Effective Date:
Monday, November 04, 2013



New Tests and Test Updates

Modified Date: 09/09/2013

In our continuing effort to provide you with the highest quality toxicology laboratory services available, we have compiled important changes regarding a number of tests we perform. Listed below are the types of changes that may be included in this notification, effective Monday, November 04, 2013

New Tests - Tests recently added to the NMS Labs test menu. New Tests are effective immediately.

Test Changes - Tests that have had changes to the method/ CPT code, units of measurement, scope of analysis, reference comments, or specimen requirements.

Discontinued Tests - Tests being discontinued with alternate testing suggestions.

Please use this information to update your computer systems/records. These changes are important to ensure standardization of our mutual laboratory databases.

If you have any questions about the information contained in this notification, please call our Client Support Department at (866) 522-2206. Thank you for your continued support of NMS Labs and your assistance in implementing these changes.

The CPT Codes provided in this document are based on AMA guidelines and are for informational purposes only. NMS Labs does not assume responsibility for billing errors due to reliance on the CPT Codes listed in this document.



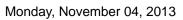
Test Code	Test Name	New Test	Test Name	Method / CPT Code	Specimen Req.	Stability	Scope	Units	Reference Comments	Discontinue
0110SP	1,25-Dihydroxyvitamin D, Serum/Plasma					•				
9105B	Acetyl Fentanyl Screen, Blood (Forensic)	•								
9105SP	Acetyl Fentanyl Screen, Serum/Plasma (Forensic)	•								
9105U	Acetyl Fentanyl Screen, Urine (Forensic)	•								
0205B	Acetyl Fentanyl, Blood	•								
0205SP	Acetyl Fentanyl, Serum/Plasma	•								
0205U	Acetyl Fentanyl, Urine	•								
0178B	Aldactazide Profile, Blood			•	•			•	•	
0178SP	Aldactazide Profile, Serum/Plasma			•	•			•	•	
0269SP	Aminocaproic Acid, Serum/Plasma			•	•	•			•	
0329ME	Amphetamines (D/L Ratio), Meconium									•
0273U	Aniline Exposure (Aminophenol, para-), Urine		•		•				•	
0505SP	Bedaquiline, Serum/Plasma	•								
1000B	Carboxy-, Met- and Sulf- Hemoglobin, Blood				•	•		•		
1040B	Cetirizine, Blood			•	•	•			•	
1040SP	Cetirizine, Serum/Plasma			•	•	•			•	
1040U	Cetirizine, Urine			•	•	•			•	
9134B	Chlorpheniramine Screen, Blood									•
9134SP	Chlorpheniramine Screen, Serum/Plasma									•
9134TI	Chlorpheniramine Screen, Tissue									•
9134U	Chlorpheniramine Screen, Urine									•
1190B	Chlorpheniramine, Blood			•	•	•			•	
1190SP	Chlorpheniramine, Serum/Plasma			•	•	•			•	
1190TI	Chlorpheniramine, Tissue			•					•	
1190U	Chlorpheniramine, Urine			•	•	•			•	
1342B	Coricidin®, Blood			•	•	•			•	
1342SP	Coricidin®, Serum/Plasma			•	•	•			•	
1342U	Coricidin®, Urine			•	•	•			•	
9157B	Diphenhydramine Screen, Blood									•
9157SP	Diphenhydramine Screen, Serum/Plasma									•



Test Code	Test Name	New Test	Test Name	Method / CPT Code	Specimen Req.	Stability	Scope	Units	Reference Comments	Discontinue
9157U	Diphenhydramine Screen, Urine									•
1760B	Diphenhydramine, Blood			•	•	•			•	
1760FL	Diphenhydramine, Fluid			•	•				•	
1760SP	Diphenhydramine, Serum/Plasma			•	•	•			•	
1760TI	Diphenhydramine, Tissue			•					•	
1760U	Diphenhydramine, Urine			•	•	•			•	
54127B	Drug Impaired Driving/DRE Toxicology Topiramate Confirmation, Blood (Forensic)			•	•	•		•	•	
54127SP	(Forensic)			•	•	•		•	•	
54127U	Drug Impaired Driving/DRE Toxicology Topiramate Confirmation, Urine (Forensic)			•		•		•	•	
6901ME	Drugs of Abuse Screen (1 Panel), Meconium									•
6903ME	Drugs of Abuse Screen (4 Panel), Meconium									•
8103B	Environmental Exposure Screen, Blood (Forensic)				•			•		
1970R	Ethchlorvynol, RBCs									•
2073B	Fexofenadine, Blood			•	•	•			•	
2073SP	Fexofenadine, Serum/Plasma			•	•	•			•	
2365B	Hydroxyzine and Metabolite, Blood		•	•	•	•	•		•	
2365FL	Hydroxyzine and Metabolite, Fluid		•	•	•		•			
2365SP	Hydroxyzine and Metabolite, Serum/Plasma		•	•	•	•	•		•	
2365U	Hydroxyzine and Metabolite, Urine		•	•	•	•	•		•	
2517B	Levocetirizine, Blood			•	•	•			•	
2517SP	Levocetirizine, Serum/Plasma			•	•	•			•	
2517U	Levocetirizine, Urine			•	•	•			•	
2887B	Methemoglobin, Blood				•			•		
2887R	Methemoglobin, RBCs				•			•		
3070U	N,N-Dimethylformamide (DMF) Exposure (N- Monomethylformamide), Urine				•				•	
3111B	Naloxone - Free (Unconjugated), Blood	•								



Test Code	Test Name	New Test	Test Name	Method / CPT Code	Specimen Req.	Stability	Scope	Units	Reference Comments	Discontinue
3111SP	Naloxone - Free (Unconjugated), Serum/Plasma	•								
3111U	Naloxone - Total (Conjugated/Unconjugated), Urine	•								
3185B	Nitrobenzene Exposure Monitoring, Blood				•			•		
8104B	Postmortem Toxicology - Fire Death Screen, Blood (Forensic)				•			•		
4177B	Postmortem Toxicology - SIDS Screen, Blood (Forensic)							•		
4187B	Postmortem Toxicology - SIDS Screen, Blood (Forensic)							•		
3990ME	Propoxyphene and Metabolite (Qualitative), Meconium									•
8088B	Qsymia®, Blood	•								
8088SP	Qsymia®, Serum/Plasma	•								
4125B	Rufinamide, Blood	•								
4125SP	Rufinamide, Serum/Plasma			•	•	•		•	•	
4235B	Sulfhemoglobin, Blood					•		•		
4235R	Sulfhemoglobin, RBCs				•			•		
52127B	Topiramate Confirmation, Blood (Forensic)			•	•	•		•	•	
53127B	Topiramate Confirmation, Blood (Forensic)			•	•	•		•	•	
52127SP	Topiramate Confirmation, Serum/Plasma (Forensic)			•	•	•		•	•	
53127SP	Topiramate Confirmation, Serum/Plasma (Forensic)			•	•	•		•	•	
52127U	Topiramate Confirmation, Urine (Forensic)			•		•		•	•	
53127U	Topiramate Confirmation, Urine (Forensic)			•		•		•	•	
4519B	Topiramate, Blood			•	•	•		•	•	
4519FL	Topiramate, Fluid	•								
4519SP	Topiramate, Serum/Plasma			•	•	•		•	•	
4519TI	Topiramate, Tissue	•								
4519U	Topiramate, Urine			•				•	•	
4774SP	Vigabatrin, Serum/Plasma			•		•				





New Tests

9105B Acetyl Fentanyl Screen, Blood (Forensic)

Effective Immediately

Scope of Analysis: Acetyl Fentanyl [LC/TOF-MS]

Method(s): High Performance Liquid Chromatography/Time of Flight-Mass Spectrometry (LC/TOF-MS)

Purpose: Forensic Analysis; This test is New York State approved

Category: Synthetic Opioid

Specimen Requirements: 3 mL Blood

Minimum Volume: 1.4 mL Special Handling: None

Specimen Container: Lavender top tube (EDTA)

Transport Temperature: Refrigerated

Light Protection: Not Required

Rejection Criteria: None

Stability: Room Temperature: 14 day(s)

Refrigerated: 14 day(s) Frozen (-20 °C): 14 day(s)

Method: High Performance Liquid Chromatography/Time of Flight-Mass

Spectrometry (LC/TOF-MS)

Set-Up Days / TAT: Monday-Friday 4 days (after set-up)

CPT Code: 80100

Compound Name / Alias Units RL Reference Comment

Acetyl Fentanyl ng/mL 0

Acetyl fentanyl is a novel non-prescription synthetic opioid that has been implicated in several deaths. This fentanyl analog was previously undocumented in illicit drug use and is estimated to be five times more potent than heroin. Several state agencies have issued public health warnings. The Centers for Disease Control (CDC) has recommended increased vigilance by public health agencies, emergency departments, state laboratories, medical examiners, and coroners for patients with symptoms consistent with opioid overdose. It is also recommended that if a fentanyl immunoassay (e.g., ELISA) produces a positive result additional confirmation testing be performed and that this testing should include fentanyl and its analogs, including acetyl fentanyl.

9105SP Acetyl Fentanyl Screen, Serum/Plasma (Forensic)

Effective Immediately

Scope of Analysis: Acetyl Fentanyl [LC/TOF-MS]

Method(s): High Performance Liquid Chromatography/Time of Flight-Mass Spectrometry (LC/TOF-MS)

Purpose: Forensic Analysis; This test is New York State approved.

Category: Synthetic Opioid

Specimen Requirements: 3 mL Serum or Plasma

Minimum Volume: 1.4 mL

Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial using approved

quidelines.

Specimen Container: Plastic container (preservative-free)

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New Tests

Acetyl Fentanyl

Transport Temperature: Refrigerated Light Protection: Not Required

> Polymer gel separation tube (SST or PST). Rejection Criteria:

> > Room Temperature: 14 day(s) Stability: Refrigerated: 14 day(s) Frozen (-20 °C): 14 day(s)

Method: High Performance Liquid Chromatography/Time of Flight-Mass

ng/mL

Spectrometry (LC/TOF-MS)

Set-Up Days / TAT: Monday-Friday 4 days (after set-up)

> 80100 CPT Code:

Compound Name / Alias

Units RL **Reference Comment**

0.5

Acetyl fentanyl is a novel non-prescription synthetic opioid that has been implicated in several deaths. This fentanyl analog was previously undocumented in illicit drug use and is estimated to be five times more potent than heroin. Several state agencies have issued public health warnings. The Centers for Disease Control (CDC) has recommended increased vigilance by public health agencies, emergency departments, state laboratories, medical examiners, and coroners for patients with symptoms consistent with opioid overdose. It is also recommended that if a fentanyl immunoassay (e.g., ELISA) produces a positive result additional confirmation testing be performed and that this testing should include fentanyl

and its analogs, including acetyl fentanyl.

9105U **Acetyl Fentanyl Screen, Urine (Forensic)**

Effective Immediately

Acetyl Fentanyl [LC/TOF-MS] Scope of Analysis:

High Performance Liquid Chromatography/Time of Flight-Mass Spectrometry (LC/TOF-MS) Method(s):

Purpose: Forensic Analysis; This test is New York State approved.

Synthetic Opioid Category:

Specimen Requirements: 2 mL Urine Minimum Volume: 0.55 mL Special Handling:

Plastic container (preservative-free) Specimen Container:

Transport Temperature: Refrigerated

> Light Protection: Not Required

Rejection Criteria: None

> Room Temperature: 14 day(s) Stability:

Refrigerated: 14 day(s) Frozen (-20 °C): 14 day(s)

Method: High Performance Liquid Chromatography/Time of Flight-Mass

Spectrometry (LC/TOF-MS)

Monday-Friday 4 days (after set-up) Set-Up Days / TAT:

> 80100 CPT Code:

RL **Compound Name / Alias** Units Acetyl Fentanyl ng/mL

5.0

Acetyl fentanyl is a novel non-prescription synthetic opioid that has been implicated in several deaths. This fentanyl analog was previously undocumented in illicit drug use and is estimated to be five times more potent than heroin. Several state agencies have issued public health warnings. The Centers for Disease Control (CDC) has recommended increased vigilance by public health agencies, emergency departments, state laboratories, medical examiners, and coroners for patients with symptoms consistent with opioid overdose. It is also recommended that if a fentanyl immunoassay (e.g., ELISA) produces a positive result additional confirmation testing be performed and that this testing should include fentanyl and its analogs, including acetyl fentanyl.

Reference Comment





New Tests

0205B Acetyl Fentanyl, Blood

Effective Immediately

Effective Immediately

Scope of Analysis: Acetyl Fentanyl [LC-MS/MS]

> High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) Method(s):

Identification and Quantitation, This test is New York State approved. Purpose:

Synthetic Opioid Category:

2 mL Blood Specimen Requirements:

Minimum Volume: 0.7 mL Special Handling: None

Specimen Container: Lavender top tube (EDTA)

Transport Temperature: Refrigerated

> Light Protection: Not Required

Rejection Criteria: None

> Room Temperature: 14 day(s) Stability:

Refrigerated: 14 day(s) Frozen (-20 °C): 14 day(s)

High Performance Liquid Chromatography/Tandem Mass Spectrometry Method:

(LC-MS/MS)

Set-Up Days / TAT: Tuesday 3 days (after set-up)

> CPT Code: 83925

Compound Name / Alias Units RL **Reference Comment** Acetyl Fentanyl ng/mL Acetyl fentanyl is a novel non-prescription

synthetic opioid that has been implicated in several deaths. This fentanyl analog was previously undocumented in illicit drug use and is estimated to be five times more potent than heroin. Several state agencies have issued public health warnings. The Centers for Disease Control (CDC) has recommended increased vigilance by public health agencies, emergency departments, state laboratories, medical

examiners, and coroners for patients with symptoms consistent with opioid overdose. It is also recommended that if a fentanyl immunoassay (e.g., ELISA) produces a positive result additional confirmation testing be performed and that this testing should include fentanyl

and its analogs, including acetyl fentanyl.

0205SP Acetyl Fentanyl, Serum/Plasma

> Method(s): High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS)

Identification and Quantitation, This test is New York State approved. Purpose:

Category: Synthetic Opioid

Specimen Requirements: 2 mL Serum or Plasma

Minimum Volume:

Scope of Analysis:

Serum: Collect sample in Red top tube Special Handling:

Acetyl Fentanyl [LC-MS/MS]

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial using approved

auidelines.

Specimen Container: Plastic container (preservative-free)

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New Tests

Transport Temperature: Refrigerated Light Protection: Not Required

> Polymer gel separation tube (SST or PST). Rejection Criteria:

> > Room Temperature: 14 day(s) Stability: Refrigerated: 14 day(s) Frozen (-20 °C): 14 day(s)

Method: High Performance Liquid Chromatography/Tandem Mass Spectrometry

RL

0.1

(LC-MS/MS)

Set-Up Days / TAT: Tuesday 3 days (after set-up)

> 83925 CPT Code:

Compound Name / Alias

Units Acetyl Fentanyl ng/mL

Reference Comment

Acetyl fentanyl is a novel non-prescription synthetic opioid that has been implicated in several deaths. This fentanyl analog was previously undocumented in illicit drug use and is estimated to be five times more potent than heroin. Several state agencies have issued public health warnings. The Centers for Disease Control (CDC) has recommended increased vigilance by public health agencies, emergency departments, state laboratories, medical examiners, and coroners for patients with symptoms consistent with opioid overdose. It is also recommended that if a fentanyl immunoassay (e.g., ELISA) produces a positive result additional confirmation testing be performed and that this testing should include fentanyl and its analogs, including acetyl fentanyl.

0205U Acetyl Fentanyl, Urine **Effective Immediately**

Acetyl Fentanyl [LC-MS/MS] Scope of Analysis:

> High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) Method(s):

Purpose: Identification and Quantitation, This test is New York State approved.

Synthetic Opioid Category:

Specimen Requirements: 1 mL Urine Minimum Volume: 0.3 mL

Special Handling:

Plastic container (preservative-free) Specimen Container:

Transport Temperature: Refrigerated Light Protection: Not Required

> Rejection Criteria: None

> > Room Temperature: 14 day(s) Stability:

Refrigerated: 14 day(s) Frozen (-20 °C): 14 day(s)

Method: High Performance Liquid Chromatography/Tandem Mass Spectrometry

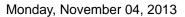
(LC-MS/MS)

Set-Up Days / TAT: Tuesday 3 days (after set-up)

> CPT Code: 83925

RL **Compound Name / Alias** Units Acetyl Fentanyl ng/mL 0.5 **Reference Comment**

Acetyl fentanyl is a novel non-prescription synthetic opioid that has been implicated in several deaths. This fentanyl analog was previously undocumented in illicit drug use and is estimated to be five times more potent than heroin. Several state agencies have issued public health warnings. The Centers for Disease Control (CDC) has recommended increased vigilance by public health agencies, emergency departments, state laboratories, medical examiners, and coroners for patients with symptoms consistent with opioid overdose. It is also recommended that if a fentanyl immunoassay (e.g., ELISA) produces a positive result additional confirmation testing be performed and that this testing should include fentanyl and its analogs, including acetyl fentanyl.





New Tests

0505SP Bedaquiline, Serum/Plasma

Effective Immediately

Scope of Analysis: Bedaquiline [LC-MS/MS]

Method(s): High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS)

Purpose: Therapeutic Drug Monitoring; This test is New York State approved.

Category: Antimicrobial

Specimen Requirements: 2 mL Serum or Plasma

Minimum Volume: 0.7 mL

Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial using approved

guidelines.

Specimen Container: Plastic container (preservative-free)

Transport Temperature: Refrigerated
Light Protection: Not Required

Rejection Criteria: Polymer gel separation tube (SST or PST).

Stability: Room Temperature: 7 day(s) Refrigerated: 14 day(s) Frozen (-20 °C): 30 day(s)

Method: High Performance Liquid Chromatography/Tandem Mass Spectrometry

(LC-MS/MS)

Set-Up Days / TAT: Tuesday 3 days (after set-up)

CPT Code: 83789

Compound Name / Alias	Units	RL	Reference Comment	
Bedaquiline	ng/mL	25	In one study the steady state average concentration for	
Sirturo			bedaquiline was 1371 ng/mL after two weeks of therapy	
			and was 584 ng/mL after 24 weeks of therapy at the	
			recommended dosing regimen.	

3111B Naloxone - Free (Unconjugated), Blood

Effective Immediately

Scope of Analysis: Naloxone - Free [LC-MS/MS]

Method(s): High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS)

Purpose: Therapeutic Drug Monitoring, This test is New York State approved.

Category: Narcotic Analgesic

Specimen Requirements: 1 mL Blood Minimum Volume: 0.45 mL Special Handling: None

Specimen Container: Lavender top tube (EDTA)

Transport Temperature: Refrigerated
Light Protection: Not Required

Rejection Criteria: None

Stability: Room Temperature: 7 day(s) Refrigerated: 10 day(s) Frozen (-20 °C): 1 month(s)

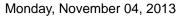
Method: High Performance Liquid Chromatography/Tandem Mass Spectrometry

(LC-MS/MS)

Set-Up Days / TAT: Monday Wednesday Friday 3 days (after set-up)

CPT Code: 83925

Compound Name / Alias	Units	RL	Reference Comment
Naloxone - Free	ng/mL	1.0	Reported serum concentration at 2 minutes following a
Narcan®	_		0.4 mg I.V. dose: Approximately 10 ng/mL.





New Tests

3111SP Naloxone - Free (Unconjugated), Serum/Plasma

Effective Immediately

Scope of Analysis: Naloxone - Free [LC-MS/MS]

Method(s): High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS)

Purpose: Therapeutic Drug Monitoring, This test is New York State approved.

Category: Narcotic Analgesic
Specimen Requirements: 2 mL Serum or Plasma

Minimum Volume: 0.7 mL

Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial using approved

juidelines

Specimen Container: Plastic container (preservative-free)

Transport Temperature: Refrigerated
Light Protection: Not Required

Rejection Criteria: Polymer gel separation tube (SST or PST).

Stability: Room Temperature: 7 day(s) Refrigerated: 10 day(s)

Refrigerated: 10 day(s) Frozen (-20 °C): 1 month(s)

Method: High Performance Liquid Chromatography/Tandem Mass Spectrometry

(LC-MS/MS)

Set-Up Days / TAT: Monday Wednesday Friday 3 days (after set-up)

CPT Code: 83925

Compound Name / Alias	Units	RL	Reference Comment
Naloxone - Free	ng/mL	0.5	Reported serum concentration at 2 minutes following a
Narcan®			0.4 mg I.V. dose: Approximately 10 ng/mL.

3111U Naloxone - Total (Conjugated/Unconjugated), Urine

Effective Immediately

Scope of Analysis: Naloxone - Total [LC-MS/MS]

Method(s): High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS)

Purpose: Therapeutic Drug Monitoring, This test is New York State approved.

Category: Narcotic Analgesic

Specimen Requirements: 1 mL Urine

Minimum Volume: 0.3 mL

Special Handling: None

Specimen Container: Plastic container (preservative-free)

Transport Temperature: Refrigerated
Light Protection: Not Required
Rejection Criteria: None

Stability: Room Temperature: 7 day(s)

Refrigerated: 10 day(s) Frozen (-20 °C): 1 month(s)

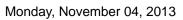
Method: High Performance Liquid Chromatography/Tandem Mass Spectrometry

(LC-MS/MS)

Set-Up Days / TAT: Tuesday Thursday 2nd Shift 4 days (after set-up)

CPT Code: 83925

Compound Name / Alias	Units	RL	Reference Comment	
Naloxone - Total	ng/mL	5.0	No reference data available.	_
Narcan®	_			





New Tests

8088B Qsymia®, Blood Effective Immediately

Scope of Analysis: Phentermine [LC-MS/MS]; Topiramate [LC-MS/MS]

Method(s): High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS)

Purpose: Therapeutic Drug Monitoring; This test is New York State approved

Category: Appetite Suppressant, Antiepileptic, Anticonvulsant

Specimen Requirements: 2 mL Blood Minimum Volume: 0.62 mL Special Handling: None

Specimen Container: Lavender top tube (EDTA)

Transport Temperature: Refrigerated
Light Protection: Not Required
Rejection Criteria: None

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 1 month(s)

Method: High Performance Liquid Chromatography/Tandem Mass Spectrometry

(LC-MS/MS)

Set-Up Days / TAT: Monday-Friday 2nd Shift 3 days (after set-up)

CPT Code: 83789

 Compound Name / Alias
 Units
 RL
 Reference Comment

 Phentermine
 ng/mL
 10
 Peak plasma concentrations were 49 ng/mL phentermine following a single oral dose of Qsymia® (15 mg phentermine IR/92 mg topiramate CR). The blood to plasma ratio for phentermine is not known.

Method: High Performance Liquid Chromatography/Tandem Mass Spectrometry

(LC-MS/MS)

Set-Up Days / TAT: Monday Wednesday Friday 2nd Shift 3 days (after set-up)

CPT Code: 83789

Compound Name / Alias	Units	RL	Reference Comment
Topiramate	ng/mL	200	Peak plasma concentrations were 1020 ng/mL
			topiramate following a single oral dose of
			Qsymia® (15 mg phentermine IR/92 mg topiramate CR).
			The blood to plasma ratio for topiramate varies
			depending on the concentration, but is typically
			greater than 2.

8088SP Qsymia®, Serum/Plasma

Effective Immediately

Scope of Analysis: Phentermine [LC-MS/MS]; Topiramate [LC-MS/MS]

Method(s): High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS)

Purpose: Therapeutic Drug Monitoring; This test is New York State approved

Category: Appetite Suppressant, Antiepileptic, Anticonvulsant

Specimen Requirements: 2 mL Serum or Plasma

Minimum Volume: 0.62 mL

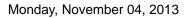
Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial using approved

guidelines.

Specimen Container: Plastic container (preservative-free)





New Tests

Transport Temperature: Refrigerated

Light Protection: Not Required

Rejection Criteria: Polymer gel separation tube (SST or PST).

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 1 month(s)

Method: High Performance Liquid Chromatography/Tandem Mass Spectrometry

(LC-MS/MS)

Set-Up Days / TAT: Monday-Friday 2nd Shift 3 days (after set-up)

CPT Code: 83789

Compound Name / Alias

Units
RL
Reference Comment

Phentermine

ng/mL
10
Peak plasma concentrations were 49 ng/mL
phentermine following a single oral dose of
Qsymia® (15 mg phentermine IR/92 mg topiramate CR).

Method: High Performance Liquid Chromatography/Tandem Mass Spectrometry

(LC-MS/MS)

Set-Up Days / TAT: Monday Wednesday Friday 2nd Shift 3 days (after set-up)

CPT Code: 83789

Topiramate

Topira

Qsymia® (15 mg phentermine IR/92 mg topiramate CR).

Effective Immediately

4125B Rufinamide, Blood

Scope of Analysis: Rufinamide [LC-MS/MS]

Method(s): High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS)

Purpose: Therapeutic Drug Monitoring; This test is New York State approved.

Category: Antiepileptic, Anticonvulsant

Specimen Requirements: 1 mL Blood
Minimum Volume: 0.4 mL
Special Handling: None

Specimen Container: Lavender top tube (EDTA)

Transport Temperature: Refrigerated
Light Protection: Not Required

Rejection Criteria: None

Stability: Room Temperature: 1 month(s) Refrigerated: 1 month(s)

Frozen (-20 °C): 6 month(s)

Method: High Performance Liquid Chromatography/Tandem Mass Spectrometry

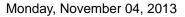
(LC-MS/MS)

Set-Up Days / TAT: Monday Wednesday Friday 2nd Shift 3 days (after set-up)

CPT Code: 83789

 Compound Name / Alias
 Units
 RL
 Reference Comment

 Rufinamide Banzel®
 ng/mL
 500
 Maintenance therapy with 45 mg/kg (approximately 1600 mg) daily rufinamide resulted in plasma concentrations ranging from 5000 - 48000 ng/mL (n = 74). The blood to plasma ratio of rufinamide is approximately 1.





New Tests

4519FL Topiramate, Fluid Effective Immediately

Scope of Analysis: Topiramate [LC-MS/MS]

Method(s): High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS)

Purpose: Therapeutic Drug Monitoring; This test is New York State approved.

Category: Antiepileptic, Anticonvulsant

Specimen Requirements: 1 mL Fluid
Minimum Volume: 0.22 mL
Special Handling: None

Specimen Container: Polycarbonate Plastic container

Transport Temperature: Refrigerated
Light Protection: Not Required
Rejection Criteria: None

Stability: Room Temperature: Undetermined

Refrigerated: Undetermined Frozen (-20 °C): Undetermined

Method: High Performance Liquid Chromatography/Tandem Mass Spectrometry

(LC-MS/MS)

Set-Up Days / TAT: Monday Wednesday Friday 2nd Shift 3 days (after set-up)

CPT Code: 83789

 Compound Name / Alias
 Units
 RL
 Reference Comment

 Topiramate Topamax®
 ng/mL
 200
 No reference data available.

4519TI Topiramate, Tissue

Effective Immediately

Scope of Analysis: Topiramate [LC-MS/MS]

Method(s): High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS)

Purpose: Therapeutic Drug Monitoring; This test is New York State approved.

Category: Anticonvulsant, Antiepileptic

Specimen Requirements: 10 g Tissue Minimum Volume: 10 g

Special Handling: None

Specimen Container: Plastic container (preservative-free)

Transport Temperature: Refrigerated
Light Protection: Not Required
Rejection Criteria: None

Stability: Room Temperature: Undetermined

Refrigerated: Undetermined Frozen (-20 °C): Undetermined

Method: High Performance Liquid Chromatography/Tandem Mass Spectrometry

(LC-MS/MS)

Set-Up Days / TAT: Monday Wednesday Friday 2nd Shift 3 days (after set-up)

CPT Code: 83789

 Compound Name / Alias
 Units
 RL
 Reference Comment

 Topiramate Topamax®
 ng/g
 100
 No reference data available.



Monday, November 04, 2013 New Tests and Test Updates

Test Changes

0110SP 1,25-Dihydroxyvitamin D, Serum/Plasma

Summary of Changes: Stability was changed.

Stability: Room Temperature: 28 day(s)

Refrigerated: 28 day(s) Frozen (-20 °C): 6 month(s)

0178B Aldactazide Profile, Blood

Summary of Changes: Specimen Requirements were changed.

Reference Comment was changed.

Units were changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 5 mL Blood
Transport Temperature: Refrigerated

Specimen Container: Lavender top tube (EDTA)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Scope of Analysis: SF (80299): Canrenone

Method (CPT Code) LC-MS/MS (83789): Hydrochlorothiazide

Compound Name	Units	Reference Comment
Hydrochlorothiazide	ng/mL	Daily administration of oral hydrochlorothiazide produced the following plasma concentrations in hypertensive patients:
		25 mg = 17 +/-8 ng/mL trough and 76 +/- 26 ng/mL 5 hours post dose
		75 mg = $34 + - 17$ ng/mL trough and 200 + $- 93$ ng/mL 5 hours post dose.
		The blood to plasma ratio for hydrochlorothiazide is approximately 2.

0178SP Aldactazide Profile, Serum/Plasma

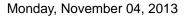
Summary of Changes: Specimen Requirements were changed.

Specimen Requirements (Special Handling) were changed.

Reference Comment was changed.

Units were changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]





Test Changes

Specimen Requirements: 3 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Lavender top tube (EDTA), Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial

using approved guidelines.

Rejection Criteria: Polymer gel separation tube (SST or PST).

Scope of Analysis: SF (80299): Canrenone

Method (CPT Code) LC-MS/MS (83789): Hydrochlorothiazide

Compound Name	Units	Reference Comment
Hydrochlorothiazide	ng/mL	Daily administration of oral hydrochlorothiazide produced the following plasma concentrations in hypertensive patients:
		25 mg = 17 + /-8 ng/mL trough and $76 + /-26 \text{ ng/mL } 5 \text{ hours post dose}$
		75 mg = 34 +/- 17 ng/mL trough and 200 +/- 93 ng/mL 5 hours post dose.

0269SP Aminocaproic Acid, Serum/Plasma

Summary of Changes: Specimen Requirements were changed.

Specimen Requirements (Specimen Container) were changed. Specimen Requirements (Special Handling) were changed.

Stability was changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 2 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

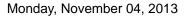
Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial

using approved guidelines.

Rejection Criteria: Polymer gel separation tube (SST or PST).

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s)
Frozen (-20 °C): 1 month(s)





Test Changes

Scope of Analysis: LC-MS/MS (83789): Aminocaproic Acid

Method (CPT Code)

Compound Name	Units	Reference Comment
Aminocaproic Acid	mcg/mL	The minimum effective plasma concentration of aminocaproic acid is 130 mcg/mL. Dosing strategies have been determined to maintain plasma aminocaproic acid levels in adults and children due to clearance increasing with age and weight. After a single dose of 5 grams, the mean peak plasma concentration is 164 mcg/mL (range, 136-192 mcg/mL). However, plasma concentrations display large variability; in a study of patients undergoing surgery, concentrations varied from 84-998 mcg/mL at different time points after IV administration of aminocaproic acid.

0273U Aniline Exposure (Aminophenol, para-), Urine

Summary of Changes: Test Name was changed.

Specimen Requirements were changed.

Specimen Requirements (Special Handling) were changed.

Reference Comment was changed.

Creatinine was removed.

Specimen Requirements: 3 mL Urine Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: Collect sample at end of shift.

Rejection Criteria: None

Scope of Analysis: SP (84311): p-Aminophenol

Method (CPT Code)

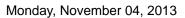
Compound Name	Units	Reference Comment
p-Aminophenol	mg/L	Biological Exposure Index (ACGIH):
	_	Following workplace exposure to Aniline:
		50 mg/L measured in a urine specimen collected
		at end of shift.

1000B Carboxy-, Met- and Sulf-Hemoglobin, Blood

Summary of Changes: Specimen Requirements (Special Handling) were changed.

Specimen Requirements (Rejection Criteria) were changed.

Stability was changed. Units were changed.





Test Changes

Specimen Requirements: 5 mL Blood
Transport Temperature: Refrigerated

Specimen Container: Lavender top tube (EDTA)

Light Protection: Not Required

Special Handling: Collect sample at end of shift.

The validity of the methemoglobin result will be compromised if the analysis is not

performed within FOUR hours of sample collection.

Rejection Criteria: None

Scope of Analysis:

Stability: Room Temperature: Undetermined

Refrigerated: Undetermined Frozen (-20 °C): Undetermined SP (80101): Carboxyhemoglobin

Method (CPT Code) SP (82375): Methemoglobin, Sulfhemoglobin

Compound NameUnitsReference CommentMethemoglobin%SaturationNormal: Up to 2 percent.
Clinically significant: 10 percent and greater.
Methemoglobin will begin increasing several hours
following collection of a blood specimen and may
increase to extremely elevated values in decomposed
specimens.

Normal: Up to 2 %.

1040B Cetirizine, Blood

Sulfhemoglobin

Summary of Changes: Specimen Requirements were changed.

Specimen Requirements (Transport Temperature) were changed. Specimen Requirements (Specimen Container) were changed. Specimen Requirements (Rejection Criteria) were changed.

Stability was changed.

Reference Comment was changed.

%Saturation

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Blood
Transport Temperature: Refrigerated

Specimen Container: Gray top tube (Sodium Fluoride / Potassium Oxalate)

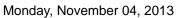
Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789): Cetirizine / Levocetirizine





Test Changes

Compound Name	Units	Reference Comment
Cetirizine / Levocetirizine	ng/mL	The following mean peak serum or plasma concentrations of cetirizine have been reported: 5 mg oral dose: 170 ng/mL at 0.6 hours 10 mg oral dose: 400 ng/mL at 2.1 hours 20 mg oral dose: 780 ng/mL at 1.1 hours
		The whole blood to serum or plasma ratio is not known for cetirizine. The whole blood to serum or plasma ratio for levocetirizine has been reported as 0.6 to 0.7. This test is not chiral specific.

1040SP Cetirizine, Serum/Plasma

Summary of Changes: Specimen Requirements were changed.

Specimen Requirements (Transport Temperature) were changed. Specimen Requirements (Specimen Container) were changed. Specimen Requirements (Special Handling) were changed. Specimen Requirements (Rejection Criteria) were changed.

Stability was changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial

using approved guidelines.

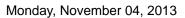
Rejection Criteria: Polymer gel separation tube (SST or PST).

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789): Cetirizine / Levocetirizine

Compound Name	Units	Reference Comment
Cetirizine / Levocetirizine	ng/mL	The following mean peak serum or plasma concentrations of cetirizine have been reported: 5 mg oral dose: 170 ng/mL at 0.6 hours 10 mg oral dose: 400 ng/mL at 2.1 hours 20 mg oral dose: 780 ng/mL at 1.1 hours
		This test is not chiral specific.





Test Changes

1040U Cetirizine, Urine

Summary of Changes: Specimen Requirements were changed.

Specimen Requirements (Transport Temperature) were changed. Specimen Requirements (Rejection Criteria) were changed.

Stability was changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Urine
Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789): Cetirizine / Levocetirizine

Method (CPT Code)

Compound Name	Units	Reference Comment
Cetirizine / Levocetirizine	ng/mL	No reference data available.
		This test is not chiral specific.

1190B Chlorpheniramine, Blood

Summary of Changes: Specimen Requirements were changed.

Specimen Requirements (Specimen Container) were changed.

Stability was changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Blood
Transport Temperature: Refrigerated

Specimen Container: Gray top tube (Sodium Fluoride / Potassium Oxalate)

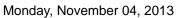
Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789): Chlorpheniramine





Test Changes

Compound Name	Units	Reference Comment
Chlorpheniramine	ng/mL	Peak concentrations of 10 ng/mL chlorpheniramine were obtained 3 hours following single oral administration of 8 mg. Toxic effects have been reported in adults at concentrations greater than 400 ng/mL in serum. The blood to plasma ratio of chlorpheniramine is approximately 1.2.

1190SP Chlorpheniramine, Serum/Plasma

Summary of Changes: Specimen Requirements were changed.

Specimen Requirements (Specimen Container) were changed. Specimen Requirements (Special Handling) were changed.

Stability was changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial

using approved guidelines.

Rejection Criteria: Polymer gel separation tube (SST or PST).

> Room Temperature: 1 month(s) Stability: Refrigerated: 1 month(s)

> > Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789): Chlorpheniramine

Method (CPT Code)

Compound Name	Units	Reference Comment
Chlorpheniramine	ng/mL	Peak concentrations of 10 ng/mL chlorpheniramine were obtained 3 hours following single oral administration of 8 mg. Toxic effects have been reported in adults at concentrations greater than 400 ng/mL in serum.

1190TI Chlorpheniramine, Tissue

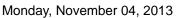
Reference Comment was changed. Summary of Changes:

Methods/CPT Codes were changed [LC-MS/MS (83789, 80103)]

Scope of Analysis:

Method (CPT Code)

LC-MS/MS (83789, 80103): Chlorpheniramine





Test Changes

Compound Name	Units	Reference Comment
Chlorpheniramine	ng/g	No reference data available.

1190U Chlorpheniramine, Urine

Summary of Changes: Specimen Requirements were changed.

Specimen Requirements (Specimen Container) were changed.

Stability was changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Urine
Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789): Chlorpheniramine

Method (CPT Code)

Compound Name	Units	Reference Comment
Chlorpheniramine	ng/mL	During chronic therapy with 4 mg per day, an average of
		13% of the dose is excreted as unchanged drug in the
		24 hour urine

1342B Coricidin®, Blood

Summary of Changes: Specimen Requirements were changed.

Specimen Requirements (Specimen Container) were changed.

Stability was changed.

Reference Comment was changed.

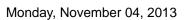
Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 2 mL Blood Transport Temperature: Refrigerated

Specimen Container: Gray top tube (Sodium Fluoride / Potassium Oxalate)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None





Test Changes

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 1 month(s)

Scope of Analysis: LC-MS/MS (83789): Chlorpheniramine

Method (CPT Code) HPLC (82003): Acetaminophen

Compound Name	Units	Reference Comment
Chlorpheniramine	ng/mL	Peak concentrations of 10 ng/mL chlorpheniramine were obtained 3 hours following single oral administration of 8 mg. Toxic effects have been reported in adults at concentrations greater than 400 ng/mL in serum. The blood to plasma ratio of chlorpheniramine is approximately 1.2.

1342SP Coricidin®, Serum/Plasma

Summary of Changes: Specimen Requirements were changed.

Specimen Requirements (Specimen Container) were changed. Specimen Requirements (Special Handling) were changed.

Stability was changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 2 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial

using approved guidelines.

Rejection Criteria: Polymer gel separation tube (SST or PST).

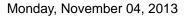
Stability: Room Temperature: 1 month(s)
Refrigerated: 1 month(s)
Frozen (-20 °C): 1 month(s)

Scope of Analysis: LC-MS/MS (83789): Chlorpheniramine

Method (CPT Code) HPLC (82003): Acetaminophen

Units	Reference Comment
ng/mL	Peak concentrations of 10 ng/mL chlorpheniramine were obtained 3 hours following single oral administration of 8 mg. Toxic effects have been reported in adults at concentrations greater than 400 ng/mL in serum.

1342U Coricidin®, Urine





Test Changes

Summary of Changes: Specimen Requirements (Specimen Container) were changed.

Stability was changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 2 mL Urine
Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Stability: Room Temperature: 14 day(s)

Refrigerated: 30 day(s) Frozen (-20 °C): 30 day(s)

Scope of Analysis: LC-MS/MS (83789): Chlorpheniramine

Method (CPT Code) HPLC (82003): Acetaminophen

Compound Name	Units	Reference Comment
Chlorpheniramine	ng/mL	During chronic therapy with 4 mg per day, an average of 13% of the dose is excreted as unchanged drug in the 24 hour urine.

1760B Diphenhydramine, Blood

Summary of Changes: Specimen Requirements (Specimen Container) were changed.

Stability was changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Blood
Transport Temperature: Refrigerated

Specimen Container: Gray top tube (Sodium Fluoride / Potassium Oxalate)

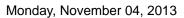
Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789): Diphenhydramine





Test Changes

Compound Name	Units	Reference Comment
Diphenhydramine	ng/mL	Usual antihistaminic/hypnotic range: 100 - 1000 ng/mL. Toxicity reported at greater than 1000 ng/mL.
		The blood to plasma concentration ratio for diphenhydramine is approximately 0.80.

1760FL Diphenhydramine, Fluid

Summary of Changes: Specimen Requirements were changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Fluid
Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Scope of Analysis: LC-MS/MS (83789): Diphenhydramine

Method (CPT Code)

Compound Name	Units	Reference Comment
Diphenhydramine	ng/mL	No reference data available.

1760SP Diphenhydramine, Serum/Plasma

Summary of Changes: Specimen Requirements (Specimen Container) were changed.

Specimen Requirements (Special Handling) were changed.

Stability was changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial

using approved guidelines.

Rejection Criteria: Polymer gel separation tube (SST or PST).

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)



Monday, November 04, 2013

New Tests and Test Updates

Test Changes

Scope of Analysis: LC-MS/MS (83789): Diphenhydramine

Method (CPT Code)

Compound Name	Units	Reference Comment
Diphenhydramine	ng/mL	Usual antihistaminic/hypnotic range: 100 - 1000 ng/mL.
	_	Toxicity reported at greater than 1000 ng/mL.

1760TI Diphenhydramine, Tissue

Summary of Changes: Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789, 80103)]

Scope of Analysis: LC-MS/MS (83789, 80103): Diphenhydramine

Method (CPT Code)

 Compound Name
 Units
 Reference Comment

 Diphenhydramine
 ng/g
 No reference data available.

1760U Diphenhydramine, Urine

Summary of Changes: Specimen Requirements (Specimen Container) were changed.

Stability was changed.

Reference Comment was changed. Methods/CPT Codes were changed []

Specimen Requirements: 1 mL Urine
Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Stability: Room Temperature: 1 month(s)

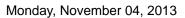
Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789): Diphenhydramine

Method (CPT Code)

Compound Name	Units	Reference Comment
Diphenhydramine	ng/mL	Concentrations of diphenhydramine between
		100 and 3500 ng/mL were found in urine during the
		first 24 hours of ingestion of 100 mg of the drug.

54127B Drug Impaired Driving/DRE Toxicology Topiramate Confirmation, Blood (Forensic)





Test Changes

Summary of Changes: Specimen Requirements (Specimen Container) were changed.

Stability was changed.

Reference Comment was changed.

Units were changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Blood
Transport Temperature: Refrigerated

Specimen Container: Lavender top tube (EDTA)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s) LC-MS/MS (83789): Topiramate

Scope of Analysis: Method (CPT Code)

Compound Name	Units	Reference Comment
Topiramate	ng/mL	The majority of epileptic patients taking 200 to 400 mg topiramate daily had mean trough serum topiramate concentrations between 2400 and 8000 ng/mL.
		The blood to plasma ratio of topiramate varies depending on the concentration, but is typically greater than 2.

54127SP Drug Impaired Driving/DRE Toxicology Topiramate Confirmation, Serum/Plasma (Forensic)

Summary of Changes: Specimen Requirements were changed.

Stability was changed.

Reference Comment was changed.

Units were changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

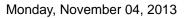
Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial

using approved guidelines.

Rejection Criteria: Polymer gel separation tube (SST or PST).





Test Changes

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789): Topiramate

Method (CPT Code)

Compound Name	Units	Reference Comment
Topiramate	ng/mL	The majority of epileptic patients taking 200 to 400 mg
		topiramate daily had mean trough serum topiramate
		concentrations between 2400 and 8000 ng/mL.

54127U Drug Impaired Driving/DRE Toxicology Topiramate Confirmation, Urine (Forensic)

Summary of Changes: Stability was changed.

Reference Comment was changed.

Units were changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s) LC-MS/MS (83789): Topiramate

Scope of Analysis: Method (CPT Code)

Compound Name	Units	Reference Comment
Topiramate	ng/mL	No reference data available.

8103B Environmental Exposure Screen, Blood (Forensic)

Summary of Changes: Specimen Requirements (Special Handling) were changed.

Specimen Requirements (Rejection Criteria) were changed.

Units were changed.

Specimen Requirements: 10 mL Blood Transport Temperature: Refrigerated

Specimen Container: Gray top tube (Sodium Fluoride / Potassium Oxalate) AND Royal Blue top tube

(Trace metal-free; EDTA)

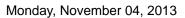
Light Protection: Not Required

Special Handling: Clotted Blood specimens are not acceptable.

Avoid seafood consumption for 48 hours prior to sample collection. Submit in container with a non-Heparin based anticoagulant. Tubes containing Heparin based

anticoagulants are not acceptable.

Studies have shown that cyanide has variable instability in biological specimens and is particularly unstable in some postmortem specimens. The loss of cyanide can be minimized shipping the sample to the laboratory for analysis as soon as possible, preferably using refrigerated or frozen transportation and preservation using sodium





Test Changes

fluoride / potassium oxalate (grey-top tube). Samples should not be refrozen if

previously thawed.

The potential for increases in cyanide concentrations, although rare, have also been demonstrated and may be due to microbial action. Preservation with sodium fluoride

may reduce this possibility.

Rejection Criteria: Plastic container. Light Green top tube (Lithium Heparin). Tan top tube - glass

(Sodium Heparin). Royal Blue top tube (Trace metal-free; Sodium Heparin). Gray top tube (Sodium Fluoride / Potassium Oxalate). Green top tube (Sodium Heparin).

Scope of Analysis: LC-MS/MS (82600): Cyanide Method (CPT Code) Colorimetry (80101): Bromides

Headspace GC (82055): Ethanol, Blood Alcohol Concentration (BAC), Methanol,

Isopropanol, Acetone ICP/MS (83655): Lead ICP/MS (82175): Arsenic ICP/MS (84255): Selenium ICP/MS (83018): Thallium ICP/MS (83825): Mercury

GC (83921): Trichloroacetic Acid Headspace GC (84600): Volatiles GC (84600): Hydrocarbon Gases

GC (84600): Halocarbons ICP/MS (83018): Bismuth ICP/MS (83018): Antimony EZA (82480): Cholinesterase SP (80101): Carboxyhemoglobin

SP (83050): Methemoglobin, Sulfhemoglobin

Compound Name	Units	Reference Comment
Methemoglobin	%Saturation	Normal: Up to 2 percent. Clinically significant: 10 percent and greater. Methemoglobin will begin increasing several hours following collection of a blood specimen and may increase to extremely elevated values in decomposed specimens.
Sulfhemoglobin	%Saturation	Normal: Up to 2%.

2073B Fexofenadine, Blood

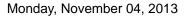
Summary of Changes: Specimen Requirements were changed.

Specimen Requirements (Specimen Container) were changed.

Stability was changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]





Test Changes

Specimen Requirements: 1 mL Blood
Transport Temperature: Refrigerated

Specimen Container: Gray top tube (Sodium Fluoride / Potassium Oxalate)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789): Fexofenadine

Method (CPT Code)

Compound Name	Units	Reference Comment
Fexofenadine	ng/mL	Peak plasma concentrations:
	· ·	Single 60 mg dose: 200 +/- 90 ng/mL
		Steady-state (60 mg, 2x daily): 280 +/- 140 ng/mL
		The blood to plasma ratio of fexofenadine is not known.

2073SP	Fexofenadine,	Serum/Plasma
Summ	nary of Changes:	Specimen Requirements were changed. Specimen Requirements (Specimen Container) were changed. Specimen Requirements (Special Handling) were changed. Stability was changed. Reference Comment was changed. Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial

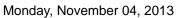
using approved guidelines.

Rejection Criteria: Polymer gel separation tube (SST or PST).

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789): Fexofenadine





Test Changes

Compound Name	Units	Reference Comment
Fexofenadine	ng/mL	Peak plasma concentrations:
		Single 60 mg dose: 200 +/- 90 ng/mL
		Steady-state (60 mg, 2x daily): 280 +/- 140 ng/mL

2365B Hydroxyzine and Metabolite, Blood

Summary of Changes: Test Name was changed.

Specimen Requirements were changed.

Specimen Requirements (Specimen Container) were changed.

Stability was changed.

Scope of Analysis was changed.

Cetirizine was added.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Blood
Transport Temperature: Refrigerated

Specimen Container: Gray top tube (Sodium Fluoride / Potassium Oxalate)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Stability: Room Temperature: 1 month(s)

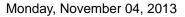
Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789): Hydroxyzine, Cetirizine

Method (CPT Code)

Compound Name	Units	Reference Comment
Hydroxyzine	ng/mL	The following mean peak serum or plasma concentrations of hydroxyzine have been reported: 25 mg oral dose: 43 ng/mL at 3 hours 50 mg oral dose: 70 ng/mL at 2 hours, 30 ng/mL at 6 hours, and 22 ng/mL at 12 hours 100 mg oral dose: 78 ng/mL at 4 hours and 35 ng/mL at 8 hours The whole blood to serum or plasma ratio is not known for hydroxyzine.
Cetirizine	ng/mL	Cetirizine is an active metabolite of hydroxyzine. No reference data available.

2365FL Hydroxyzine and Metabolite, Fluid





Test Changes

Summary of Changes: Test Name was changed.

Specimen Requirements were changed.

Scope of Analysis was changed.

Cetirizine was added.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Fluid
Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Scope of Analysis: LC-MS/MS (83789): Hydroxyzine, Cetirizine

Method (CPT Code)

Compound Name	Units	Reference Comment
Cetirizine	ng/mL	Cetirizine is an active metabolite of hydroxyzine.
		No reference data available

2365SP Hydroxyzine and Metabolite, Serum/Plasma

Summary of Changes: Test Name was changed.

Specimen Requirements were changed.

Specimen Requirements (Specimen Container) were changed. Specimen Requirements (Special Handling) were changed.

Stability was changed.

Scope of Analysis was changed.

Cetirizine was added.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial

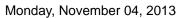
using approved guidelines.

Rejection Criteria: Polymer gel separation tube (SST or PST).

Stability: Room Temperature: 1 month(s) Refrigerated: 1 month(s)

Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789): Hydroxyzine, Cetirizine





Test Changes

Compound Name	Units	Reference Comment
Hydroxyzine	ng/mL	The following mean peak serum or plasma concentrations of hydroxyzine have been reported:
		25 mg oral dose: 43 ng/mL at 3 hours 50 mg oral dose: 70 ng/mL at 2 hours, 30 ng/mL at 6 hours, and 22 ng/mL at 12 hours 100 mg oral dose: 78 ng/mL at 4 hours and 35 ng/mL at 8 hours
Cetirizine	ng/mL	Cetirizine is an active metabolite of hydroxyzine. No reference data available.

2365U Hydroxyzine and Metabolite, Urine

Summary of Changes: Test Name was changed.

Specimen Requirements were changed.

Specimen Requirements (Specimen Container) were changed.

Stability was changed.

Scope of Analysis was changed.

Cetirizine was added.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Urine Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Stability: Room Temperature: 1 month(s)

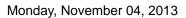
Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789): Hydroxyzine, Cetirizine

Method (CPT Code)

Compound Name	Units	Reference Comment
Hydroxyzine	ng/mL	No reference data available.
Cetirizine	ng/mL	Cetirizine is an active metabolite of hydroxyzine. No reference data available.

2517B Levocetirizine, Blood





Test Changes

Summary of Changes: Specimen Requirements were changed.

Specimen Requirements (Transport Temperature) were changed. Specimen Requirements (Specimen Container) were changed. Specimen Requirements (Rejection Criteria) were changed.

Stability was changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Blood Transport Temperature: Refrigerated

Specimen Container: Gray top tube (Sodium Fluoride / Potassium Oxalate)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

> Stability: Room Temperature: 1 month(s)

> > Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)

Scope of Analysis:

LC-MS/MS (83789): Levocetirizine Method (CPT Code)

Compound Name	Units	Reference Comment
Levocetirizine	ng/mL	The following mean peak serum or plasma concentrations of levocetirizine have been reported: 5 mg oral dose: 270 ng/mL at 0.75 hours 10 mg oral dose: 510 ng/mL at 0.7 hours
		The whole blood to serum or plasma ratio for levocetirizing has been reported as 0.6 to 0.7. This test is not chiral specific. Patients who have taken racemic Cetirizine (Zyrtec®), as opposed to Levocetirizine (Xyzal®), may have falsely elevated results.

2517SP Levocetirizine, Serum/Plasma

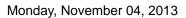
Summary of Changes: Specimen Requirements were changed.

> Specimen Requirements (Transport Temperature) were changed. Specimen Requirements (Specimen Container) were changed. Specimen Requirements (Special Handling) were changed. Specimen Requirements (Rejection Criteria) were changed.

Stability was changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]





Test Changes

Specimen Requirements: 1 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial

using approved guidelines.

Rejection Criteria: Polymer gel separation tube (SST or PST).

Stability: Room Temperature: 1 month(s) Refrigerated: 1 month(s)

Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789): Levocetirizine

Method (CPT Code)

Compound Name	Units	Reference Comment
Levocetirizine	ng/mL	The following mean peak serum or plasma concentrations of levocetirizine have been reported: 5 mg oral dose: 270 ng/mL at 0.75 hours 10 mg oral dose: 510 ng/mL at 0.7 hours
		This test is not chiral specific. Patients who have taken racemic Cetirizine (Zyrtec®), as opposed to Levocetirizine (Xyzal®), may have falsely elevated results.

2517U Levocetirizine, Urine

Summary of Changes: Specimen Requirements were changed.

Specimen Requirements (Transport Temperature) were changed. Specimen Requirements (Rejection Criteria) were changed.

Stability was changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Urine
Transport Temperature: Refrigerated

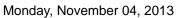
Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)





Test Changes

Scope of Analysis: LC-MS/MS (83789): Levocetirizine

Method (CPT Code)

Compound Name	Units	Reference Comment
Levocetirizine	ng/mL	No reference data available.
	_	This test is not chiral specific.
		Patients who have taken racemic Cetirizine (Zyrtec®),
		as opposed to Levocetirizine (Xyzal®), may have falsely
		elevated results.

2887B Methemoglobin, Blood

Summary of Changes: Specimen Requirements (Specimen Container) were changed.

Specimen Requirements (Special Handling) were changed.

Units were changed.

Specimen Requirements: 1 mL Blood
Transport Temperature: Refrigerated

Specimen Container: Lavender top tube (EDTA)

Light Protection: Not Required

Special Handling: The validity of the methemoglobin result will be compromised if the analysis is not

performed within FOUR hours of sample collection.

Rejection Criteria: None

Scope of Analysis: SP (83050): Methemoglobin

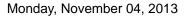
Method (CPT Code)

Compound Name	Units	Reference Comment
Methemoglobin	%Saturation	Methemoglobin inducers: Biological Exposure Index (ACGIH): 1.5% of total hemoglobin measured during or at end of shift: ACGIH recommends analysis for Methemoglobin immediately following specimen collection due to the instability of this analyte. Studies have shown that Methemoglobin may either increase or decrease up to the rate of 40% during the first 24 hours when stored at 4 degrees celsius.

2887R Methemoglobin, RBCs

Summary of Changes: Specimen Requirements (Specimen Container) were changed.

Units were changed.





Test Changes

Specimen Requirements: 1 mL RBCs
Transport Temperature: Refrigerated

Specimen Container: Lavender top tube (EDTA)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Scope of Analysis: SP (83050): Methemoglobin

Method (CPT Code)

Compound Name	Units	Reference Comment
Methemoglobin	%Saturation	Methemoglobin inducers:
-		Biological Exposure Index (ACGIH):
		1.5% of total hemoglobin measured during or at end of shift:
		ACGIH recommends analysis for Methemoglobin immediately following specimen collection due to
		the instability of this analyte. Studies have shown
		that Methemoglobin may either increase or decrease
		up to the rate of 40% during the first 24 hours
		when stored at 4 degrees celsius.

3070U N,N-Dimethylformamide (DMF) Exposure (N-Monomethylformamide), Urine

Summary of Changes: Specimen Requirements were changed.

Reference Comment was changed.

Creatinine was removed

Specimen Requirements: 5 mL Urine
Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: Collect sample at end of shift.

Avoid consumption of alcoholic beverages on the sampling day.

Rejection Criteria: None

Scope of Analysis: GC (82491): N-Monomethylformamide

Method (CPT Code)

Compound Name

Units

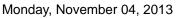
Reference Comment

M-Monomethylformamide

mg/L

Biological Exposure Index (ACGIH):
Following workplace exposure to N,N-Dimethylformamide:
15 mg/L measured in a urine specimen collected at end of shift.

3185B Nitrobenzene Exposure Monitoring, Blood





Test Changes

Summary of Changes: Specimen Requirements (Specimen Container) were changed.

Specimen Requirements (Special Handling) were changed.

Units were changed.

Specimen Requirements: 1 mL Blood
Transport Temperature: Refrigerated

Specimen Container: Lavender top tube (EDTA)

Light Protection: Not Required

Special Handling: The validity of the methemoglobin result will be compromised if the analysis is not

performed within FOUR hours of sample collection.

Rejection Criteria: None

Scope of Analysis: SP (83050): Methemoglobin

Method (CPT Code)

Compound Name	Units	Reference Comment
Methemoglobin	%Saturation	Methemoglobin inducers: Biological Exposure Index (ACGIH): 1.5% of total hemoglobin measured during or at end of shift: ACGIH recommends analysis for Methemoglobin immediately following specimen collection due to the instability of this analyte. Studies have shown
		that Methemoglobin may either increase or decrease up to the rate of 40% during the first 24 hours when stored at 4 degrees celsius.

8104B Postmortem Toxicology - Fire Death Screen, Blood (Forensic)

Summary of Changes: Specimen Requirements (Specimen Container) were changed.

Specimen Requirements (Special Handling) were changed.

Units were changed.

Specimen Requirements: 10 mL Blood Transport Temperature: Refrigerated

Specimen Container: Gray top tube (Sodium Fluoride / Potassium Oxalate), Lavender top tube (EDTA)

Light Protection: Not Required

Special Handling: The validity of the methemoglobin result will be compromised if the analysis is not

performed within FOUR hours of sample collection.

Studies have shown that cyanide has variable instability in biological specimens and is particularly unstable in some postmortem specimens. The loss of cyanide can be minimized shipping the sample to the laboratory for analysis as soon as possible,



Monday, November 04, 2013

New Tests and Test Updates

Test Changes

preferably using refrigerated or frozen transportation and preservation using sodium fluoride / potassium oxalate (grey-top tube). Samples should not be refrozen if previously thawed. The potential for increases in cyanide concentrations, although rare, have also been demonstrated and may be due to microbial action. Preservation

with sodium fluoride may reduce this possibility.

Rejection Criteria: None

Scope of Analysis: LC-MS/MS (82600): Cyanide

Method (CPT Code) ELISA (80101x9): Opiates, Cocaine / Metabolites, Benzodiazepines, Cannabinoids,

Amphetamines, Barbiturates, Methadone, Phencyclidine, Propoxyphene

Headspace GC (84600): Volatiles SP (80101): Carboxyhemoglobin

SP (83050): Methemoglobin, Sulfhemoglobin

Compound NameUnitsReference CommentMethemoglobin%SaturationSulfhemoglobin%SaturationNormal: Up to 2 %.

4177B Postmortem Toxicology - SIDS Screen, Blood (Forensic)

Summary of Changes: Units were changed.

Scope of Analysis: Method (CPT Code)

Compound Name	Units	Reference Comment	
Methemoglobin	%Saturation		
Sulfhemoglobin	%Saturation	Normal: Up to 2 %.	

4187B Postmortem Toxicology - SIDS Screen, Blood (Forensic)

Summary of Changes: Units were changed.

Scope of Analysis: Method (CPT Code)

Compound Name	Units	Reference Comment
Methemoglobin	%Saturation	
Sulfhemoglobin	%Saturation	Normal: Up to 2 %.

4125SP Rufinamide, Serum/Plasma

Summary of Changes: Specimen Requirements (Specimen Container) were changed.

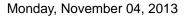
Specimen Requirements (Special Handling) were changed.

Stability was changed.

Reference Comment was changed.

Units were changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]





Test Changes

Specimen Requirements: 1 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial

using approved guidelines.

Rejection Criteria: Polymer gel separation tube (SST or PST).

Stability: Room Temperature: 1 month(s)
Refrigerated: 1 month(s)
Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789): Rufinamide

Method (CPT Code)

Compound Name	Units	Reference Comment
Rufinamide	ng/mL	Maintenance therapy with 45 mg/kg (approximately 1600 mg) daily rufinamide resulted in plasma concentrations ranging from 5000 - 48000 ng/mL (n = 74).

4235B Sulfhemoglobin, Blood

Summary of Changes: Stability was changed.

Units were changed.

Stability: Room Temperature: Undetermined

Refrigerated: Undetermined Frozen (-20 °C): Undetermined SP (83060): Sulfhemoglobin

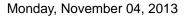
Scope of Analysis: Method (CPT Code)

Compound NameUnitsReference CommentSulfhemoglobin%SaturationNormal: Up to 2 %.

4235R Sulfhemoglobin, RBCs

Summary of Changes: Specimen Requirements (Specimen Container) were changed.

Units were changed.





Test Changes

Specimen Requirements: 1 mL RBCs
Transport Temperature: Refrigerated

Specimen Container: Lavender top tube (EDTA)

Light Protection: Not Required

Special Handling: Collect sample at end of shift.

Rejection Criteria: None

Scope of Analysis: SP (83060): Sulfhemoglobin

Method (CPT Code)

Compound NameUnitsReference CommentSulfhemoglobin%SaturationNormal: Up to 2 percent.

52127B Topiramate Confirmation, Blood (Forensic)

Summary of Changes: Specimen Requirements (Specimen Container) were changed.

Stability was changed.

Reference Comment was changed.

Units were changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Blood
Transport Temperature: Refrigerated

Specimen Container: Lavender top tube (EDTA)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

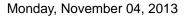
Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s) LC-MS/MS (83789): Topiramate

Scope of Analysis: Method (CPT Code)

Compound NameUnitsReference CommentTopiramateng/mLThe majority of epileptic patients taking 200 to 400 mg topiramate daily had mean trough serum topiramate concentrations between 2400 and 8000 ng/mL.The blood to plasma ratio of topiramate varies depending on the concentration, but is typically greater than 2.

53127B Topiramate Confirmation, Blood (Forensic)





Test Changes

Summary of Changes: Specimen Requirements (Specimen Container) were changed.

Stability was changed.

Reference Comment was changed.

Units were changed.

Methods/CPT Codes were changed [LC-MS/MS (83789, C0.02-0.2)]

Specimen Requirements: 1 mL Blood
Transport Temperature: Refrigerated

Specimen Container: Lavender top tube (EDTA)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)

Scope of Analysis: LC-MS/MS (83789, C0.02-0.2): Topiramate

Method (CPT Code)

Compound Name	Units	Reference Comment
Topiramate	ng/mL	The majority of epileptic patients taking 200 to 400 mg topiramate daily had mean trough serum topiramate concentrations between 2400 and 8000 ng/mL.
		The blood to plasma ratio of topiramate varies depending on the concentration, but is typically greater than 2.

52127SP Topiramate Confirmation, Serum/Plasma (Forensic)

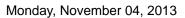
Summary of Changes: Specimen Requirements were changed.

Stability was changed.

Reference Comment was changed.

Units were changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]





Test Changes

Specimen Requirements: 1 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender or Pink top tube (EDTA), Green top tube (Sodium Heparin), Light Blue top tube (Sodium Citrate) or Gray top tube (Sodium

Fluoride / Potassium Oxalate)

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial

using approved guidelines.

Rejection Criteria: Polymer gel separation tube (SST or PST).

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s) LC-MS/MS (83789): Topiramate

Scope of Analysis: Method (CPT Code)

 Compound Name
 Units
 Reference Comment

 Topiramate
 ng/mL
 The majority of epileptic patients taking 200 to 400 mg topiramate daily had mean trough serum topiramate concentrations between 2400 and 8000 ng/mL.

53127SP Topiramate Confirmation, Serum/Plasma (Forensic)

Summary of Changes: Specimen Requirements were changed.

Stability was changed.

Reference Comment was changed.

Units were changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial

using approved guidelines.

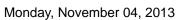
Rejection Criteria: Polymer gel separation tube (SST or PST).

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)

LC-MS/MS (83789): Topiramate

Scope of Analysis:





Test Changes

Compound Name	Units	Reference Comment
Topiramate	ng/mL	The majority of epileptic patients taking 200 to 400 mg
		topiramate daily had mean trough serum topiramate
		concentrations between 2400 and 8000 ng/mL.

52127U Topiramate Confirmation, Urine (Forensic)

Summary of Changes: Stability was changed.

Reference Comment was changed.

Units were changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s) LC-MS/MS (83789): Topiramate

Scope of Analysis: Method (CPT Code)

Compound Name	Units	Reference Comment	
Topiramate	ng/mL	No reference data available.	

53127U Topiramate Confirmation, Urine (Forensic)

Summary of Changes: Stability was changed.

Reference Comment was changed.

Units were changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s) LC-MS/MS (83789): Topiramate

Scope of Analysis: Method (CPT Code)

Compound NameUnitsReference CommentTopiramateng/mLNo reference data available.

4519B Topiramate, Blood

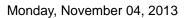
Summary of Changes: Specimen Requirements (Specimen Container) were changed.

Stability was changed.

Reference Comment was changed.

Units were changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]





Test Changes

Specimen Requirements: 1 mL Blood Transport Temperature: Refrigerated

Specimen Container: Lavender top tube (EDTA)

Light Protection: Not Required

Special Handling: None Rejection Criteria: None

> Stability: Room Temperature: 1 month(s)

> > Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s) LC-MS/MS (83789): Topiramate

Scope of Analysis:

Method (CPT Code)

Compound Name	Units	Reference Comment
Topiramate	ng/mL	The majority of epileptic patients taking 200 to 400 mg topiramate daily had mean trough serum topiramate concentrations between 2400 and 8000 ng/mL.
		The blood to plasma ratio of topiramate varies depending on the concentration, but is typically greater than 2.

4519SP Topiramate, Serum/Plasma

Summary of Changes: Specimen Requirements were changed.

Stability was changed.

Reference Comment was changed.

Units were changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Specimen Requirements: 1 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: Serum: Collect sample in Red top tube

Plasma: Collect sample in Lavender top tube (EDTA) or Pink top tube.

Promptly centrifuge and separate Serum or Plasma into a plastic screw capped vial

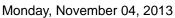
using approved guidelines.

Polymer gel separation tube (SST or PST). Rejection Criteria:

> Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s) LC-MS/MS (83789): Topiramate

Scope of Analysis: Method (CPT Code)





Test Changes

Compound Name	Units	Reference Comment
Topiramate	ng/mL	The majority of epileptic patients taking 200 to 400 mg
		topiramate daily had mean trough serum topiramate
		concentrations between 2400 and 8000 ng/mL.

4519U Topiramate, Urine

Summary of Changes: Reference Comment was changed.

Units were changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Scope of Analysis: Method (CPT Code)

e of Analysis: LC-MS/MS (83789): Topiramate

Compound NameUnitsReference CommentTopiramateng/mLNo reference data available.

4774SP Vigabatrin, Serum/Plasma

Summary of Changes: Stability was changed.

Methods/CPT Codes were changed [LC-MS/MS (83789)]

Stability: Room Temperature: 1 month(s)

Refrigerated: 1 month(s) Frozen (-20 °C): 1 month(s) LC-MS/MS (83789): Vigabatrin

Scope of Analysis: Method (CPT Code)



Discontinued Tests

Test Code	Test Name	Alternative Test
0329ME	Amphetamines (D/L Ratio), Meconium	8600ME - Amphetamines Panel (Qualitative),
		Meconium
9134B	Chlorpheniramine Screen, Blood	1190B - Chlorpheniramine, Blood
9134SP	Chlorpheniramine Screen, Serum/Plasma	1190SP - Chlorpheniramine, Serum/Plasma
9134TI	Chlorpheniramine Screen, Tissue	1190TI - Chlorpheniramine, Tissue
9134U	Chlorpheniramine Screen, Urine	1190U - Chlorpheniramine, Urine
9157B	Diphenhydramine Screen, Blood	1760B - Diphenhydramine, Blood
9157SP	Diphenhydramine Screen, Serum/Plasma	1760SP - Diphenhydramine, Serum/Plasma
9157U	Diphenhydramine Screen, Urine	1760U - Diphenhydramine, Urine
6901ME	Drugs of Abuse Screen (1 Panel), Meconium	1864ME - Drugs of Abuse Screen (9 Panel),
		Meconium
6903ME	Drugs of Abuse Screen (4 Panel), Meconium	1864ME - Drugs of Abuse Screen (9 Panel),
		Meconium
1970R	Ethchlorvynol, RBCs	1970B - Ethchlorvynol, Blood
3990ME	Propoxyphene and Metabolite (Qualitative), Meconium	No Alternate Tests Available