s license.</td>
<td>b. Officers and employees of public and private offices whether domestic or overseas.</td>
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<tr>
<td>c. Officers and members of the military, police and other law enforcers.</td>
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</table>
d. Persons charged before the prosecutor's office with a criminal offense having an imposable penalty of imprisonment of not less than six (6) years and one (1) day

e. Candidates for public office whether appointee or elected both in the national or local government

f. Persons apprehended or arrested for violating the provisions of this Act

Section 6. **Technical Requirements for Accreditation:**

The laboratory to be able to secure a DOH certificate of accreditation must comply with the following technical requirements:

1. **Physical Plant**

   1.1 Screening Laboratory - shall have at least twenty (20) square meters in floor area. The work area must be ten (10) square meters with exhaust fan, sink and storage cabinet.

   1.2 Confirmatory Laboratory - shall have at least sixty (60) square meters in floor area. The clinical work area must be thirty (30) square meters with exhaust fan, sink, stock room and instrumentation room.

   A laboratory of whatever category shall have within its premises an area which can receive or accommodate at least five (5) prospective client/donors at a given time, hand washing facility, toilet facility, and stall for the orderly collection of specimen.

   A DOH-licensed hospital or non-hospital based Secondary or Tertiary Category Clinical Laboratory, which intends to put up a Screening Laboratory for Drug Testing, need not provide an additional twenty (20) square meters to its existing floor area. It shall only designate an area for drug testing within the clinical laboratory.

2. **Headship of the Laboratory**

   The screening laboratory shall be headed by a licensed physician with certification in Clinical Pathology from the Philippine Board of Pathology or certification in Clinical Laboratory Management Training conducted by the DOH.

   The maximum number of screening laboratories a physician trained in Clinical Laboratory Management can handle is ten (10), provided that they are physically feasible (within 5 kilometer radius) to supervise.

   In cases where the screening drug-testing laboratory is a division, section, or unit of a Clinical Laboratory, it shall be headed either by a
licensed physician, chemist, medical technologist, pharmacist or chemical engineer.

The confirmatory laboratory shall be headed by a licensed physician certified in Clinical Pathology by the Philippine Board of Pathology with at least two (2) years of active laboratory experience in analytical toxicology or a licensed chemist with at least a Master's Degree in Chemistry, Biochemistry or a branch of Chemistry and at least two (2) years of active laboratory experience in analytical chemistry.

The head of the laboratory shall have training and/or experience in the theory and practice of the procedures used in laboratories, resulting in his or her thorough understanding of quality control procedures and practices; the review, interpretation and reporting of test results; the maintenance of chain of custody and proper remedial actions to be taken in response to test systems being out of control limits or quality control results.

The laboratory head shall have the overall responsibility for the professional, organizational, educational and administrative activities of the drug testing facility.

3. Personnel

A laboratory shall have the following technical staff:

3.1 Screening Laboratory - shall have either a full time licensed chemist, medical technologist, pharmacist or chemical engineer with appropriate training in screening test procedures for dangerous drugs. The DOH shall recognize the training program.

3.2 Confirmatory Laboratory - shall have a full time licensed chemist, who has successfully completed extensive and appropriate training in chromatography, spectroscopy and either a medical technologist, pharmacist or chemical engineer with appropriate training in the screening test procedure for dangerous drugs. The DOH shall recognize the training program. The laboratory staff of Confirmatory Laboratory shall be required to pass a proficiency test, which is to be established and administered by the NRL.

A laboratory shall have administrative or non-technical personnel who shall have the necessary training and skills for the tasks assigned to them.

4. Laboratory Equipment

A laboratory shall be required to have the following equipment:

4.1 Screening Laboratory - shall have the necessary equipment or kit for screening tests in addition to the basic equipment (refer to Annex A).
4.2 Confirmatory Laboratory - shall have the necessary equipment for screening, qualitative and quantitative examinations in addition to the basic equipment (refer to Annex A).

5. Information Technology Requirements

5.1 The laboratory shall maintain a set of information technology equipment whose specification shall conform to the minimum requirement set by the DOH (see Annex A).

5.2 The laboratory shall have access to one duly authorized Application Service Provider (ASP) approved and maintained by the DOH selected through competitive bidding following existing government rules and regulations. The DOH shall formulate the Terms of Reference / Request for Proposal for the selection of the Application Service Provider subject to the approval of the Dangerous Drugs Board.

6. Records

The laboratory shall maintain a record of all its personnel. These records shall include the resume of training and experience, certification or license, incident reports (if any) and such other information, which will establish the competence of the employee.

The laboratory must maintain and make available for an agreed period, documentation of all aspects of the testing process involved in the generation of a positive result.

The required documentation must include:

1. Training records on all individuals authorized to have access to samples
2. Custody and Control Forms
3. Quality assurance / quality control records
4. All data including calibration curves and any calculations used in determining test results
5. Reports
6. Records of performance testing and computer generated data

The laboratory will be required to maintain documents for any sample under legal challenge for a further agreed period.

7. Security

A laboratory shall have security measures to control access to the premises and to ensure that only authorized personnel handle or have access to specimens or can gain access to laboratory processes or to areas where records are stored. With the exception of duly authorized representative of the Bureau, all authorized visitors, maintenance and
service personnel shall be escorted at all times while inside the laboratory. The laboratory shall maintain a record that indicates the date, time of entry and exit and purpose of entry of non-employees.

8. Chain of Custody

A laboratory shall use documented chain of custody procedures to maintain control and accountability of specimens. The date and purpose shall be recorded on an appropriate Custody and Control Form each time a specimen is handled or transferred and every individual in the chain shall be identified. Accordingly, authorized collection staff shall be responsible for each specimen in their possession and shall sign and complete the Custody and Control Forms.

The minimum information required on the Custody and Control Form are the following:
1. Information identifying the specimen
2. Date and time of collection
3. Name of testing laboratory
4. Name and signatures of all individuals who had custody of the sample during the collection process

9. Storage of Laboratory Reports and Specimens

Reports pertaining to specimens shall be kept by the testing laboratory for a minimum period to be determined by the DOH. Specimens with confirmed positive test results, which are not challenged within fifteen (15) days after receipt, shall be discarded. A specimen may be kept for a maximum of one (1) year upon request.

10. Test Levels

The Bureau, until such time that the NRL is established and operational shall require each laboratory to submit its protocol indicating the initial cut-off levels in screening specimens to determine whether they are negative or for confirmation of the presence of dangerous drugs. The acceptability of the cut-off levels shall depend on the methods used by the laboratory, its equipment and registered testing kits.


A laboratory shall have a procedure manual validated by the NRL which shall include the principles of each test, the preparation of reagents, standards and controls, calibration procedures, derivation of results, linearity of methods, sensitivity of the methods, cut-off values, mechanisms for reporting results, control criteria for unacceptable specimens and results, remedial actions to be taken when the test systems are outside of acceptable limits, reagent expiration dates, references and quality control measures. Copies of all procedures and dates on which they are in effect shall be maintained as part of the manual.
12. Equipment and Instruments

Volumetric pipettes and measuring devices shall be certified for accuracy or be checked by gravimetric, colorimetric or other verification procedures by the Department of Science and Technology- Industrial Technology Development Institute. Automatic pipettes and dilutors shall be checked for accuracy and reproducibility before being placed in service and checked periodically. Thereafter, there shall be written procedures for instruments set-up and normal operations, a schedule for checking critical operating characteristics, tolerance limits for acceptable function checks, and instructions for major troubleshooting and repair. Preventive maintenance records shall be kept.

13. Calibrators and Controls

Laboratory calibrators and controls shall be prepared using pure drug reference materials, stock standard solutions obtained from other laboratories, or standard solutions obtained from commercial manufacturers. The calibrators and controls shall be properly labeled as to content and concentration. The standards (e.g. pure reference standards, stock standard solutions, purchased standards) shall be labeled with the following: date received (if applicable); date prepared or opened; date placed in service and expiration date.

14. Urine Specimen Collection, Handling and Disposal

The laboratory shall follow the DOH prescribed guidelines in the collection, handling and disposal of urine specimens. Universal precaution shall be observed at all times.

15. Laboratory Report

15.1 Screening test result form – the test result of an accredited laboratory shall be in the form prescribed by the DOH.

15.2 Signatory of test result – all test results shall bear the signature of the analyst and head of laboratory.

15.3 Reporting test results – a screening test result shall be reported as negative or positive. A confirmatory test shall report the presence or absence and the identity of the drug/metabolite tested as well as its concentration.

The original copy of the test result form shall be given to the client/donor immediately upon its completion. All specimens with positive screening test results shall be submitted for confirmation before a final report will be issued. Other copies of the said test result form shall be furnished immediately to the DOH and the requesting agency. The drug-testing laboratory shall retain one copy.
The test results that are forwarded to the DOH shall include the membrane of the registered drug testing kit in the case of screening tests and a copy of the chromatogram in the case of confirmatory tests.

15.4 Access to laboratory test results – the drug test result and the records shall be confidential subject to the usual accepted practices to protect the confidentiality of the test results.

16. Proficiency Testing

16.1 The NRL shall conduct a continuing assessment of the proficiency of Screening and Confirmatory Laboratories. All procedures associated with the handling and testing of the proficiency-testing sample shall to the greatest extent possible be carried out in a manner identical to that applied to routine specimens, unless otherwise specified.

16.2 Results of proficiency test. The laboratory shall submit to the NRL the results of the test performed on the unknown sample within three (3) weeks after the receipt of the test sample. Said results shall be kept confidential.

16.3 Failure to pass proficiency test. A laboratory that fails to pass proficiency test conducted by the NRL shall be given another test not earlier than one (1) month after the failed test. However, failure to pass proficiency test shall result in the suspension of its accreditation. Such suspension shall be lifted only after passing the second proficiency test. Failure to pass the second proficiency test shall result in the revocation of its accreditation.

Section 7. Validity of the Test Result:

The drug test certificates on tests performed by accredited drug testing centers shall be valid for one (1) year period from the date of issue, which may be used for other purposes.

Section 8. Allowable Service Fees:

The drug-testing laboratory may collect a reasonable service fee for the performed examination, which shall not be greater than the maximum allowable service fee prescribed by the DOH. The maximum allowable service fees shall be adjusted from time to time.
Section 9. **Procedural Guidelines for Accreditation:**

The applicant shall follow these procedures for application of initial certificate of accreditation:

1. Applicant accomplishes the required documents and submits them to the Bureau or CHD for endorsement to the Bureau. Upon filing of application, the applicant pays the corresponding fees to the Cashier of the DOH in person, or through postal money order.

**Documentary Requirements:**

1.1 BHFS Application Form - filed either at the Bureau or CHD
1.2 Letter of Endorsement to the Bureau Director (if filed at the CHD)
1.3 DTI/SEC Registration (for private laboratory)
   - Enabling Act (for national government laboratory)
   - Approved Board Resolution (for local government laboratory)
1.4 Mayor’s Permit
1.5 One (1) set of Floor Plan showing specific location of equipment and work areas required, appropriately dimensioned, properly identified and completely labeled. It shall be signed and sealed by an architect or engineer.
1.6 List of Personnel, notarized, including photocopies of current PRC identification cards and certificates of training
1.7 List of Equipment with specifications
1.8 Contract of Lease (if facility is rented)
1.9 Procedure Manual
1.10 Custody and Control Form

The following requirements shall be submitted within the first six (6) months of operation after issuance of initial certificate of accreditation:

1.11 Documentation of Quality Control Program (for screening laboratory)
1.12 Certification for Quality Standard System from a DOH-recognized certifying body (for confirmatory laboratory)

2. The Bureau conducts survey on site to determine compliance with standards and technical requirements of accreditation.

3. The Bureau approves or disapproves the issuance of certificate of accreditation.

3.1 If approved, the Bureau registers the laboratory and issues an initial certificate of accreditation to the applicant upon deposit of twenty thousand pesos (P20, 000) cash bond.

3.2 If disapproved, the Bureau sends the findings and recommendations to the applicant for compliance. Failure to comply within fifteen (15) days shall be a ground for denial of the application. Hence, the applicant has to re-file his application and pays the required accreditation fees.
Section 10. **Accreditation Fees:**

1. The following schedule of fees for initial and renewal of accreditation shall be paid to the Cashier of the DOH.

   **Accreditation Fees**
   
   1.1 Confirmatory laboratory  PhP 10,000.00  
   1.2 Screening laboratory PhP 5,000.00  

   The initial certificate of accreditation of private drug testing laboratories shall be issued upon deposit of twenty thousand pesos (P20,000.00) cash bond per laboratory.

2. The Bureau is authorized to adjust the accreditation fees from time to time.

Section 11. **Content of Certificate of Accreditation:**

The certificate of accreditation shall state on its face the name of the owner and head of the laboratory, the classification and validity period. It shall be signed by the Bureau or CHD Director.

Section 12. **Validity:**

The certificate of accreditation shall be valid for a period of two (2) years for Confirmatory Laboratory and one (1) year for a Screening Laboratory.

Section 13. **Renewal Certificate of Accreditation**

1. Application for renewal of accreditation shall be filed ninety (90) days before the expiry date to the Bureau or CHD under whose jurisdiction the laboratory is located.

2. The applicant shall follow the following procedures for renewal of certificate of accreditation:

   2.1 Applicant accomplishes the required documents and submits them to the Bureau or CHD. Upon filing of application, the applicant pays the corresponding fees for renewal to the Cashier of the Bureau or CHD in person, or through postal money order.

   **Documentary requirements:**
   2.1.1 Notarized: Application for Renewal of Certificate of Accreditation  
   2.1.2 Notarized List of Personnel  
   2.1.3 List of Equipment/Instrument  
   2.1.4 Current Certificate of Accreditation
2.1.5 Current Mayor’s Permit
2.1.6 Documentation of Chain of Custody
2.1.7 Current Certification for Quality Standard System (renewed yearly) -for Confirmatory Laboratory
2.1.8 Current Proficiency Test Result (renewed yearly)

2.2 The Bureau or CHD conducts survey to determine compliance with standards and technical requirements for accreditation.

2.3 The Bureau or CHD approves or disapproves renewal of certification of accreditation.

2.3.1 If approved, the Bureau or CHD renews the certificate of accreditation.

2.3.2 If disapproved, the Bureau or CHD sends the findings and recommendations to the applicant for compliance. Failure to comply within fifteen (15) days shall be a ground for suspension/revocation of accreditation.

Section 14. Monitoring of Laboratories:

The Bureau or CHD may conduct an on site monitoring visits of accredited laboratories. The monitoring visits shall be conducted unannounced. The monitoring visits shall document the overall quality of the laboratory setting.

Section 15. Terms and Conditions of Accreditation:

1. An accreditation shall be granted in accordance with prescribed accreditation requirements and on the basis of specific conditions and limitations established during survey.

2. An accreditation that is not renewed on the expiry date shall be considered lapsed and registration shall be cancelled. A new application for the issuance of accreditation shall be required before a laboratory can be allowed to operate.

3. The accreditation as herein granted as well as any right under the accreditation cannot be assigned or otherwise transferred directly or indirectly to any party.

4. The Bureau shall be notified of any change in management name or ownership. In cases of transfer of location, a new application for accreditation shall be required.

5. Failure to report in writing within fifteen (15) days of any substantial change in the condition of the laboratory (e.g. changes in the physical plant, equipment or manpower) may be a basis for the suspension or revocation of the accreditation.

6. A separate accreditation shall be required for all laboratories or branches maintained in separate premises but operated under the same management.
7. The accreditation shall be placed in an area readily seen by the public. A copy of the rules and regulations shall be readily available for guidance of all personnel of the laboratory.

Section 16. Violations:

Violations of this Implementing Rules and Regulations shall include among others the commission of the following acts:

1. Issuance of false or fraudulent drug test results.
2. Failure to protect the confidentiality of drug test results.
3. Failure to participate or pass the proficiency testing.
4. Conviction of the owner or manager of a laboratory for any criminal offense committed as an incident to the operation of the laboratory.
5. Failure to refer the positive screening test results to a Confirmatory Laboratory.
6. Any other cause which materially affects the ability of the laboratory to ensure the full reliability and accuracy of drug tests and the accurate reporting of results.
7. Failure on the part of the medical facility to submit documentation of Quality Control Program (for screening laboratory) and certification of Quality Standard System from a DOH-recognized certifying body (for confirmatory laboratory) within 6 (six) months of operation after issuance of initial certificate of accreditation will cause revocation of the initial certification of accreditation.
8. Refusal to allow survey, monitoring of a laboratory by the Bureau or CHD at an appropriate time.
9. Any act which is contrary to the accepted clinical laboratory practices.

Commission or omission of any of the aforementioned acts shall be a ground for suspension / revocation of certificate of accreditation without prejudice to the filing of any appropriate criminal action under Section 32 of R.A. 9165.

Section 17. Suspension or revocation Certificate of Accreditation:

The Bureau on its own or based on complaint, shall investigate and after due hearings may suspend or revoke the accreditation of a laboratory for such period and under such terms as may be necessary to ensure the full reliability and accuracy of drug tests and the accurate reporting of test results.

If upon survey or monitoring visits, the drug testing laboratory is found to be violating the rules and regulations as well as other violations stipulated under Section 17, the Bureau may immediately preventively suspend the operation of the said laboratory. Preventive suspension shall not be more than sixty (60) days.
Section 18. **Reapplication for Certificate of Accreditation:**

A laboratory whose Certificate of Accreditation has been revoked may reapply for the issuance of a new one upon compliance with the requirements established hereunder and/or the correction of the deficiency or violation, which resulted in the revocation.

Section 19. **Appeal:**

Any laboratory or any of its personnel aggrieved by the decision of the Bureau may, within fifteen (15) days after receipt of the notice of decision, file a notice of appeal with the Office of the Secretary, and serve a copy of the notice of appeal to the Bureau. Thereupon, the Bureau shall promptly certify and file a copy of the decision, including the transcript of the hearings on which the decision is based with the Office of the Secretary for review and consideration.

Section 20. **Penal Provisions:**

Any person authorized or accredited under this Act and its implementing rules to conduct drug examination or test, who issues false or fraudulent drug test result knowingly, willfully or through gross negligence, shall suffer the penalty of imprisonment ranging from six (6) years and one (1) day to twelve (12) years and a fine ranging from one hundred thousand pesos (P100,000.00) to five hundred thousand pesos (P500,000.00). Further, revocation of license to practice shall be recommended to the Professional Regulation Commission.

Section 21. **Transitory Provisions:**

Until such time that the NRL for toxicology of the DOH is established and operational, the DDB-Laboratory shall act as the NRL.

In administrative regions where there are no Gas Chromatography-Mass Spectrometer (GCMS) nor High Performance Liquid Chromatography-Mass Spectrometer (HPLC-MS) equipment currently available, all DDB licensed drug testing laboratories using High Performance Liquid Chromatography (HPLC) may be allowed to operate as Confirmatory Laboratory using such machine provided that its photo diode array is not more than two (2) years. In the absence of GC-MS and HPLC with photodiode array of not more than two years, licensed drug-testing laboratories using Thin Layer Chromatography (TLC) may be allowed to perform confirmatory tests.

In the event that a confirmatory laboratory with GC-MS or HPLC-MS is accredited by the DOH in administrative regions where they were not earlier available, use of HPLC with photo-diode array of not more than two years or TLC shall be allowed only for a maximum period of ninety (90) days from receipt of notice of such accreditation from the DOH, which notice must be sent within ten (10) days from approval.
In the event that a confirmatory laboratory with HPLC with photo diode array of not more than two years is accredited by the DOH in administrative regions where GC-MS or HPLC-MS is not available, use of TLC shall be allowed only for a maximum period of ninety (90) days from receipt of notice of such accreditation from DOH, which notice must be sent within ten (10) days from approval.

When modern and accepted methods for confirmatory testing emerge, the DOH shall immediately conduct technical studies and submit recommendations to the DDB for appropriate action.

The use of DDB validated drug testing kits shall be allowed until December 31, 2003. Thereafter, only Bureau of Food and Drugs registered kits shall be used.

Manual processing of necessary documents shall be done in facilities where an Application Service Provider (ASP) is not available.

These rules and regulations shall be subject for review annually.

Section 23. Separability:

In the event that any section, paragraph, sentence, clause or word of this order is declared invalid for whatever, any reason, other provisions thereof shall not be affected thereby.

Section 24. Effectivity:

These rules and regulations shall take effect upon approval of the Dangerous Drugs Board and publication in a newspaper of general circulation.

ADOPTED and APPROVED this 27th of June, 2003 at Camp Crame, Quezon City
## Minimum Technical Requirements:

<table>
<thead>
<tr>
<th>Service</th>
<th>Confirmatory Laboratory</th>
<th>Screening Laboratory</th>
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<tbody>
<tr>
<td>Screening Test</td>
<td>Immunoassay equipment or BFAD registered drug-testing kit or Thin Layer Chromatography (TLC)</td>
<td>Immunoassay equipment or BFAD registered-drug-testing kit or Thin Layer Chromatography (TLC)</td>
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<tr>
<td>Confirmatory Examination</td>
<td>Gas Chromatography-Mass Spectrometer (GC-MS), High Performance Liquid Chromatography-Mass Spectrometer (HPLC-MS) or some such modern and accepted equipment</td>
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<td>Basic equipment:</td>
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<td>- Laboratory oven</td>
<td>- Refrigerator/freezer</td>
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<td>- Analytical balance</td>
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<td>- Other necessary equipment</td>
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<td>based on the procedure used</td>
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IT System Requirements for Confirmatory Laboratory and Screening Laboratory:

1. Computer
   - 600 MHZ processor
   - 128 MB memory
   - 4 GB hard disk
   - 56 K modem

2. Printer

3. Account with local Internet Service Provider (ISP)
JAIME M. VIBAR  
(Representing the President,  
Integrated Bar of the Philippines)  
Regular Member

MIGUEL A. PEREZ-RUBIO  
(President, Katotohanan Foundation-NGO)  
Regular Member

MARIA MERCEDITAS N. GUTIERREZ  
(Undersecretary, Representing the  
Secretary of Justice)  
Ex-Officio Member

ANTONIO S. LOPEZ  
(Undersecretary, Representing the  
Secretary of Health)  
Ex-Officio Member

ANTONIO C. SANTOS  
(Undersecretary, Representing the  
Secretary of National Defense)  
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FRANKLIN M. EBDALIN  
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Secretary of Foreign Affairs)  
Ex-Officio Member

RAMON C. BACANI  
(Undersecretary, Representing the  
Secretary of Education)  
Ex-Officio Member
ROLANDO R. DIZON  
(Chairman, Commission on Higher Education)  
Ex-Officio Member

ANSELMO S. AVENIDO, JR.  
(Director-General, Philippine Drug  
Enforcement Agency)  
Ex-Officio Member

PAOLO BENIGNO A. AQUINO IV  
(Chairperson, National Youth Commission)  
Ex-Officio Member

LUCITA S. LAZO  
(Undersecretary, Representing the  
Secretary of Labor and Employment)  
Ex-Officio Member

BERNARDO T. LASTIMOSO  
(Undersecretary, Permanent Member,  
Dangerous Drugs Board)

EDGAR C. GALVANTE  
(Undersecretary, Permanent Member,  
Dangerous Drugs Board)

JOSE D. LINA, JR.  
Secretary, Department of Interior and Local Government and  
OIC Chairman, Dangerous Drugs Board

Attested:

EFREN Q. FERNANDEZ  
Undersecretary  
Executive Director, Dangerous Drugs Board
JAIME M. VIBAR
(Representing the President,
Integrated Bar of the Philippines)
Regular Member

MIGUEL A. PEREZ-RUBIO
(President, Katotohanan Foundation-NGO)
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Secretary of Foreign Affairs)
Ex-Officio Member

RAMON C. BACANI
(Undersecretary, Representing the
Secretary of Education)
Ex-Officio Member

LOURDES G. BALANON
(Undersecretary, Representing the
Secretary of Social Welfare and Development)
Ex-Officio Member

Bd. Reg. on the IRR on Accreditation of DTL