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.

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Willow Grove, PA 19090
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New Tests and Test Updates

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									•

New Tests and Test Updates

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	Drug Impaired Driving/DRE Toxicology Topiramate Confirmation, Serum/Plasma (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	•								

New Tests and Test Updates

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 and Test Updates

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	0.5	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.

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 guidelines.
Specimen Container:	Plastic container (preservative-free)

New Tests and Test Updates

New Tests

Transport Temperature: Refrigerated
Light Protection: Not Required
Rejection Criteria: Polymer gel separation tube (SST or PST).
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	0.5	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

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: 2 mL Urine
Minimum Volume: 0.55 mL
Special Handling: None
Specimen Container: Plastic container (preservative-free)
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	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.

New Tests and Test Updates

New Tests

0205B Acetyl Fentanyl, Blood — Effective Immediately

Scope of Analysis:	Acetyl Fentanyl [LC-MS/MS]
Method(s):	High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS)
Purpose:	Identification and Quantitation, This test is New York State approved.
Category:	Synthetic Opioid
Specimen Requirements:	2 mL Blood
Minimum Volume:	0.7 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/Tandem Mass Spectrometry (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	0.1	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 — Effective Immediately

Scope of Analysis:	Acetyl Fentanyl [LC-MS/MS]
Method(s):	High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS)
Purpose:	Identification and Quantitation, This test is New York State approved.
Category:	Synthetic Opioid
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)

New Tests and Test Updates

New Tests

Transport Temperature: Refrigerated
Light Protection: Not Required
Rejection Criteria: Polymer gel separation tube (SST or PST).
Stability: Room Temperature: 14 day(s)
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

Compound Name / Alias	Units	RL	Reference Comment
Acetyl Fentanyl	ng/mL	0.1	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**

Scope of Analysis: Acetyl Fentanyl [LC-MS/MS]
Method(s): High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS)
Purpose: Identification and Quantitation, This test is New York State approved.
Category: Synthetic Opioid
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: 14 day(s)
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

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

New Tests and Test Updates

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 Sirturo	ng/mL	25	In one study the steady state average concentration for 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 Narcan®	ng/mL	1.0	Reported serum concentration at 2 minutes following a 0.4 mg I.V. dose: Approximately 10 ng/mL.

New Tests and Test Updates

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 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: 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 Narcan®	ng/mL	0.5	Reported serum concentration at 2 minutes following a 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 Narcan®	ng/mL	5.0	No reference data available.

New Tests and Test Updates

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 and Test Updates

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

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).

4125B Rufinamide, Blood — Effective Immediately

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 and Test Updates

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.

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 ng/mL 5 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)

New Tests and Test Updates

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
Stability:	Room Temperature: Undetermined Refrigerated: Undetermined Frozen (-20 °C): Undetermined
Scope of Analysis:	SP (80101): Carboxyhemoglobin
Method (CPT Code)	SP (82375): 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 %.

1040B Cetirizine, Blood

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): Cetirizine / Levocetirizine
Method (CPT Code)	

New Tests and Test Updates

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: Method (CPT Code)	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.

New Tests and Test Updates

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

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

New Tests and Test Updates

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).
Stability:	Room Temperature: 1 month(s) Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)
Scope of Analysis: Method (CPT Code)	LC-MS/MS (83789): Chlorpheniramine

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

Summary of Changes:	Reference Comment was changed. Methods/CPT Codes were changed [LC-MS/MS (83789, 80103)]
Scope of Analysis: Method (CPT Code)	LC-MS/MS (83789, 80103): Chlorpheniramine

New Tests and Test Updates

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

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

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.

1342U Coricidin®, Urine

New Tests and Test Updates

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
Method (CPT Code)	

New Tests and Test Updates

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

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)

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)

New Tests and Test Updates

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

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).

New Tests and Test Updates

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

New Tests and Test Updates

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

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

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).
Stability:	Room Temperature: 1 month(s) Refrigerated: 1 month(s) Frozen (-20 °C): 6 month(s)
Scope of Analysis: Method (CPT Code)	LC-MS/MS (83789): Fexofenadine

New Tests and Test Updates

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: Method (CPT Code) LC-MS/MS (83789): Hydroxyzine, Cetirizine

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

New Tests and Test Updates

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
Method (CPT Code)

New Tests and Test Updates

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: Method (CPT Code)	LC-MS/MS (83789): Hydroxyzine, Cetirizine

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

New Tests and Test Updates

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

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 levocetirizine 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)]

New Tests and Test Updates

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

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)

New Tests and Test Updates

Test Changes

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

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: Method (CPT Code): SP (83050): Methemoglobin

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.

New Tests and Test Updates

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: Method (CPT Code)	SP (83050): Methemoglobin

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: Method (CPT Code)	GC (82491): N-Monomethylformamide

Compound Name	Units	Reference Comment
N-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: Method (CPT Code) SP (83050): Methemoglobin

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,

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:
Method (CPT Code)
LC-MS/MS (82600): Cyanide
ELISA (80101x9): Opiates, Cocaine / Metabolites, Benzodiazepines, Cannabinoids, Amphetamines, Barbiturates, Methadone, Phencyclidine, Propoxyphene
Headspace GC (84600): Volatiles
SP (80101): Carboxyhemoglobin
SP (83050): Methemoglobin, Sulfhemoglobin

Compound Name	Units	Reference Comment
Methemoglobin	%Saturation	
Sulfhemoglobin	%Saturation	Normal: 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)]

New Tests and Test Updates

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

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
Scope of Analysis: Method (CPT Code)	SP (83060): Sulfhemoglobin

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

4235R Sulfhemoglobin, RBCs

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

New Tests and Test Updates

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: Method (CPT Code)	SP (83060): Sulfhemoglobin

Compound Name	Units	Reference Comment
Sulfhemoglobin	%Saturation	Normal: 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)
Scope of Analysis: Method (CPT Code)	LC-MS/MS (83789): Topiramate

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.

53127B Topiramate Confirmation, Blood (Forensic)

New Tests and Test Updates

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)]

New Tests and Test Updates

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

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

New Tests and Test Updates

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)

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

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)

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

Compound Name	Units	Reference Comment
Topiramate	ng/mL	No 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)]

New Tests and Test Updates

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

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.
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: Method (CPT Code)	LC-MS/MS (83789): Topiramate

New Tests and Test Updates

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): LC-MS/MS (83789): Topiramate

Compound Name	Units	Reference Comment
Topiramate	ng/mL	No 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)

Scope of Analysis: Method (CPT Code): LC-MS/MS (83789): Vigabatrin

New Tests and Test Updates

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