MEDICAL AND DENTAL PRACTITIONERS COUNCIL OF ZIMBABWE (MDPCZ)



Practitioners Drug Screening Protocol

INTRODUCTION

Section 30 (c) of the Health Professions Act (Chapter 27:19) mandates the MDPCZ to define amongst other things ethical practice among registered practitioners. In the same vein Section 30 (k) of the said Act obliges the MDPCZ to take necessary steps to advance the standing and effectiveness of the registered medical practitioner. It is against this background that the MDPCZ has noted an increase in the number of registered practitioners who have impaired function due to substance misuse during the course of duty which has affected their effectiveness in the practice of medicine. It has therefore become necessary to screen of practitioners under rehabilitation by the MDPCZ through the Health Committee. The process is done through the following process.

1. GUIDELINES

- 1.1 The Practitioner needs to give written consent to the Medical and Dental Practitioners Council for the screening to take place.
- 1.2) This is included in the contract between the Practitioner and the Medical and Dental Practitioners Council of Zimbabwe.
- 1.3) The screening is to be random with no prior warning between 8am and 6pm in the work place with the exception of those on call where the test can be done anywhere and at whatever time.
- 1.4) The screening is to be done at a minimum frequency of once every 6 months. If it is deemed necessary the test can be done more often.
- 1.5) Where a doctor/practitioner is gainfully employed, they shall pay the cost of the drug screening.
- 1.6) The test will constitute a breath analyser test and/or urine drug toxicology screen which is to be conducted at the expense of the practitioner. Collection of urine to be supervised by a chaperone of the appropriate sex.
- 1.7) The urine specimen should be at least 30ml.

- 1.8) The practitioner should provide a self-addressed label so that information is filled in and s/ he signs it.
- 1.9) On completion of the request form for urine tests it must be indicated that tests for specific gravity and pH are also required.
- 1.10) The collector must fill an initial collection form which includes how the specimen was collected, the initial description of the urine and the attitude of the practitioner during the collection process (must also be recorded).

2. VERIFICATION SHOULD FOLLOW ONE OF THE FOLLOWING WAYS IF URINE COLLECTION IS NOT DIRECTLY SUPERVISED BY A CHAPERONE:

A) If the water basin or tap is within the toilet then the collector should ensure the taps are covered with tamper-proof evidence tape. A colouring agent should be put in the toilet bowel and shank

OR

B) Temperature should be checked on receipt of specimen by the collector. This should be close to core body temperature.

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