



January 26, 2007

Dear Valued Client:

In our continuing effort to provide you with the highest quality toxicology laboratory services available, we have compiled the enclosed packet of important changes regarding a number of tests we perform. Listed below are the types of changes included in this packet.

<u>Type of Change</u>	<u>Explanation</u>
Test Changes	Tests that have had changes to their method/CPT code, units of measurement, scope of analysis or specimen requirements
Discontinued Tests	Tests being discontinued with alternate testing suggestions
Reference Comment	Tests that have had changes to the reference comment

Please be advised that the new tests listed are available immediately. All other changes listed in this packet will go into effect on **May 7, 2007**. Please use this packet of 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 packet, 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.

Sincerely,

NMS Labs

Database Changes - Summary

Test Code	Test Name	New Test	Method	Units	Scope	Specimen Reqs	Discontinued	Reference Comment	Misc.
1615B	Digoxin, Blood		•						
1615FL	Digoxin, Fluid		•						
1615SP	Digoxin, Serum/Plasma		•						
1615TI	Digoxin, Tissue		•						
1959R	Ethambutol, RBCs						•		
2215B	Chlorinated Solvents, Blood						•		
2215SP	Chlorinated Solvents, Serum/Plasma						•		
2354B	Hydroquinone, Blood						•		
2354SP	Hydroquinone, Serum/Plasma						•		
2354U	Hydroquinone, Urine						•		
3060U	Dimethylacetamide Metabolite, Urine				•			•	
3223B	Nonsteroidal Anti-Inflammatory Drug Panel, Blood							•	
3223SP	Nonsteroidal Anti-Inflammatory Drug Panel, Serum/Plasma							•	

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Changes effective:  
May 7, 2007

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**TEST CHANGES**

**Method/CPT Code, Units of Measurement, Scope of Analysis and Specimen Requirements**

Test Code	Test Name	Unit	Method / CPT Code
1615B	<b>Digoxin, Blood</b> Digoxin Summary of Changes: For Quality Improvement purposes the following changes were made. Method was changed.		LC/MS/MS
1615FL	<b>Digoxin, Fluid</b> Digoxin Summary of Changes: For Quality Improvement purposes the following changes were made. Method was changed.		LC/MS/MS
1615SP	<b>Digoxin, Serum/Plasma</b> Digoxin Summary of Changes: For Quality Improvement purposes the following changes were made. Method was changed.		LC/MS/MS
1615TI	<b>Digoxin, Tissue</b> Digoxin Summary of Changes: For Quality Improvement purposes the following changes were made. Method was changed.		LC/MS/MS
3060U	<b>Dimethylacetamide Metabolite, Urine</b> Creatinine Monomethylacetamide <b>Monomethylacetamide (Creatinine corrected)</b> Summary of Changes: For Quality Improvement purposes the following changes were made. Monomethylacetamide (Creatinine correction) was removed. Monomethylacetamide (Creatinine corrected) was added.		

**DISCONTINUED TESTS**

Test Code	Test Name	Alternative Test
2215B	Chlorinated Solvents, Blood	2216B Chlorinated Hydrocarbons, Blood
2215SP	Chlorinated Solvents, Serum/Plasma	No alternate test available for this matrix
1959R	Ethambutol, RBCs	No alternate test available for this matrix
2354B	Hydroquinone, Blood	No alternate test available for this matrix
2354SP	Hydroquinone, Serum/Plasma	No alternate test available for this matrix
2354U	Hydroquinone, Urine	No alternate test available for this matrix

**REFERENCE COMMENT CHANGES**

Test Code	Test Name / Compound	New Reference Comment
3060U	<b>Dimethylacetamide Metabolite, Urine</b> <ul style="list-style-type: none"> <li>Monomethylacetamide (Creatinine corrected)</li> </ul>	Biological Exposure Index (ACGIH): 30 mg Monomethylacetamide/g Creatinine in urine collected at end of shift at end of work week.
3223B	<b>Nonsteroidal Anti-Inflammatory Drug Panel, Blood</b> <ul style="list-style-type: none"> <li>Ketorolac</li> <li>Nabumetone as 6-MNA</li> <li>Tolmetin</li> <li>Ketoprofen</li> <li>Naproxen</li> <li>Fenoprofen</li> <li>Etodolac</li> </ul>	<p>Steady state plasma concentrations following q.i.d. oral doses of 15 mg: 1.1 - 1.7 mcg/mL peak (50 minutes), and 0.2 - 0.3 mcg/mL at trough.                      Steady state plasma concentrations following q.i.d. oral doses of 30 mg: 2.3 - 3.5 mcg/mL peak (50 minutes), and 0.3 - 0.7 mcg/mL at trough.</p> <p>6-MNA (6-Methoxy-2-Naphthylacetic Acid) is the active metabolite of Nabumetone.                      Steady state plasma levels (+/- 2 s.d. of the mean) of 6-MNA following a daily oral regimen of Nabumetone: 8 - 75 mcg/mL peak levels at 3 hours following a 1000 mg dose and 1 - 50 mcg/mL trough; 50 - 115 mcg/mL peak levels at 2.5 hours following a 2000mg dose and 30 - 80 mcg/mL trough.</p> <p>Peak plasma levels following single oral dose:                      300 mg: Approximately 30 mcg/mL at 0.25 to 1 hour                      400 mg: Approximately 40 mcg/mL at 0.5 to 1 hour                      Toxic effects associated with plasma levels greater than 60 mcg/mL.</p> <p>Suggested therapeutic range: 0.4 - 6 mcg/mL                      Peak plasma levels following a single oral dose:                      50 mg: 3.2 - 4.8 mcg/mL                      100 mg: 5.5 - 10.1 mcg/mL                      150 mg: 13.1 mcg/mL                      Average steady state plasma levels following 50 mg four times daily regimen: 1.7 - 2.3 mcg/mL.</p> <p>Anti-inflammatory or analgesic range: 30 - 90 mcg/mL.</p> <p>Steady state plasma levels following a 600 mg four times daily regimen: 40 - 70 mcg/mL.                      Peak plasma levels following a single 250 mg oral dose: 23 - 31 mcg/mL at 0.5 to 2 hours post dose.</p> <p>Mean Peak Plasma levels after 200 to 600 mg single oral doses range from 14 to 37 mcg/mL at 80 minutes post dose.</p>

**REFERENCE COMMENT CHANGES**

Test Code	Test Name / Compound	New Reference Comment
	<ul style="list-style-type: none"> <li>• Flurbiprofen</li> <li>• Indomethacin</li> <li>• Ibuprofen</li> <li>• Diclofenac</li> </ul>	<p>Steady state plasma levels following a regimen of 50 mg three times daily: Approximately 2.3 mcg/mL. Peak plasma levels following a single 100 mg oral dose: 9 - 17 mcg/mL at 1.5 hours post dose.</p> <p>Usual analgesic range in adults: 0.5 - 3 mcg/mL. Toxicity reported at greater than 5 mcg/mL.</p> <p>Therapeutic: 10 - 50 mcg/mL. Toxic: Greater than 100 mcg/mL.</p> <p>During chronic therapy with 150 mg for the treatment of arthritis, peak plasma concentrations ranged from: 0.1 - 2.2 (mean of 0.8) mcg/mL.</p>
3223SP	<p><b>Nonsteroidal Anti-Inflammatory Drug Panel, Serum/Plasma</b></p> <ul style="list-style-type: none"> <li>• Ketorolac</li> <li>• Nabumetone as 6-MNA</li> <li>• Tolmetin</li> <li>• Ketoprofen</li> <li>• Naproxen</li> </ul>	<p>Steady state plasma concentrations following q.i.d. oral doses of 15 mg: 1.1 - 1.7 mcg/mL peak (50 minutes), and 0.2 - 0.3 mcg/mL at trough. Steady state plasma concentrations following q.i.d. oral doses of 30 mg: 2.3 - 3.5 mcg/mL peak (50 minutes), and 0.3 - 0.7 mcg/mL at trough.</p> <p>6-MNA (6-Methoxy-2-Naphthylacetic Acid) is the active metabolite of Nabumetone. Steady state plasma levels (+/- 2 s.d. of the mean) of 6-MNA following a daily oral regimen of Nabumetone: 8 - 75 mcg/mL peak levels at 3 hours following a 1000 mg dose and 1 - 50 mcg/mL trough; 50 - 115 mcg/mL peak levels at 2.5 hours following a 2000mg dose and 30 - 80 mcg/mL trough.</p> <p>Peak plasma levels following single oral dose: 300 mg: Approximately 30 mcg/mL at 0.25 to 1 hour 400 mg: Approximately 40 mcg/mL at 0.5 to 1 hour Toxic effects associated with plasma levels greater than 60 mcg/mL.</p> <p>Suggested therapeutic range: 0.4 - 6 mcg/mL Peak plasma levels following a single oral dose: 50 mg: 3.2 - 4.8 mcg/mL 100 mg: 5.5 - 10.1 mcg/mL 150 mg: 13.1 mcg/mL Average steady state plasma levels following 50 mg four times daily regimen: 1.7 - 2.3 mcg/mL.</p> <p>Anti-inflammatory or analgesic range: 30 - 90 mcg/mL.</p>

Changes effective:  
May 7, 2007

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## REFERENCE COMMENT CHANGES

Test Code	Test Name / Compound	New Reference Comment
	<ul style="list-style-type: none"><li data-bbox="261 428 444 457">• Fenoprofen</li><li data-bbox="261 579 412 609">• Etodolac</li><li data-bbox="261 705 451 735">• Flurbiprofen</li><li data-bbox="261 856 467 886">• Indomethacin</li><li data-bbox="261 953 418 982">• Ibuprofen</li><li data-bbox="261 1045 431 1075">• Diclofenac</li></ul>	<p data-bbox="821 428 1419 546">Steady state plasma levels following a 600 mg four times daily regimen: 40 - 70 mcg/mL. Peak plasma levels following a single 250 mg oral dose: 23 - 31 mcg/mL at 0.5 to 2 hours post dose.</p> <p data-bbox="821 579 1451 667">Mean Peak Plasma levels after 200 to 600 mg single oral doses range from 14 to 37 mcg/mL at 80 minutes post dose.</p> <p data-bbox="821 701 1432 819">Steady state plasma levels following a regimen of 50 mg three times daily: Approximately 2.3 mcg/mL. Peak plasma levels following a single 100 mg oral dose: 9 - 17 mcg/mL at 1.5 hours post dose.</p> <p data-bbox="821 852 1386 911">Usual analgesic range in adults: 0.5 - 3 mcg/mL. Toxicity reported at greater than 5 mcg/mL.</p> <p data-bbox="821 945 1208 1003">Therapeutic: 10 - 50 mcg/mL. Toxic: Greater than 100 mcg/mL.</p> <p data-bbox="821 1037 1445 1125">During chronic therapy with 150 mg for the treatment of arthritis, peak plasma concentrations ranged from: 0.1 - 2.2 (mean of 0.8) mcg/mL.</p>