



NMS Labs

CONFIDENTIAL

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Robert A. Middleberg, PhD, F-ABFT, DABCC-TC, Laboratory Director

Demo Report

Report Issued 03/30/2020 11:22
Last Report Issued 10/12/2018 11:30

88888
Clinical Example Report
Attn: Example Reports
200 Welsh Road
Horsham, PA 19044

Patient Name 0512B-POS
Patient ID 0512B-POS
Chain 18001441
Age Not Given **DOB** Not Given
Gender Not Given
Workorder 18001441
Received 09/25/2018 09:36

Sample ID 18001441-001
Matrix Blood
Patient Name 0512B-POS
Patient ID 0512B-POS
Container Type Clear vial

Collect Dt/Tm Not Given
Source Not Given

Approx Vol/Weight Not Given

Receipt Notes None Entered

Analysis and Comments	Result	Units	Reporting Limit	Notes
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0512B Barbiturates Screen, Blood

Analysis by Enzyme-Linked Immunosorbent Assay (ELISA)

Barbiturates	See Comment	mcg/mL	0.040	
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Comment: Based on this screening result, confirmation testing was performed. Refer to the confirmation test result(s).

This test was developed and its performance characteristics determined by NMS Labs. It has not been cleared or approved by the US Food and Drug Administration.

5651B Barbiturates Confirmation, Blood

Analysis by Gas Chromatography/Mass Spectrometry (GC/MS)

Butabarbital	25	mcg/mL	0.20	
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Synonym(s): Butisol Sodium

Plasma concentrations of 2 - 3 mcg/mL produce sedation and plasma concentrations of 25 mcg/mL produce sleep in most patients. Plasma concentrations of greater than 30 mcg/mL may produce coma and plasma concentrations in excess of 50 mcg/mL are potentially lethal.

Results for sample 18001441-001 are continued on next page



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Sample ID 18001441-001
Matrix Blood
Patient Name 0512B-POS
Patient ID 0512B-POS

Collect Dt/Tm Not Given
Source Not Given

Analysis and Comments	Result	Units	Reporting Limit	Notes
Butalbital A single oral 100 mg dose resulted in a mean peak blood concentration of 2.1 mcg/mL (range, 1.7 - 2.6 mcg/mL) at 2 hours, with a decline to 1.5 mcg/mL (range, 1.3 - 1.7 mcg/mL) by 24 hours. Potentially toxic at plasma concentrations greater than 10 mcg/mL.	25	mcg/mL	0.20	
Amobarbital Following a single oral administration of 120 mg, serum concentrations peaked at about 1.8 mcg/mL at 2 hours, and declined slowly thereafter with a half-life of approximately 24 hours. Potentially toxic at plasma concentrations greater than 9 mcg/mL.	25	mcg/mL	0.20	
Pentobarbital Peak serum concentrations of 1.2 - 3.1 mcg/mL were produced 0.5 - 2.0 hours after a 100 mg oral dose and peak serum concentrations of 3 mcg/mL were produced 6 min. following a 100 mg IV dose. Potentially toxic at blood concentrations greater than 10 mcg/mL.	25	mcg/mL	0.20	
Secobarbital Synonym(s): Seconal® A 3.3 mg/kg oral dose (approx. 230 mg/70 kg) produced a mean peak blood concentration of 2.0 mcg/mL (range, 1.8 - 2.2 mcg/mL) at 3 hours, diminishing to 1.3 mcg/mL by 20 hours and 0.8 mcg/mL by 40 hours. Potentially toxic at blood concentrations greater than 8 mcg/mL.	25	mcg/mL	0.20	
Phenobarbital Synonym(s): Luminal® Serum/plasma concentrations of 10 - 30 mcg/mL are generally considered desirable when given as an anticonvulsant. A blood/plasma ratio of 0.81 has been reported.	25	mcg/mL	0.50	

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