Effective Date: Monday, July 29, 2013



New Tests and Test Updates

Immediate Action

Modified Date: 06/13/2013

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, July 29, 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
0088B	Acetonitrile Exposure Profile, Blood			•	•				•	
0245B	Alpha PVP, Blood	•								
0245SP	Alpha PVP, Serum/Plasma	•								
0245U	Alpha PVP, Urine	•								
2626B	Bath Salts Panel, Blood				•	•	•		•	
2626SP	Bath Salts Panel, Serum/Plasma				•	•	•		•	
2626U	Bath Salts Panel, Urine				•	•	•		•	
8065B	Bath Salts Screen, Blood (Forensic)									•
8065FL	Bath Salts Screen, Fluid (Forensic)									•
8065SP	Bath Salts Screen, Serum/Plasma (Forensic)									•
8065TI	Bath Salts Screen, Tissue (Forensic)									•
8065U	Bath Salts Screen, Urine (Forensic)									•
5636B	Cyanide Confirmation, Blood				•				•	
5647B	Cyanide Confirmation, Blood (Forensic)				•				•	
9142B	Cyanide Screen, Blood			•	•				•	
1380B	Cyanide, Blood			•	•				•	
8085B	Drug Impaired Driving/DRE Toxicology Bath Salts Add-On, Blood (Forensic)									•
8085SP	Drug Impaired Driving/DRE Toxicology Bath Salts Add-On, Serum/Plasma (Forensic)									•
8085U	Drug Impaired Driving/DRE Toxicology Bath Salts Add-On, Urine (Forensic)									•
8080B	Drug Impaired Driving/DRE Toxicology N-Benzylpiperazine Add-On, Blood (Forensic)									•
8080U	Drug Impaired Driving/DRE Toxicology N-Benzylpiperazine Add-On, Urine (Forensic)									•
8103B	Environmental Exposure Screen, Blood (Forensic)			•	•				•	
8104B	Postmortem Toxicology - Fire Death Screen, Blood (Forensic)			•	•				•	
7667SP	T3 - Total, Serum/Plasma				•	•			•	
7669SP	T4 - Total, Serum/Plasma				•	•			•	
7664SP	Thyroid Hormone Panel- Total, Serum/Plasma				•	•			•	



Test Code	Test Name	New Test	Test Name	Method / CPT Code		Stability	Scope	Units	Reference Comments	Discontinue
7668SP	rT3 - Total, Serum/Plasma				•	•			•	





New Tests

0245B Alpha PVP, Blood Effective Immediately

Scope of Analysis: alpha-PVP [LC-MS/MS]

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

Purpose: Identification and Quantitation; This test is not New York State approved.

Category: Stimulant
Specimen Requirements: 1 mL Blood

Minimum Volume: 0.4 mL Special Handling: None

Specimen Container: Light Blue top tube (Sodium Citrate)

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

Stability: Room Temperature: 30 day(s)

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

Method: High Performance Liquid Chromatography/Tandem Mass Spectrometry

(LC-MS/MS)

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

CPT Code: 83789

(RS)-1-phenyl-2-(1-pyrrolidinyl)-1-

pentanone; alpha-Pyrrolidinovalerophenone

Compound Name / AliasUnitsRLalpha-PVPng/mL2.0

Alpha-Pyrrolidinovalerophenone (alpha-PVP) is a psychoactive stimulant that is structurally related to pyrovalerone and MDPV. The compound has been sold on the internet as a designer drug for the intention of recreational drug use in the form of tablets or powders to be taken orally or insufflated, respectively. It is abused for its perceived 'ecstasy like' effects of euphoria, excitement and alertness. It is claimed that alpha-PVP improves productivity, wakefulness, motivation, locomotion and endurance. In general, psychoactive stimulants have temporary effects on the psychoneurotic system. In addition, they seem to have a much higher tendency to cause side effects such as paranoia, hallucinations,

Effective Immediately

No reference blood concentration data for this compound have been reported.

and schizophrenic or psychosis like symptoms.

Reference Comment

0245SP Alpha PVP, Serum/Plasma

Scope of Analysis: alpha-PVP [LC-MS/MS]

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

Purpose: Identification and Quantitation; This test is not New York State approved.

Category: Stimulant

Specimen Requirements: 1 mL Serum or Plasma

Minimum Volume: 0.4 mL

Special Handling: Promptly centrifuge and separate Plasma into a plastic screw capped vial using approved guidelines.

Specimen Container: Light Blue top tube (Sodium Citrate)





New Tests

Transport Temperature: Refrigerated
Light Protection: Not Required

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

Stability: Room Temperature: Not Stable

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: Monday 2nd Shift 3 days (after set-up)

CPT Code: 83789

Compound Name / Alias Units RL Reference Comment

ng/mL

alpha-PVP

(RS)-1-phenyl-2-(1-pyrrolidinyl)-1-pentanone; alpha-Pyrrolidinovalerophenone

2.0

Alpha-Pyrrolidinovalerophenone (alpha-PVP) is a psychoactive stimulant that is structurally related to pyrovalerone and MDPV. The compound has been sold on the internet as a designer drug for the intention of recreational drug use in the form of tablets or powders to be taken orally or insufflated, respectively. It is abused for its perceived 'ecstasy like' effects of euphoria, excitement and alertness. It is claimed that alpha-PVP improves productivity, wakefulness, motivation, locomotion and endurance. In general, psychoactive stimulants have temporary effects on the psychoneurotic system. In addition, they seem to have a much higher tendency to cause side effects such as paranoia, hallucinations, and schizophrenic or psychosis like symptoms.

Alpha-PVP is known to have limited stability in serum and plasma which may be dependent upon pH, collection tube, and storage temperature. Results should be

interpreted with caution.

No reference serum or plasma concentration data for this compound have been reported.

0245U Alpha PVP, Urine

Effective Immediately

Scope of Analysis: alpha-PVP [LC-MS/MS]

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

Purpose: Identification and Quantitation; This test is not New York State approved.

Category: Stimulant
Specimen Requirements: 1 mL Urine

Minimum Volume: 0.4 mL
Special Handling: None

Specimen Container: Plastic container (preservative-free)

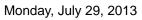
None

Transport Temperature: Refrigerated
Light Protection: Not Required

Rejection Criteria:

Stability: Room Temperature: 30 day(s)

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





New Tests

Method: High Performance Liquid Chromatography/Tandem Mass Spectrometry

(LC-MS/MS)

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

CPT Code: 83789

Compound Name / Alias Units RL **Reference Comment** alpha-PVP ng/mL 2.0

(RS)-1-phenyl-2-(1-pyrrolidinyl)-1-

pentanone; alpha-Pyrrolidinovalerophenone

Alpha-Pyrrolidinovalerophenone (alpha-PVP) is a psychoactive stimulant that is structurally related to pyrovalerone and MDPV. The compound has been sold on the internet as a designer drug for the intention of recreational drug use in the form of tablets or powders to be taken orally or insufflated, respectively. It is abused for its perceived ' ecstasy like' effects of euphoria, excitement and alertness. It is claimed that alpha-PVP improves productivity, wakefulness, motivation, locomotion and endurance. In general, psychoactive stimulants have temporary effects on the psychoneurotic system. In addition, they seem to have a much higher tendency to cause side effects such as paranoia, hallucinations, and schizophrenic or psychosis like symptoms.





Test Changes

0088B Acetonitrile Exposure Profile, Blood

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

Specimen Requirements (Special Handling) were changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (82600)]

Specimen Requirements: 3 mL Blood
Transport Temperature: Refrigerated

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

Light Protection: Not Required

Special Handling: Collect sample using alcohol free skin preparation.

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 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) Headspace GC (82000): Acetaldehyde, Acetone

Compound Name	Units	Reference Comment
Cyanide	mcg/mL	Normal: Up to 0.05 mcg/mL
	_	Potentially toxic: 0.50 mcg/mL and greater
		Potentially lethal: 2.0 mcg/mL and greater

2626B Bath Salts Panel, Blood

Summary of Changes: Specimen Requirements were changed.

Specimen Requirements (Specimen Container) were changed.

Stability was changed.

Scope of Analysis was changed.

Pentedrone, DMAA and alpha-PVP were added.

Reference Comment was changed.

Mephedrone was removed.

Specimen Requirements: 2 mL Blood Transport Temperature: Refrigerated

Specimen Container: Lavender top tube (EDTA), Light Blue top tube (Sodium Citrate)

Light Protection: Not Required

Special Handling: None

Rejection Criteria: Received Room Temperature.



Test Changes

Stability: Room Temperature: 1 day(s)

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

This test contains multiple compounds with variable stability in some individual biological specimens. This variation may be dependent upon pH, collection tube, and storage temperature. Negative results should be interpreted with caution. For more information on stability of a specific compound, please contact the laboratory.

NOTE: Due to the nature of this test, samples received at room temperature will not

be rejected.

Scope of Analysis: LC-MS/MS (83789): Methylone, alpha-PVP, Pentedrone, MDPV

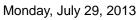
Method (CPT Code) LC-MS/MS (83789): DMAA

Compound Name	Units	Reference Comment
DMAA	ng/mL	DMAA is a simple aliphatic amine which is believed to have stimulant properties mediated through the promotion of catecholamine release. This compound is sold as a nutritional supplement in the United States. DMAA use has been linked to at least two deaths, although blood drug concentrations are not available.
Methylone	ng/mL	Methylone is a methylenedioxy beta keto amphetamine, or cathinone stimulant drug. It is the beta-keto analog of MDMA. Its use has been linked to the popular Designer Drug' movement, and may be present in products sold as 'Legal High' or 'Bath Salts' for recreational purposes. Methylone acts as an inhibitor of dopamine, norepinephrine and serotonin reuptake and may have stimulating effects on the central nervous system. The drug is usually taken orally, but can also be insufflated or vaporized.
		Euphoria, agitation, sweating, nausea, vomiting, dilated pupils, seizures, hyponatremia and confusion were reported in two cases after the use of bath salt products found to contain methylone. Other substances may have been present.
		Four fatalities attributed to this drug had methylone heart blood concentrations of 60-1100 ng/mL; concentrations in femoral blood in three fatalities were 560, 840 and 3300 ng/mL.
		Methylone is known to have limited stability in blood which may be dependent upon pH, collection tube, and storage temperature. Results should be interpreted with caution.



Test Changes

Compound Name	Units	Reference Comment
alpha-PVP	ng/mL	Alpha-Pyrrolidinovalerophenone (alpha-PVP) is a psychoactive stimulant that is structurally related to pyrovalerone and MDPV. The compound has been sold on the internet as a designer drug for the intention of recreational drug use in the form of tablets or powders to be taken orally or insufflated, respectively. It is abused for its perceived 'ecstasy like' effects of euphoria, excitement and alertness. It is claimed that alpha-PVP improves productivity, wakefulness, motivation, locomotion and endurance. In general, psychoactive stimulants have temporary effects on the psychoneurotic system. In addition, they seem to have a much higher tendency to cause side effects such as paranoia, hallucinations, and schizophrenic or psychosis like symptoms.
Pentedrone	ng/mL	this compound have been reported. Pentedrone is a beta keto amphetamine or cathinone that is chemically related to mephedrone. It is a stimulant drug that was first reported in 2010. Its use has been linked to the popular 'Designer Drug' movement and may be present in products sold as 'Legal Highs' or Bath Salts' for recreational purposes. The drug is usually taken orally, but can also be insufflated or vaporized.
		No reference blood concentration data for this compound have been reported. Pentedrone is known to have limited stability in blood which may be dependent upon pH, collection tube, and storage temperature. Results should be interpreted with caution.
MDPV	(ng/mL)	MDPV is a synthetic stimulant drug reported to have effects similar to methylphenidate at low doses and cocaine at high doses. Desired outcomes following use include increased energy and sociability, increased concentration, psychedelic effects and sexual stimulation.
		Reported adverse effects include insomnia, severe agitation/anxiety, panic attacks, kidney pain, stomach cramps, tachycardia, hypertension, dilated pupils, headache, tinnitus and peripheral neuropathies and dizziness. Use of MDPV has been linked to the popular Designer Drug' movement and may be present in products





Test Changes

Compound Name Units Reference Comment

sold as 'Legal High' or 'Bath Salts' for recreational purposes. The drug is usually taken orally, but can also be insufflated or vaporized.

Blood concentrations in 17 fatalities were 10 - 5000 ng/mL. Blood concentrations in 9 cases of drivers exhibiting signs of impairment were 6 - 360 ng/ml; other impairing drugs were often found in conjuction with MDPV.

2626SP Bath Salts Panel, Serum/Plasma

Summary of Changes: Specimen Requirements were changed.

Specimen Requirements (Specimen Container) were changed.

Stability was changed.

Scope of Analysis was changed.

DMAA, alpha-PVP and Pentedrone were added.

Reference Comment was changed.

Mephedrone was removed.

Specimen Requirements: 2 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Light Blue top tube (Sodium Citrate), Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: Serum is not recommended because the citrate anticoagulant is needed to enhance

stability.

Plasma: Collect sample in Light Blue top tube (Sodium Citrate)

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

approved guidelines.

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

Stability: Room Temperature: Not Stable

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

This test contains multiple compounds with variable stability in some individual biological specimens. This variation may be dependent upon pH, collection tube, and storage temperature. Negative results should be interpreted with caution. For more information on stability of a specific compound, please contact the laboratory.

NOTE: Due to the nature of this test, samples received at room temperature will not

be rejected.

Scope of Analysis: LC-MS/MS (83789): Methylone, alpha-PVP, Pentedrone, MDPV

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



Test Changes

Compound Name	Units	Reference Comment
DMAA	ng/mL	DMAA is a simple aliphatic amine which is believed to have stimulant properties mediated through the promotion of catecholamine release. This compound is sold as a nutritional supplement in the United States. DMAA use has been linked to at least two deaths, although serum or plasma drug concentrations are not available.
Methylone	ng/mL	Methylone is a methylenedioxy beta keto amphetamine, or cathinone stimulant drug. It is the beta-keto analog of MDMA. Its use has been linked to the popular Designer Drug' movement, and may be present in products sold as 'Legal High' or 'Bath Salts' for recreational purposes. Methylone acts as an inhibitor of dopamine, norepinephrine and serotonin reuptake and may have stimulating effects on the central nervous system. The drug is usually taken orally, but can also be insufflated or vaporized.
		Euphoria, agitation, sweating, nausea, vomiting, dilated pupils, seizures, hyponatremia and confusion were reported in two cases after the use of bath salt products found to contain methylone. Other substances may have been present.
		Four fatalities attributed to this drug had methylone heart blood concentrations of 60-1100 ng/mL; concentrations in femoral blood in three fatalities were 560, 840 and 3300 ng/mL.
		Methylone is known to have limited stability in blood which may be dependent upon pH, collection tube, and storage temperature. Results should be interpreted with caution.
		The ratio of whole blood concentration to serum or plasma concentration is unknown for this analyte.
alpha-PVP	ng/mL	Alpha-Pyrrolidinovalerophenone (alpha-PVP) is a psychoactive stimulant that is structurally related to pyrovalerone and MDPV. The compound has been sold on the internet as a designer drug for the intention of recreational drug use in the form of tablets or powders to be taken orally or insufflated, respectively. It is abused for its perceived 'ecstasy like' effects of euphoria, excitement and alertness. It is claimed that alpha-PVP improves productivity, wakefulness, motivation, locomotion and endurance. In general, psychoactive stimulants have



Test Changes

Compound Name	Units	Reference Comment
		temporary effects on the psychoneurotic system. In addition, they seem to have a much higher tendency to cause side effects such as paranoia, hallucinations, and schizophrenic or psychosis like symptoms.
		Alpha-PVP is known to have limited stability in serum and plasma which may be dependent upon pH, collection tube, and storage temperature. Results should be interpreted with caution.
		No reference serum or plasma concentration data for this compound have been reported.
Pentedrone	ng/mL	Pentedrone is a beta keto amphetamine or cathinone that is chemically related to mephedrone. It is a stimulant drug that was first reported in 2010. Its use has been linked to the popular 'Designer Drug' movement and may be present in products sold as 'Legal Highs' or Bath Salts' for recreational purposes. The drug is usually taken orally, but can also be insufflated or vaporized.
		No reference serum or plasma concentration data for this compound have been reported.
		Pentedrone is known to have limited stability in serum and plasma which may be dependent upon pH, collection tube, and storage temperature. Results should be interpreted with caution.
MDPV	ng/mL	MDPV is a synthetic stimulant drug reported to have effects similar to methylphenidate at low doses and cocaine at high doses. Desired outcomes following use include increased energy and sociability, increased concentration, psychedelic effects and sexual stimulation.
		Reported adverse effects include insomnia, severe agitation/anxiety, panic attacks, kidney pain, stomach cramps, tachycardia, hypertension, dilated pupils, headache, tinnitus and peripheral neuropathies and dizziness. Use of MDPV has been linked to the popular Designer Drug' movement and may be present in products sold as 'Legal High' or 'Bath Salts' for recreational purposes. The drug is usually taken orally, but can also be insufflated or vaporized.
		Blood concentrations in 17 fatalities were 10 - 5000 ng/mL. Blood concentrations in 9 cases of



Test Changes

Compound Name

Units

Reference Comment

drivers exhibiting signs of impairment were 6 - 360 ng/ml; other impairing drugs were often found in conjuction with MDPV.

MDPV is known to have limited stability in serum and plasma which may be dependent upon pH, collection tube, and storage temperature. Negative results should be interpreted with caution.

The ratio of whole blood concentration to serum or plasma concentration is unknown for this analyte.

2626U Bath Salts Panel, Urine

Summary of Changes: Specimen Requirements were changed.

Stability was changed.

Scope of Analysis was changed.

DMAA, alpha-PVP and Pentedrone were added.

Reference Comment was changed.

Mephedrone was removed.

Specimen Requirements: 2 mL Urine
Transport Temperature: Refrigerated

Specimen Container: Plastic container (preservative-free)

Light Protection: Not Required

Special Handling: None

Rejection Criteria: Received Room Temperature.

Stability: Room Temperature: 1 day(s)

Refrigerated: 14 day(s) Frozen (-20 °C): 28 day(s)

This test contains multiple compounds with variable stability in some individual biological specimens. This variation may be dependent upon pH, collection tube, and storage temperature. Negative results should be interpreted with caution. For more information on stability of a specific compound, please contact the laboratory.

NOTE: Due to the nature of this test, samples received at room temperature will not

be rejected.

Scope of Analysis: LC-MS/MS (83789): Methylone, alpha-PVP, Pentedrone, MDPV

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



Test Changes

Compound Name	Units	Reference Comment
DMAA	ng/mL	DMAA is a simple aliphatic amine which is believed to have stimulant properties mediated through the promotion of catecholamine release. This compound is sold as a nutritional supplement in the United States. DMAA use has been linked to at least two deaths.
Methylone	ng/mL	Methylone is a methylenedioxy beta keto amphetamine, or cathinone stimulant drug. It is the beta-keto analog of MDMA. Its use has been linked to the popular Designer Drug' movement, and may be present in products sold as 'Legal High' or 'Bath Salts' for recreational purposes. Methylone acts as an inhibitor of dopamine, norepinephrine and serotonin reuptake and may have stimulating effects on the central nervous system. The drug is usually taken orally, but can also be insufflated or vaporized.
		Euphoria, agitation, sweating, nausea, vomiting, dilated pupils, seizures, hyponatremia and confusion were reported in two cases after the use of bath salt products found to contain methylone. Other substances may have been present.
		Methylone is known to have limited stability in urine which may be dependent upon pH, collection tube, and storage temperature. Results should be interpreted with caution.
alpha-PVP	ng/mL	Alpha-Pyrrolidinovalerophenone (alpha-PVP) is a psychoactive stimulant that is structurally related to pyrovalerone and MDPV. The compound has been sold on the internet as a designer drug for the intention of recreational drug use in the form of tablets or powders to be taken orally or insufflated, respectively. It is abused for its perceived 'ecstasy like' effects of euphoria, excitement and alertness. It is claimed that alpha-PVP improves productivity, wakefulness, motivation, locomotion and endurance. In general, psychoactive stimulants have temporary effects on the psychoneurotic system. In addition, they seem to have a much higher tendency to cause side effects such as paranoia, hallucinations, and schizophrenic or psychosis like symptoms.



Test Changes

Compound Name	Units	Reference Comment
Pentedrone	ng/mL	Pentedrone is a beta keto amphetamine or cathinone that is chemically related to mephedrone. It is a stimulant drug that was first reported in 2010. Its use has been linked to the popular 'Designer Drug' movement and may be present in products sold as 'Legal Highs' or Bath Salts' for recreational purposes. The drug is usually taken orally, but can also be insufflated or vaporized.
		Pentedrone is known to have limited stability in urine which may be dependent upon pH, collection tube, and storage temperature. Results should be interpreted with caution.
MDPV	ng/mL)	MDPV is a synthetic stimulant drug reported to have effects similar to methylphenidate at low doses and cocaine at high doses. Desired outcomes following use include increased energy and sociability, increased concentration, psychedelic effects and sexual stimulation.
		Reported adverse effects include insomnia, severe agitation/anxiety, panic attacks, kidney pain, stomach cramps, tachycardia, hypertension, dilated pupils, headache, tinnitus and peripheral neuropathies and dizziness. Use of MDPV has been linked to the popular Designer Drug' movement and may be present in products sold as 'Legal High' or 'Bath Salts' for recreational purposes. The drug is usually taken orally, but can also be insufflated or vaporized.

5647B Cyanide Confirmation, Blood (Forensic)

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

Specimen Requirements (Special Handling) were changed.

Reference Comment was changed.

Specimen Requirements: 2 mL Blood
Transport Temperature: Refrigerated

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

Light Protection: Not Required

Special Handling: 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: None

Scope of Analysis: MD (82600): Cyanide

Method (CPT Code)

Compound Name	Units	Reference Comment
Cyanide	mcg/mL	Normal: Up to 0.05 mcg/mL
		Potentially toxic: 0.50 mcg/mL and greater
		Potentially lethal: 2.0 mcg/mL and greater

5636B Cyanide Confirmation, Blood

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

Specimen Requirements (Special Handling) were changed.

Reference Comment was changed.

Specimen Requirements: 2 mL Blood
Transport Temperature: Refrigerated

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

Light Protection: Not Required

Special Handling: 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 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: MD (80102): Cyanide

Method (CPT Code)

Compound Name	Units	Reference Comment
Cyanide	mcg/mL	Normal: Up to 0.05 mcg/mL Potentially toxic: 0.50 mcg/mL and greater Potentially lethal: 2.0 mcg/mL and greater

9142B Cyanide Screen, Blood



Test Changes

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

Specimen Requirements (Special Handling) were changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (82600)]

Specimen Requirements: 3 mL Blood
Transport Temperature: Refrigerated

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

Light Protection: Not Required

Special Handling: 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 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)

Compound Name	Units	Reference Comment
Cyanide	mcg/mL	Normal: Up to 0.05 mcg/mL
		Potentially toxic: 0.50 mcg/mL and greater
		Potentially lethal: 2.0 mcg/mL and greater

1380B Cyanide, Blood

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

Specimen Requirements (Special Handling) were changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (82600)]

Specimen Requirements: 2 mL Blood
Transport Temperature: Refrigerated

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

Light Protection: Not Required

Special Handling: 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



Monday, July 29, 2013

New Tests and Test Updates

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: None

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

Method (CPT Code)

Compound Name	Units	Reference Comment
Cyanide	mcg/mL	Normal: Up to 0.05 mcg/mL Potentially toxic: 0.50 mcg/mL and greater
		Potentially lethal: 2.0 mcg/mL and greater

8103B **Environmental Exposure Screen, Blood (Forensic)**

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

Specimen Requirements (Special Handling) were changed.

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (82600)]

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)

Not Required Light Protection:

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

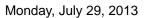
previously thawed.

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).





Test Changes

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

Normal: Up to 0.05 mcg/mL
Potentially toxic: 0.50 mcg/mL and greater
Potentially lethal: 2.0 mcg/mL and greater

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

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

Reference Comment was changed.

Methods/CPT Codes were changed [LC-MS/MS (82600)]

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: 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 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





Test Changes

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 Name	Units	Reference Comment
Cyanide	mcg/mL	Normal: Up to 0.05 mcg/mL
-	_	Potentially toxic: 0.50 mcg/mL and greater
		Potentially lethal: 2.0 mcg/mL and greater

7667SP T3 - Total, Serum/Plasma

Summary of Changes: Specimen Requirements (Rejection Criteria) were changed.

Stability was changed.

Reference Comment was changed.

Specimen Requirements: 1 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Green top tube (Sodium Heparin), Red top tube (no additive)

Light Protection: Not Required

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

using approved guidelines.

Rejection Criteria: Received Room Temperature.

Stability: Room Temperature: 3 day(s)

Refrigerated: 23 day(s) Frozen (-20 °C): 23 day(s)

Scope of Analysis: LC-MS/MS (84480): T3 - Total

Method (CPT Code)

Compound Name	Units	Reference Comment	
T3 - Total	ng/dL	Reference Intervals Age 18 years and above: 70 - 154 ng/dL	

7669SP T4 - Total, Serum/Plasma

Summary of Changes: Specimen Requirements (Rejection Criteria) were changed.

Stability was changed.

Reference Comment was changed.



Test Changes

Specimen Requirements: 1 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Green top tube (Sodium Heparin), Red top tube (no additive)

Light Protection: Not Required

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

using approved guidelines.

Rejection Criteria: Received Room Temperature.

Stability: Room Temperature: 3 day(s)

Refrigerated: 23 day(s) Frozen (-20 °C): 23 day(s)

Scope of Analysis: LC-MS/MS (84436): T4 - Total

Method (CPT Code)

Compound Name	Units	Reference Comment	
T4 - Total	mcg/dL	Reference Intervals Age 18 years and above:	
		4.8 - 11 mca/dL	

7664SP Thyroid Hormone Panel- Total, Serum/Plasma

Summary of Changes: Specimen Requirements (Rejection Criteria) were changed.

Stability was changed.

Reference Comment was changed.

Specimen Requirements: 1 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Green top tube (Sodium Heparin), Red top tube (no additive)

Light Protection: Not Required

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

using approved guidelines.

Rejection Criteria: Received Room Temperature.

Stability: Room Temperature: 3 day(s)

Refrigerated: 23 day(s) Frozen (-20 °C): 23 day(s)

Scope of Analysis: LC-MS/MS (83789): T3 - Total, rT3 - Total, T4 - Total

Method (CPT Code)

Compound Name	Units	Reference Comment
T3 - Total	ng/dL	Reference Intervals Age 18 years and above: 70 - 154 ng/dL
rT3 - Total	ng/dL	Reference Intervals Age 18 years and above: 7.5 - 19 ng/dL
T4 - Total	mcg/dL	Reference Intervals Age 18 years and above: 4.8 - 11 mcg/dL



Test Changes

7668SP rT3 - Total, Serum/Plasma

> Specimen Requirements (Rejection Criteria) were changed. Summary of Changes:

> > Stability was changed.

Reference Comment was changed.

Specimen Requirements: 1 mL Serum or Plasma

Transport Temperature: Refrigerated

Specimen Container: Green top tube (Sodium Heparin), Red top tube (no additive)

Light Protection: Not Required

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

using approved guidelines.

Received Room Temperature. Rejection Criteria:

> Stability: Room Temperature: 3 day(s)

Refrigerated: 23 day(s) Frozen (-20 °C): 23 day(s)

Scope of Analysis:

LC-MS/MS (84482): rT3 - Total Method (CPT Code)

Compound Name	Units	Reference Comment	
rT3 - Total	ng/dL	Reference Intervals Age 18 years and above: 7.5 - 19 ng/dL	



Discontinued Tests

Test Code	Test Name	Alternative Test
8065B	Bath Salts Screen, Blood (Forensic)	8756B - Bath Salts and Stimulants Designer
		Drugs - Expanded, Blood
8065FL	Bath Salts Screen, Fluid (Forensic)	No Alternate Tests Available
8065SP	Bath Salts Screen, Serum/Plasma (Forensic)	8756SP - Bath Salts and Stimulants Designer
		Drugs - Expanded, Serum/Plasma
8065TI	Bath Salts Screen, Tissue (Forensic)	No Alternate Tests Available
8065U	Bath Salts Screen, Urine (Forensic)	8756U - Bath Salts and Stimulants Designer
		Drugs - Expanded, Urine
8085B	Drug Impaired Driving/DRE Toxicology Bath	8075B - Drug Impaired Driving/DRE Toxicology
	Salts Add-On, Blood (Forensic)	Expanded Drug Screen Add-On, Blood
		(Forensic)
8085SP	Drug Impaired Driving/DRE Toxicology Bath	8075SP - Drug Impaired Driving/DRE
	Salts Add-On, Serum/Plasma (Forensic)	Toxicology Expanded Drug Screen Add-On,
		Serum/Plasma (Forensic)
8085U	Drug Impaired Driving/DRE Toxicology Bath	8075U - Drug Impaired Driving/DRE Toxicology
	Salts Add-On, Urine (Forensic)	Expanded Drug Screen Add-On, Urine
		(Forensic)
8080B	Drug Impaired Driving/DRE Toxicology N-	8756B - Bath Salts and Stimulants Designer
	Benzylpiperazine Add-On, Blood (Forensic)	Drugs - Expanded, Blood
8080U	Drug Impaired Driving/DRE Toxicology N-	8756U - Bath Salts and Stimulants Designer
	Benzylpiperazine Add-On, Urine (Forensic)	Drugs - Expanded, Urine