



# CDAR

# Job Aid

**Command Drug and Alcohol Representative**

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**U. S. Coast Guard  
Substance Abuse Prevention and  
Treatment Program**

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**About this  
Job Aid**

The CDAR Job Aid was developed by the Substance Abuse Prevention Teams (SAPT). The information contained is current as of May 2003

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**Feedback**

Suggestions to improve the CDAR Job Aid are encouraged and should be directed to LANT or PAC SAPT.

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# CDAR Job Aid

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**Job Aid** The purpose of this Job Aid is to provide a ready reference for CDARs seeking information, references and resources regarding the accomplishment of CDAR duties.

**Limitations** The Job Aid is a paraphrase of policy and current processes. It is not intended to replace Commandant Instructions. Before taking administrative action, prudence dictates referencing the applicable Commandant Instruction.

**Objective** The objectives of the Substance Abuse Program are to reduce to a minimum the abuse of alcohol and other drugs within the Coast Guard. This will be accomplished by identifying those members who are substance abusers, offer education so all can recognize their abuse and when appropriate, offer rehabilitation.

**References** COMDTINST M1000.6 (series), CG Personnel Manual Chapter 20  
COMDTINST M6200.1 (series), CG Health Promotions Manual Chapter 2.

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<b>Coast Guard Substance Abuse Program Web Site</b>	<b>WWW.USCG.MIL/HQ/G-W/G-WK/G-WKH/G-WKH- 3/ADDICT.HTM</b>
<b>US Navy Drug and Alcohol Web Site</b>	<b>WWW.NPRDC.NAVY.MIL/NAVDWEB</b>

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# Frequently Asked Questions (FAQs)

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## 1. What is a CDAR?

A CDAR is a Command Drug and Alcohol Representative who provides assistance to members, supervisors and the command on substance abuse issues.

CDARs perform training, arrange screenings for members, arrange treatment, ensure proper documentation is completed, provide support for members entering and returning from treatment and keep the command abreast of status or problems.

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## 2. What is the Command responsibility?

- Designate a CDAR and send them to training;
  - Support the CDAR in performance of duties;
  - Monitor and identify alcohol and drug misuse;
  - Ensure documentation is completed;
  - Take appropriate action when a drug or alcohol incident takes place;
  - And promote a **Substance Abuse Free Environment**
- 

## 3. What is an Alcohol Incident?

Any behavior in which the use or abuse of alcohol is determined to be a significant **or** causative factor **and;**

- a.) Results in a loss of ability to perform duty **or**
- b.) Brings discredit upon the Uniformed Services **or is a**
- c.) Violation of the UCMJ, Federal, State or Local laws.

The member need not be found guilty in a civilian court or awarded NJP for the behavior to be considered an alcohol incident.

**The member must actually consume alcohol for an alcohol incident to have occurred.**

See FAQ (25) for guidance.

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## 4. What is Substance Abuse Free Environment?

SAFE stands for "Substance Abuse Free Environment." SAFE is a group of leadership based substance abuse prevention courses specifically designed for delivery to every member of the Coast Guard. The course is divided into four levels to accommodate all levels of leadership.

# Frequently Asked Questions (FAQs)

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## 5. What is considered a self-referral?

A self referral is when a member approaches the command for help with alcohol misuse or abuse. **This is not considered an Alcohol incident.** Special considerations maybe given for self-referral see chapter 20 for guidance.

A member cannot self-refer after an Alcohol Incident is determined to have taken place. If a command becomes aware that an Alcohol Incident indeed did take place, the self-referral shall be changed to reflect new information.

- Make sure information is documented on CG 3307 or letter.
- Ensure or enter information in medical record about the self-referral on SF 600
- Set member up with a screening as per FAQ (11). Treatment as prescribed by the screener. See FAQ (19)
- In certain circumstances, CG3307 or letter may be requested to be removed from admin record after all conditions are met. The diagnosis and information will stay in the medical record.
- Send [CDAR referral and follow up report](#) to appropriate MLC. See enclosure 3.

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## 6. What is considered a Command referral?

Unit Commanding Officers are strongly encouraged to refer any member for alcohol screening when alcohol misuse is suspected. An **alcohol incident is not required** before this referral is made.

- Make sure it is documented on CG 3307 or Letter
  - Ensure or enter information about referral in medical record on SF 600
  - Set up screening as per FAQ (11) and treatment as per FAQ (19) if needed.
  - Send [CDAR referral and follow up report](#) to appropriate MLC.
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# Frequently Asked Questions (FAQs)

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**7. What does Alcohol Dependence or Alcohol Abuse mean?**

Alcohol abuse and dependence are medical diagnoses which require treatment. Abuse means that the member has a relationship with alcohol but isn't chemically dependent upon it. Dependence means that the member is chemically dependent upon alcohol and is suffering from the disease of alcoholism. The criteria for both disorders can be found in the Diagnostic and Statistics Manual (DSM) series.

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**8. When should I arrange a screening?**

A screening is an assessment of a member's relationship with a substance(s). The CDAR shall schedule a screening with a qualified screener for:

- alcohol or drug incident,
- self-referral or
- Command Referral.

Members who are involved in family violence cases where alcohol use is suspected.

Charged with DWI/DUI.

Underage Drinking.

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**9. Who is a qualified screener?**

A physician or psychologist who have specific credentials to screen for substance abuse or dependency, Coast Guard Medical Officers who have attended Addiction Orientation for Health Care Providers (AOHCP-1) or equivalent civilian training, and qualified Substance Abuse Prevention Specialists at ISC Kodiak and Tracen Petaluma who work directly under physician or psychologist.

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# Frequently Asked Questions (FAQs)

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**10. Can an alcohol incident be removed for underage drinking?**

A member can request to have documentation removed from their PDR if underage drinking was the only issue and all other criteria outlined in Chapter 20 for such a request is met. The request can be submitted via the member's chain of command after 3 years if no other alcohol problems have occurred.

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**11. How do I arrange a screening?**

A CDAR typically makes arrangements for a screening by simply placing a telephone call to members Primary Care Provider, MTF, SAPS at Trace Petaluma and Kodiak or other appropriate screening facility.

Each facility has a required form and processes, which must be completed prior to the screening. Ensure they are completed.

If the screening facility appropriate for your unit is unknown, call your MLC SAPR, SAPT, local Tricare provider or regional manager or visit them on the web at [www.tricare.osd.mil](http://www.tricare.osd.mil) under mental health.

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**12. What is the member responsibility for the COMDT's drug policy?**

Member's are expected not only to comply with the law and not use illegal drugs, but also, as members of a law enforcement agency, to maintain a life-style which neither condones substance abuse by others nor exposes the service member to accidental intake of illegal drugs.

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# Frequently Asked Questions (FAQs)

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## 13. What do I do after a screening?

The screening facility will usually mail a written evaluation and/or treatment recommendation directly to the command CO/XO Eyes Only.

In the event of a diagnosis of substance/alcohol dependence or abuse the member must be afforded the opportunity to attend treatment immediately.

If **no** diagnosis of alcohol dependence or abuse is indicated in the written evaluation the screening facility will in most cases recommend attendance at an alcohol education such as the Navy's IMPACT, Coast Guard BASICS course or other civilian classes.

- A CG3307 or Letter should be made documenting the results of any screening (AD 4)
- Ensure or enter information about diagnosis, screening facility in medical record on SF 600 (AD 4)
- Ensure that Adult Patient Flow Sheet is updated for dependent members.
- submit a CDAR Referral and Follow-up Report to the MLC SAPR.

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## 14. What is a Pre-existing condition?

A member who is **Diagnosed** with alcohol abuse or substance dependency within the first 180 days of enlistment. The 180 day count begins the first day of boot camp. These members are not physical qualified for enlistment into the Coast Guard. They shall be processed for separation IAW COMDTINST M6000.1 (series), Medical Manual.

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# Frequently Asked Questions (FAQs)

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**15. A security check turns up a DUI?**

We did a routine security check on a member and found that he/she had a DUI that the command was not aware of, does it still count as an alcohol incident?

Yes, unless the incident occurred prior to 18 January 1983. Any alcohol incidents which occurred prior to this date cannot be used for administrative purposes such as a basis for separation. Documentation for the newly discovered incident is the same as for all other incident documentation.

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**16. My command doesn't want to make an incident official...**

A member was involved in an alcohol incident (by definition), but my command is not calling it an incident. What should I do?

Remember that you are a command advisor. Make sure the command is aware of Commandant's policy, answer his/her questions, and offer advice. That's all. The CO has the responsibility to determine if an incident takes place and to determine the course of action.

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**17. What if a member refuses treatment?**

The Member will be processed for discharge. Follow guidelines of the Personnel Manual Chapter 8. The member must also sign a CG 3307 or letter explaining that their rights for treatment through the VA for substance abuse is waived. See AD (6) for guidance.

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**18. What if a member does not complete recommended treatment?**

The Member will be processed for discharge for unsuitability. Follow guidelines of the Personnel Manual Chapter 8.

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# Frequently Asked Questions (FAQs)

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**19. What is the process for getting a member into treatment?**

First, the member must be willing to attend treatment and have a diagnosis of substance dependence or alcohol abuse by a qualified screener.

Here are the steps to follow:

Step	Action
1	CDAR contacts the Treatment Facility directly for scheduling and completes any admission requirements for that particular facility.
2	CDAR submits a completed <a href="#">USCG Rehabilitation Treatment Request Form (CG-5627)</a> (if required) and <a href="#">CDAR Referral and Follow-up Report (CG-5626)</a> to MLC APR. These forms can be found in Encl. (3) to COMDTINST M6200.1. (Local Reproduction)
3	Contact MLC SAPR's for guidance on TONO's (if needed) for treatment.
4	Advise member of required uniform, personal items; clothing or study related items needed to attend treatment. Ask treatment facility to provide a list.
5	Coordinate member's departure from unit with XO, member's supervisor and member. Ensure round-trip travel arrangements are complete prior to departure. Arrangements should limit the member's exposure to drinking opportunities. Keep in mind that an escort to and from treatment is strongly encouraged.

# Frequently Asked Questions (FAQs)

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## 20. What is pre-treatment?

If a member is diagnosed as alcohol dependent, the command shall **immediately** place the individual on a pre-treatment program as a protective measure until the member can be sent to treatment. This will include but not limited to (see AD\_4)

- detoxification if needed
- Abstinence from alcohol
- meetings with the CDAR for support
- attendance at Alcoholics Anonymous (AA) or other MLC approved support groups at least weekly if unit operations permit

For members diagnosed alcohol abusive, the command shall follow the guidance of the screening facility. (see AD 4)

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## 21. What about when a member returns from treatment?

The rehabilitation program staff shall provide a written aftercare plan for members diagnosed as alcohol dependent or abusive. This aftercare plan should be used as a guide to develop a list of actions the member must accomplish.

- This list is normally documented on a CG 3307 or letter.
  - The aftercare plan must be documented in the health record. To include treatment facility plan and that the plan was put into affect.
  - CDAR Referral and Follow-up Report (CG 5626) to the appropriate MLC APR.
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## 22. What is the minimum aftercare requirements?

Aftercare programs should consist of but are not limited to:

Abusive: 90 days (see AD 7)

- Weekly meeting with CDAR
- Abstain from alcohol (for 90 days)
- 2 weekly AA or other support groups.

Dependent: 1 year (see AD 8)

- Weekly meeting with CDAR
- Abstain from alcohol (indefinitely)
- 2 weekly AA or other support groups.
- Quarterly evaluation

# Frequently Asked Questions (FAQ)

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**23. An alcohol dependent member seems to be drinking...**

I think that one of our members (who is alcohol dependent) is drinking again. There are just little indications and I don't have any proof, what should I do?

Depends where member is with their sobriety.

1. If it happens while member is currently on an aftercare program, this is considered a treatment failure. See chapter 20 for guidance. (Self-referral get consideration)
2. If it occurs after the aftercare program is completed then this is considered a relapse. Depending on the number of prior incidents, length of time in recovery, etc will determine course of action. Contact your SAPTeam.

Naturally we don't want to go on witch-hunts. Talk to the individual first to avoid any misunderstandings. Advise the command of what you see going on, and suggest a course of action. Remember the command does not have to have proof that someone is drinking before sending them for an assessment.

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**24. Can a member go to treatment again?**

Rehabilitation includes inpatient and/or outpatient treatment, counseling or other appropriate care administered to the recovering or alcohol abusive members in an effort to redirect life patterns and attitudes.

Attendance at the appropriate level is necessary for treatment success. In some cases a member may attend a lower level of treatment than needed. In these cases he or she will probably be afforded the opportunity to attend treatment again, but normally a member is given the opportunity to attend alcohol treatment only once in his or her career.

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# Frequently Asked Questions (FAQs)

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**25. What should I do in the event of an alcohol incident?**

When an alcohol incident occurs at your unit you will probably be among the first to be notified. In addition to the steps you should advise the command to follow, here are some general rules to guide you:

- assess the situation and ensure the safety of all concerned
- remember you are an advisor to the command and the member
- ensure the command is aware of the situation
- Review Medical and PDR for any other incidents, problems or alcohol diagnosis.
- Set up screening as per FAQ (11)
- Counsel member on policy
- Start CG 3307 or letter see AD (1 or 2)
- Make or ensure medical record entry is made on SF600.
- Ensure Special Enlisted Evaluation are completed
- Arrange necessary treatment and/or pre-treatment plan
- Send CDAR referral and follow up report to appropriate MLC
- NJP is up to command.

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**26. What happens if a member gets a second incident?**

Officers and enlisted members will be processed for separation following a second alcohol incident. The CO has the right to positively endorse a separation package if the situation warrants consideration for retention. OPM/EPM will make the final determination.

A letter requesting retention and treatment shall be forwarded via the chain of command to Commandant

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**27. What does SARP stand for?**

This is the Navy's Substance Abuse Rehabilitation Programs. The SARP is inclusive of their education and rehab programs as well as their facilities.

# Frequently Asked Questions (FAQs)

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**28. What do I do for a member who relapses?**

If a member has successfully completed the one-year aftercare program and is suspected of or is drinking again, member must be placed back on at least 6-month aftercare program.

Send member to medical officer to ensure that it is safe to do so. You do not need to send them back to a screener. Once dependant always dependent.

Follow the guidelines for FAQ (22) for aftercare requirements.

Commanding Officer shall send recommendation to Headquarters for retention or separation.

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**29. What education programs are available?**

The first intervention level in the Continuum of Care is education. Any member suspected of misuse or involved in an alcohol incident or situation where treatment is not recommended should attend an alcohol awareness education program.

Coast Guard BASICS Courses are also available through the Substance Abuse Prevention Teams for delivery to Coast Guard members requiring this type of education.

Courses currently available include as the Navy PREVENT Course and the Navy Impact Course. Any Navy Substance Abuse Rehabilitation Programs (SARP) can provide information on these.

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# Frequently Asked Questions (FAQs)

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**30. What are the Levels of treatment?**

There are now five levels of treatment. This is called the “Continuum of Care”. The advantages over the old levels of treatment are:

- treatment is individualized
- member transfers to different treatment levels as needed
- members return to the command faster

Here are the Levels of Treatment:

<b>Level</b>	<b>Type of Intervention</b>
.5	Intensive education programs such as BASICS (CG) or IMPACT (Navy).
I	Outpatient services (OP) average length is 40-50 hours.
II	Intensive Outpatient services (IOP) average length is 100 hours.
III	Residential services (IP) length of stay is variable.
IV	Medically Managed services (DETOX) average length of stay is 7 days.

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**31. How do I do the required training?**

Call the SAPTeam to get a copy of the CDAR Unit Level Training Handbook (CULTH). The CULTH is a collection of eight 20-30 minute lessons plans to assist you in the delivery of your required semi-annual training.

Visit the Substance Abuse Program Web Site for additional information on training resources and tips.

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# Frequently Asked Questions (FAQs)

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## **32. What is a drug incident?**

The intentional possession, use, or distribution of illegal drugs is misconduct, which will not be tolerated in the Coast Guard. The use of any drug for other than its intended uses.

If, after investigation, the commanding officer determines that a drug incident occurred, he or she will take these actions:

- member will be processed for separation
- disciplinary action under the UCMJ
- screening member and if member is drug dependent, offer treatment prior to discharge

Screenings for drug misuse follow the same procedures as screenings for alcohol misuse. Follow the process found in FAQ (11)

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## **33. What are some common indicators of abuse?**

No single factor determines who will use substances inappropriately but here are some warning signs:

- drop in performance, lateness and absenteeism
  - lack of interest in grooming
  - withdrawal, isolation, depression, fatigue
  - aggressive, rebellious behavior
  - excessive peer influence
  - hostility and lack of cooperation
  - deteriorating relationships
  - change in friends
  - loss of interest in hobbies or sports
  - change in eating or sleeping habits
  - physical changes (red eyes, runny nose not due to cold, coughing wheezing, bags under eyes, frequent sore throats, bruises from falls etc.)
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# Administrative Documentation

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**Purpose** This section of the CDAR Job Aid is provided to give examples of the various types of administrative comments which are required from time to time.

These examples are suggestions. Ensure the documentation is specific and addresses all issues and requirements clearly and accurately.

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**Entry Type and Reference** All of these are Performance and Discipline entries.

The reference is Section 20-B, Personnel Manual, COMDTINST M1000.6 (series).

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**1. First Alcohol Incident**

(P&D-20)

(Date): On (DDMMYY) you received an alcohol incident when your abuse of alcohol was determined to be a significant and/or causative factor, (describe what happened). List (time, dates, place, pertinent information, arrested by, BAC if done, etc.)

You were counseled on USCG policies concerning alcohol use and abuse as well as the serious nature of this incident. The unit CDAR will arrange an appointment with a provider who will determine the nature of your relationship with alcohol. It is recommended that you abstain from the use alcohol until your screening and assessment is completed. (Note any actions pending if any).

This is considered your first documented alcohol incident. (Underage Drinking violation only: Your command may request removal of this incident from your permanent record after three years if no further incidents occur. Any future incidents will result in you being processed for separation as per Chapter 20 of the Personnel Manual, COMDTINST M1000.6 (series).

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## Administrative Documentation, Continued

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### 2. Second or Third Alcohol Incident

(P&D-21)

Performance and Discipline

Section 20-B, Personnel Manual, COMDTINST M1000.6 (series), Chapter 2  
Health Promotions 6200.1

Unit

(Date): On (DDMMYY) you were involved in an alcohol incident.

(Describe what happened. List time, dates, place, pertinent information, arrested by, BAC if done, etc.)

You were previously counseled (DDMMYY) on USCG policies concerning alcohol use and abuse as well as the serious nature of this incident. The unit CDAR will arrange an appointment with a provider who will determine the nature of your relationship with alcohol. It is recommended that you abstain from the use alcohol until your screening and assessment is completed. (Note any actions pending if any).

This is considered your (second/third) documented alcohol incident. Per Chapter 20 of the Personnel Manual, COMDTINST M1000.6 (series), you will be processed for separation from the U.S. Coast Guard.

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### 3. Alcohol situations

**P&D 22**

Performance and Discipline

Section 20-B, Personnel Manual, COMDTINST M1000.6 (series), Chapter 2  
Health Promotions 6200.1

Unit

(Date) On (DDMMYY) you were involved in an alcohol situation. Alcohol was not considered to be a significant or causative in factor in the (describe the circumstances, violations, or actions pending).

This is not considered an alcohol incident, but is entered for documentation purposes only. You have been advised of the contents of Chapter 20, Personnel Manual, COMDTINST M1000.6 (series) concerning conduct expected of Coast Guard personnel.

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## Administrative Documentation, Continued

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### 4. Alcohol Abusive or Substance dependency: Screening/ Diagnosis

(P&D-26)

(Date): On DDMMYY you were screened by (name) at (Name of facility) for a (self-referral/Command referral/ alcohol incident) where it was determined that you meet the criteria for a diagnosis of (Alcohol abusive ICD 305.0/Substance Dependency for (alcohol ICD 303.9 or list drug) as per DSM IV and you have been recommended for (type of treatment).

You will receive your treatment at \_\_\_\_\_ (name of facility), which begins on (DDMMYY) at \_\_\_\_\_ (time).

Until you begin treatment, you shall adhere to a pre-treatment plan, which will consist of the following (Dependency for alcohol is Mandatory /alcohol abusive if recommended by screening facility):

a. Abstaining from consuming alcohol. Any further use of alcohol until you complete treatment and your support plan will lead to further disciplinary action.

b. You will meet with your CDAR once a week at a time to be agreed on by both of you for monitoring and support

d. You must attend at least 2 Alcoholics Anonymous or MLC approved meetings each week; unit operations permitting.

e. You have been advised of the contents of Chapter 20, Personnel Manual, COMDTINST M1000.6 (series) regarding policy for (self-referral/Command referral/ alcohol incident/drug incident), expected conduct of Coast Guard personnel, and the continued care plans available for those who have problems with alcohol abuse or substance dependency.

#### Medical record:

Ensure or transcribe above information on a SF600. If transcribed place the following: Date "transcribed form official records." Signature/rate and duty station of transcriber. Send CDAR Follow up report and or treatment request.

CDAR referral and follow up report and Treatment request (if required)

5. No  
Recommend  
ations/  
Diagnosis.

(P&D)

Performance and Discipline

Section 20-B, Personnel Manual, COMDTINST M1000.6 (series), Chapter 2

Health Promotions 6200.1

Unit

(Date): On (DDMMYY) as a result of an alcohol incident you were evaluated by (Name) at (Name of facility) where it was determined that you do not meet the criteria for a diagnosis of alcohol abuse or substance dependence. You are scheduled to attend (BASICS/Prevent) on (date) at (place).

You have been advised of the contents of Chapter 20, Personnel Manual, COMDTINST M1000.6 (series) concerning the expected conduct of Coast Guard personnel.

**Medical record:**

Ensure or transcribe above information on a SF600. If transcribed place the following: Date "transcribed form official records." Signature/rate and duty station of transcriber. Send CDAR Follow up report and or treatment request.

CDAR referral and follow up report and Treatment request (if required)

**6. Refusal for  
Drug or Alcohol  
treatment:**

(P&D-24)

Performance and Discipline

Section 20-B, Personnel Manual, COMDTINST M1000.6 (series), Chapter 2  
Health Promotions 6200.1

Unit

(Date): On (DDMMYY) you were screened at (Name of facility) and determined to be (Alcohol dependent alcohol abuse or Drug dependent) as per DSM IV and recommended for (type of treatment).

You have indicated that you do not want to receive the treatment noted above.

By doing so you have waived all right to any future benefits under the Department of Veterans Affairs program for treatment of chemical dependency.

You will be processed for separation in accordance with Personnel Manual COMDTINST M1000.6 (series), chapter 20.

**Medical record:**

Ensure or transcribe above information on a SF600. If transcribed place the following: Date "transcribed form official records." Signature/rate and duty station of transcriber. Send CDAR Follow up report and or treatment request.

CDAR referral and follow up report and Treatment request (if required)

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**7. Continued Care**  
**Example: Abusive**

(P&D-25)

(Date): CONGRATULATIONS! On (DDMMYY) you successfully completed (type of treatment) program at (treatment facility) or alcohol abuse IDC 305.0.

As per chapter 2, Health Promotions Manual M6200.1 Your continued care program shall consist of, but not limited to:

- a. For a period of 90 days, you will abstain from consuming alcohol. This will allow you to incorporate all of the tools you were given to make POSITIVE changes in your life.
- b. For a period of 90 days, you will meet weekly with your command CDAR, at a time agreed upon by both of you, for the purpose of monitoring and supporting your recovery.

- c. For a period of 90 days, you will attend at least (2) Alcoholics Anonymous or any other MLC approved meetings per week.

Failure to comply with this aftercare plan or involvement in any alcohol incident may result in your separation from Coast Guard service in accordance with Chapter 20-B-2, Personnel Manual, COMDTINST M1000.6 (series). (Self-referral only: completion of this continued care program could lead to the removal of any Administrative Marks (SF-3307). A copy of the screening letter and treatment outline will remain in the medical record).

Medical record:

Ensure or transcribe above information on a SF600. If transcribed place the following: Date "transcribed form official records." Signature/rate and duty station of transcriber.

CDAR referral and follow up report and Treatment request (if required)

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**8. Continued  
care Example:  
Dependent**

(P&D-27)

(Date): On (DDMMYY) you successfully completed (type of treatment) program at (treatment facility). Congratulations on your accomplishment and your perseverance for personal recovery. This is been a major step in taking charge of your life.

The Continued Care plan is an important and mandatory segment of the treatment and recovery process. The support you will find in your aftercare program will go far in helping to ensure your success.

Your Continued Care plan shall consist of, but not limited to:

- a. Abstinence from alcohol indefinitely.
- b. Weekly meetings with the unit CDAR to monitor and support your recovery for 12 months.
- c. Attendance at a minimum (number specified in aftercare plan) Alcoholics Anonymous or any other MLC approved meetings per week for 12 months.
- d. Quarterly evaluation with CDAR, Command Officer or representative.

Failure to comply with this aftercare plan or involvement in any alcohol incident may result in your separation from Coast Guard service in accordance with Chapter 20-B-2, Personnel Manual, COMDTINST M1000.6 (series). (Self-referral only: Successful completion of this continued care program could lead to the removal of any Administrative Marks (SF-3307), regarding this self-referral. A copy of the screening letter and treatment outline will remain in the medical record.

Medical record:

Ensure or transcribe above information on a SF600. If transcribed place the following: Date "transcribed from official records." Signature/rate and duty station of transcriber.

CDAR referral and follow up report and Treatment request (if required)

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**9. Completion of Continued care: alcohol abusive or substance dependency**

P&D-23)

(Date): CONGRATULATIONS on successfully completing your (3 month) or (1 year) continued care plan as per Chapter 2, Health Promotions, COMDTINST M6200.1. I encourage you to continue to incorporate POSITIVE life-style changes into your daily routine and remember what you have learned.

(Abusive) If you return to a pattern of misuse of alcohol, take the first step and ask for help.

(Alcohol Dependency) you must abstain from alcohol indefinitely. You have been advised of the contents of Chapter 20, Personnel Manual, COMDTINST M1000.6 (series), concerning conduct expected of Coast Guard personnel.

(Abusive) Future alcohol misuse or incidents may lead to separation and shall be addressed by your command.

Dependency, a relapse or incident may lead to separation or re-instatement of a continued care program. (Self-referral only: You may now request removal of CG 3307 from both unit and HQ PDR. Command should submit letter to Commander (CGPC-epm) or (CGPC-opm), as appropriate, and (CGPC-adm-3). This diagnosis will remain. Screening and treatment records will remain in your Coast Guard health record.

Medical record:

Ensure or transcribe above information on a SF600. If transcribed place the following: Date "transcribed from official records." Signature/rate and duty station of transcriber.

CDAR referral and follow up report

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10. **Education** (P&D-)

**Example:**

Basics/Impact/  
education Course

Performance and Discipline

Section 20-B, Personnel Manual, COMDTINST M1000.6 (series), Chapter 2  
Health Promotions 6200.1

Unit

(Date): CONGRATULATIONS! On this date you have successfully completed (Basics/Impact/education) Training at (place), I encourage you to consider all that you have learned and take steps towards making POSITIVE changes in your life-style that will minimize your risk of further alcohol abuse. Your journey has already begun. If you return to a pattern of misuse of alcohol, take the first step and ask for help.

You have been advised of the contents of Chapter 20, Personnel Manual, COMDTINST M1000.6 (series) concerning the expected conduct of Coast Guard personnel.

Medical record:

Ensure or transcribe above information on a SF600. If transcribed place the following: Date “transcribed form official records.” Signature/rate and duty station of transcriber.

CDAR referral and follow up report

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**12. Relapse after completion of 1 year Aftercare program**

(Date): On (DDMMYY), you were referred to (Name of provider at screening facility) who determined that you have had a relapse of alcohol dependency. Your command is concerned due to the fact you completed treatment and a one-year aftercare program for Alcohol dependence on (Date). This is a violation of the terms of your previous completed aftercare program. In accordance with Chapter 20, Personnel Manual, COMDTINST M1000.6 (series), the following second continued care program is implemented for 6 months:

- a. Abstinence from alcohol indefinitely.
- b. Weekly meetings with the unit CDAR to monitor and support your recovery.
- c. Attendance at (2) Alcoholics Anonymous or any other approved support group meetings per week.

Failure to comply with this aftercare plan or involvement in any alcohol incident may result in your separation from Coast Guard service in accordance with Chapter 20-B-2, Personnel Manual, COMDTINST M1000.6 (series).

Medical record:

Ensure or transcribe above information on a SF600. If transcribed place the following: Date "transcribed from official records." Signature/rate and duty station of transcriber.

Alcohol Incident might be required.

CDAR referral and follow up report

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# USCG REHABILITATION TREATMENT REQUEST FORM

**FOR ATF / APR USE ONLY**      please print

**Reg#** \_\_\_\_\_ **Group No.** \_\_\_\_\_ **Tad** \_\_\_\_\_ **Temdu** \_\_\_\_\_  
**Admit Date** \_\_\_/\_\_\_/\_\_\_ **Completed** \_\_\_/\_\_\_/\_\_\_ **Unit PDR** \_\_\_ **Health Record** \_\_\_  
**Sked By** \_\_\_\_\_ **Date** \_\_\_/\_\_\_/\_\_\_ **Data Entered By** \_\_\_\_\_ **Date** \_\_\_/\_\_\_/\_\_\_  
APR will NOT confirm inpatient date unless this form shows XO signature & all data.  
Fax to MLC LANT (KMA) @ 757-628-4337 or MLC PAC (KMA) @ 510-437-5805 (ATTN: APR)

**Medical Diagnoses** \_\_\_\_\_  
**Treatment Requested**      **ALCOHOL**      **DRUG**      **OTHER** \_\_\_\_\_  
**Indicate Treatment Facility Location:** \_\_\_\_\_  
**Treatment Start Date** \_\_\_/\_\_\_/\_\_\_

<b>Name (LAST, FIRST, MI)</b>	<b>Rate/Rank</b>	<b>SVC BR.</b>	<b>Employee ID #</b>
_____	_____	_____	_____
<b>Unit address</b> _____		<b>OPFAC</b> _____ - _____	
_____		<b>CDAR</b> _____	
_____		<b>Command Ph.</b> ___-___-___	
_____		<b>FAX #</b> ___-___-___	
_____		<b>MLC #</b> _____	
<b>D.O.B.</b> ___/___/___		<b>Gender:</b> M / F <b>Ethnicity</b> _____	
<b>Education:</b> _____		<b>Education:</b> _____	
<b>Marital status</b> _____ <b>next of kin (name / relationship)</b> _____			
<b>Home phone:</b> ___-___-___ <b>address</b> _____ <b>zip</b> _____			
<b>EOAS Date</b> ___/___/___ <b>Religious preference</b> _____			

Does client have a valid driver's license    Yes / No  
 State \_\_\_\_\_ Restrictions? \_\_\_\_\_  
 Civilian / military legal action or medical appointments pending?    Yes / No  
 IF yes, Please explain  
 \_\_\_\_\_

**CO / OniC Name / Rank** \_\_\_\_\_ **Psych Hx?** \_\_\_\_\_  
**Date of CAAC Screening (if any):** \_\_\_/\_\_\_/\_\_\_ **Medical officer's evaluation:** \_\_\_/\_\_\_/\_\_\_  
**Date of HIV Test** \_\_\_/\_\_\_/\_\_\_  
**Note HIV test must be performed within 30 days of inpatient date (Navy facilities)**

**Approved by:**  
 Executive officer, \_\_\_\_\_ **Date** \_\_\_/\_\_\_/\_\_\_

**Approved by:**  
 MLCLANT / MLC PAC Alcohol Program Manager: \_\_\_\_\_ **Date** \_\_\_/\_\_\_/\_\_\_

# CDAR WORKSHEET

1. Reason for meeting with member?

Incident Command referral Self-referral Alcohol situation Drug Incident

2. Is this their first documented case? Look through member PDR and Medical record.

***If yes go to number 3. If no***

Reason for prior case\_\_\_\_\_

Date of last case\_\_\_\_\_

Was member screened\_\_\_\_\_

What was the diagnosis\_\_\_\_\_

Type of treatment/education did member receive\_\_\_\_\_

Was Treatment/education completed\_\_\_\_\_

Was treatment information found in medical record\_\_\_\_\_

Was any aftercare required\_\_\_\_\_

Did member complete the aftercare requirements\_\_\_\_\_

3. Meet with member and counsel on these issues

Reason for referral.

Go over policy

Screening requirements (fill out any forms needed).

Alcohol Incident

Gather facts

CG 3307 or Letter required

Special evaluation required see Personnel Manual M1000.6 (series) ch.10

DUI/DWI driving privileges suspended?\_\_\_\_\_

Is this solely underage drinking alcohol incident if yes see #15

Drug Incident: remember member must be aware of their right before being questioned.

4. Arrange screening

Contact medical clinic (PCM/PCP) or Tricare

Date/Time/place \_\_\_\_\_

5. Screening results

Date received \_\_\_\_\_

Diagnosis \_\_\_\_\_

Treatment/education required \_\_\_\_\_

Does member have more than 180 days active duty time if they were diagnosed?

If yes continue                      If no.

Process member of discharge.

Member is not eligible for TREATMENT

Set up or confirm dates for treatment/education \_\_\_\_\_

No diagnosis usually requires education

Alcohol abuse offer treatment

Substance dependence (alcohol/drug) offer treatment

Drug abuse or no diagnosis no treatment offered

Initial CDAR Referral and Follow up report. Fax to appropriate place.

Atlantic                      Pacific

Treatment request form (if required) faxed to appropriate MLC. If member is refusing treatment see #7

Place screening results in medical record.

Ensure a SF 600 has transcribe results and CC3307 or Letter has reason for screening, physician, facility, diagnosis and any pre-treatment program.

6. Pre treatment Plan:

No diagnosis none required

Alcohol abusive: only if screening facility recommended. If recommended see alcohol dependent

Alcohol Dependent: abstain from alcohol, weekly meeting with CDAR and 2 support group meeting weekly

7. Is member accepting treatment? Coordinate member's departure to treatment or education.

If yes: go to number 9                      If no go to number 8

8. Refusal of treatment

Member should be processed for separation

CG 3307 or Letter waiving VA entitlements for treatment should be

generated.

Ensure that this is documented in medical record on SF 600

Make sure this is documented on Initial CDAR referral and follow-up report.

9. Completion of formal treatment or education.

If yes:

Set up or help with any other referral required.

Go to # 10

If No

Member shall be processed for separation.

Document on CG 3307 or letter and Medical record

10. Aftercare required?

If no: Completion of education documented on CG 3307 or letter.

Ensure completion of treatment is transcribed on SF 600 in medical record

If self-referral see #14. Otherwise member has completed requirements

If yes:

Document completion of treatment on CG 3307 or letter to include date completed and aftercare requirements

Ensure completion of treatment is transcribed on SF 600 in medical record. This should include Treatment facility, date of completion recommended aftercare program and Aftercare program member is actually placed on. File Narrative Summary in medical record.

Then,

See # 11 for abusive requirements

See# 12 for Chemical dependent

CDAR Referral and Follow up report. Fax to appropriate place.

Atlantic

Pacific

11. Aftercare for abuse

1. Abstain for alcohol for 90 days

2. Weekly meeting with CDAR

3. At least 2 support group meeting weekly

Then go to #13

12. Aftercare for Dependence

1. Abstain from alcohol indefinitely
2. Weekly meeting with CDAR
3. At least 2 support group meeting weekly
4. Quarterly evals with CDAR and command rep and send CDAR referral and follow up report at 3, 6, 9 months, also document on SF 600 in medical record.

Then go to #13

13. Did member finish required aftercare?

If yes

If No

Document completion on CG 3307 or letter. Process member for discharge

Abusive member may return to drinking

Dependence must abstain indefinitely

Final CDAR referral and follow up report fax to appropriate MLC

Ensure SF 600 in medical record notes completion

Was the member Self-referral if yes see #14

14. Was this a Self –referral

If no: then you are done.

If yes: Member can now request removal of all 3307 from unit and HQ PDR.

Only information is left in the member's medial record and any diagnosis is withstanding.

For enlisted send request to Commander (CGPC-epm) and (CGPC-adm-3).

For officers request to Commander (CGPC-opm) and (CGPC-adm-3)

Suggest member request microfiche from (CGPC-adm-3) 30 days after reply from HQ to verify removal.

15. Member may request removal of CG3307 after 3 years if no other alcohol incidents are cited in that time. This must be completed up the chain of command.

Only information is left in the member's medial record and any diagnosis is withstanding.

For enlisted send request to Commander (CGPC-epm) and (CGPC-adm-3).

Suggest member request microfiche from (CGPC-adm-3) 30 days after reply from HQ to verify removal

