



Effective Date:

Monday, January 07, 2013

New Tests and Test Updates

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, January 07, 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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Test Code	Test Name	New Test	Test Name	Method / CPT Code	Specimen Req.	Stability	Scope	Units	Reference Comments	Discontinue
0337ME	Amphetamines Screen, Meconium									•
8620ST	Barbiturates Panel (Qualitative), Stool									•
0512ME	Barbiturates Screen, Meconium									•
0512ST	Barbiturates Screen, Stool									•
0542U	Benzene Incident, Urine (OSHA)				•					
0568ME	Benzodiazepines Screen, Meconium									•
0960ST	Cannabinoids Panel (Qualitative), Stool									•
9356ME	Cannabinoids Screen, Meconium									•
9356ST	Cannabinoids Screen, Stool									•
5479B	Carisoprodol and Metabolite Confirmation, Blood			•	•					
52017B	Carisoprodol and Metabolite Confirmation, Blood (Forensic)			•	•					
53017B	Carisoprodol and Metabolite Confirmation, Blood (Forensic)			•	•					
5479FL	Carisoprodol and Metabolite Confirmation, Fluid			•	•					
52017FL	Carisoprodol and Metabolite Confirmation, Fluid (Forensic)			•	•					
53017FL	Carisoprodol and Metabolite Confirmation, Fluid (Forensic)			•	•					
5479SP	Carisoprodol and Metabolite Confirmation, Serum/Plasma			•	•					
52017SP	Carisoprodol and Metabolite Confirmation, Serum/Plasma (Forensic)			•	•					
53017SP	Carisoprodol and Metabolite Confirmation, Serum/Plasma (Forensic)			•	•					
5479TI	Carisoprodol and Metabolite Confirmation, Tissue			•	•					
52017TI	Carisoprodol and Metabolite Confirmation, Tissue (Forensic)			•	•					
53017TI	Carisoprodol and Metabolite Confirmation, Tissue (Forensic)			•	•					
9129B	Carisoprodol and Metabolite Screen, Blood			•	•					
9129FL	Carisoprodol and Metabolite Screen, Fluid			•	•					
9129SP	Carisoprodol and Metabolite Screen, Serum/Plasma			•	•					
9129TI	Carisoprodol and Metabolite Screen, Tissue			•	•					
1030B	Carisoprodol and Metabolite, Blood			•	•					



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Test Code	Test Name	New Test	Test Name	Method / CPT Code	Specimen Req.	Stability	Scope	Units	Reference Comments	Discontinue
1030FL	Carisoprodol and Metabolite, Fluid			•	•					
1030SP	Carisoprodol and Metabolite, Serum/Plasma			•	•					
1030TI	Carisoprodol and Metabolite, Tissue			•	•					
1300ST	Cocaine and Metabolites (Qualitative), Stool									•
0606ME	Cocaine and Metabolites Screen, Meconium									•
9156U	Dimethyltryptamine Screen, Urine				•					
1693U	Dimethyltryptamine, Urine				•					
54217B	Drug Impaired Driving/DRE Toxicology Carisoprodol and Metabolite Confirmation, Blood (Forensic)			•	•					
54217SP	Drug Impaired Driving/DRE Toxicology Carisoprodol and Metabolite Confirmation, Serum/Plasma (Forensic)			•	•					
1864ST	Drugs of Abuse Screen (9 Panel), Stool									•
2375B	Hypnotosedatives Screen, Blood									•
2557U	Mandelic Acid, Urine									•
52261U	Meperidine and Metabolite Confirmation, Urine (CSA)			•	•					
5571B	Meprobamate Confirmation, Blood			•	•					
5571SP	Meprobamate Confirmation, Serum/Plasma			•	•					
5571TI	Meprobamate Confirmation, Tissue			•	•					
9442B	Meprobamate Screen, Blood			•	•					
9442SP	Meprobamate Screen, Serum/Plasma			•	•					
9442TI	Meprobamate Screen, Tissue			•	•					
2650B	Meprobamate, Blood			•	•					
8741B	Meprobamate, Blood (Forensic)									•
2650SP	Meprobamate, Serum/Plasma			•	•					
9324ME	Methadone Screen, Meconium									•
8722ST	Methadone and Metabolite (Qualitative), Stool									•
9293ME	Methylenedioxymethamphetamine and Metabolite Screen, Meconium									•



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Test Code	Test Name	New Test	Test Name	Method / CPT Code	Specimen Req.	Stability	Scope	Units	Reference Comments	Discontinue
3078U	Mitragynine and Metabolite (Qualitative), Urine	•								
3236ME	Opiates Screen, Meconium									•
3532ME	Phencyclidine Screen, Meconium									•
9334ME	Propoxyphene Screen, Meconium									•
4130B	Salicylamide, Blood									•
4130SP	Salicylamide, Serum/Plasma									•
4130U	Salicylamide, Urine									•
7665SP	T1-AM - Total, Serum/Plasma				•					
7666SP	T2 - Total, Serum/Plasma				•					
7667SP	T3 - Total, Serum/Plasma				•					
7669SP	T4 - Total, Serum/Plasma				•					
7663SP	Thyroid Panel 1 - Total, Serum/Plasma				•					
7664SP	Thyroid Panel 2 - Total, Serum/Plasma				•					
4626U	Trichloro-organic Metabolites, Urine									•
3132SP	Vitamin A, Serum/Plasma									•
4779SP	Vitamin E, Serum/Plasma									•
7668SP	rT3 - Total, Serum/Plasma				•					



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New Tests

3078U	Mitragynine and Metabolite (Qualitative), Urine	Effective Immediately
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Scope of Analysis: 7-Hydroxymitragynine [LC-MS/MS], Mitragynine [LC-MS/MS]
 Method(s): High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS)
 Purpose: N/A
 Category: Stimulant
 Specimen Requirements: 2 mL Urine
 Minimum Volume: 0.7 mL
 Special Handling: None
 Specimen Container: Plastic container (preservative-free)
 Transport Temperature: Refrigerated
 Light Protection: Not Required
 Rejection Criteria: None
 Stability: Room Temperature: Undetermined
 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 5 days (after set-up)

CPT Code: 83789

Compound Name / Alias	Units	RL	Reference Comment
7-Hydroxymitragynine Kratom Metabolite; Mitragynine Metabolite	ng/mL	10	
Mitragynine Kratom	ng/mL	10	



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Test Changes

5242U Benzene Incident, Urine (OSHA)

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

Specimen Requirements: 2 mL Urine
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: Notify NMS Labs prior to submitting sample(s).
Collect sample at end of shift. Samples must include collection date/time and be received at NMS Labs within 48 hrs of collection.
Samples preserved with Benzoic Acid are unsuitable for analysis. Preservative-free Urine samples are recommended.
Rejection Criteria: Received Room Temperature.

52017B Carisoprodol and Metabolite Confirmation, Blood (Forensic)

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (82542)]

Specimen Requirements: 2 mL Blood
Transport Temperature: Refrigerated
Specimen Container: Lavender top tube (EDTA)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (82542): Carisoprodol, Meprobamate
Method (CPT Code)

53017B Carisoprodol and Metabolite Confirmation, Blood (Forensic)

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (82542)]

Specimen Requirements: 2 mL Blood
Transport Temperature: Refrigerated
Specimen Container: Lavender top tube (EDTA)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (82542): Carisoprodol, Meprobamate
Method (CPT Code)

5479B Carisoprodol and Metabolite Confirmation, Blood



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Test Changes

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (82542)]

Specimen Requirements: 2 mL Blood
Transport Temperature: Refrigerated
Specimen Container: Lavender top tube (EDTA)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (82542): Carisoprodol, Meprobamate
Method (CPT Code)

52017FL Carisoprodol and Metabolite Confirmation, Fluid (Forensic)

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (82542)]

Specimen Requirements: 5 mL Fluid
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (82542): Carisoprodol, Meprobamate
Method (CPT Code)

53017FL Carisoprodol and Metabolite Confirmation, Fluid (Forensic)

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (82542)]

Specimen Requirements: 5 mL Fluid
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (82542): Carisoprodol, Meprobamate
Method (CPT Code)

5479FL Carisoprodol and Metabolite Confirmation, Fluid



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Test Changes

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (82542)]

Specimen Requirements: 5 mL Fluid
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (82542): Carisoprodol, Meprobamate
Method (CPT Code)

52017SP Carisoprodol and Metabolite Confirmation, Serum/Plasma (Forensic)

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Specimen Requirements (Special Handling) were changed.
Methods/CPT Codes were changed [GC/MS (82542)]

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).
Scope of Analysis: GC/MS (82542): Carisoprodol, Meprobamate
Method (CPT Code)

53017SP Carisoprodol and Metabolite Confirmation, Serum/Plasma (Forensic)

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Specimen Requirements (Special Handling) were changed.
Methods/CPT Codes were changed [GC/MS (82492)]



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Test Changes

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).
Scope of Analysis: GC/MS (82492): Carisoprodol, Meprobamate
Method (CPT Code)

5479SP Carisoprodol and Metabolite Confirmation, Serum/Plasma

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Specimen Requirements (Special Handling) were changed.
Methods/CPT Codes were changed [GC/MS (82542)]

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).
Scope of Analysis: GC/MS (82542): Carisoprodol, Meprobamate
Method (CPT Code)

52017TI Carisoprodol and Metabolite Confirmation, Tissue (Forensic)

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (80103, 82542)]

Specimen Requirements: 10 g Tissue
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (80103, 82542): Carisoprodol, Meprobamate
Method (CPT Code)



New Tests and Test Updates

Test Changes

53017TI Carisoprodol and Metabolite Confirmation, Tissue (Forensic)

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (80103, 82542)]

Specimen Requirements: 10 g Tissue
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (80103, 82542): Carisoprodol, Meprobamate
Method (CPT Code)

5479TI Carisoprodol and Metabolite Confirmation, Tissue

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (80103, 82542)]

Specimen Requirements: 10 g Tissue
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (80103, 82542): Carisoprodol, Meprobamate
Method (CPT Code)

9129B Carisoprodol and Metabolite Screen, Blood

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (80100)]

Specimen Requirements: 3 mL Blood
Transport Temperature: Refrigerated
Specimen Container: Lavender top tube (EDTA)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (80100): Carisoprodol, Meprobamate
Method (CPT Code)

9129FL Carisoprodol and Metabolite Screen, Fluid



New Tests and Test Updates

Test Changes

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (80100)]

Specimen Requirements: 7 mL Fluid
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (80100): Carisoprodol, Meprobamate
Method (CPT Code)

9129SP Carisoprodol and Metabolite Screen, Serum/Plasma

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Specimen Requirements (Special Handling) were changed.
Methods/CPT Codes were changed [GC/MS (80100)]

Specimen Requirements: 3 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).
Scope of Analysis: GC/MS (80100): Carisoprodol, Meprobamate
Method (CPT Code)

9129TI Carisoprodol and Metabolite Screen, Tissue

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (80103, 80100)]

Specimen Requirements: 10 g Tissue
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (80103, 80100): Carisoprodol, Meprobamate
Method (CPT Code)



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Test Changes

1030B Carisoprodol and Metabolite, Blood

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (82542)]

Specimen Requirements: 2 mL Blood
Transport Temperature: Refrigerated
Specimen Container: Lavender top tube (EDTA)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (82542): Carisoprodol, Meprobamate
Method (CPT Code)

1030FL Carisoprodol and Metabolite, Fluid

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (82542)]

Specimen Requirements: 5 mL Fluid
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (82542): Carisoprodol, Meprobamate
Method (CPT Code)

1030SP Carisoprodol and Metabolite, Serum/Plasma

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Specimen Requirements (Special Handling) were changed.
Methods/CPT Codes were changed [GC/MS (82542)]

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).



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Test Changes

Scope of Analysis: GC/MS (82542): Carisoprodol, Meprobamate
Method (CPT Code)

1030TI Carisoprodol and Metabolite, Tissue

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (80103, 82542)]

Specimen Requirements: 10 g Tissue
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (80103, 82542): Carisoprodol, Meprobamate
Method (CPT Code)

9156U Dimethyltryptamine Screen, Urine

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

Specimen Requirements: 3 mL Urine
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None

1693U Dimethyltryptamine, Urine

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

Specimen Requirements: 2 mL Urine
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None

54217B Drug Impaired Driving/DRE Toxicology Carisoprodol and Metabolite Confirmation, Blood (Forensic)



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Test Changes

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (82542)]

Specimen Requirements: 2 mL Blood
Transport Temperature: Refrigerated
Specimen Container: Lavender top tube (EDTA)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (82542): Carisoprodol, Meprobamate
Method (CPT Code)

54217SP Drug Impaired Driving/DRE Toxicology Carisoprodol and Metabolite Confirmation, Serum/Plasma (Forensic)

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Specimen Requirements (Special Handling) were changed.
Methods/CPT Codes were changed [GC/MS (82542)]

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).
Scope of Analysis: GC/MS (82542): Carisoprodol, Meprobamate
Method (CPT Code)

52261U Meperidine and Metabolite Confirmation, Urine (CSA)

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (83788)]

Specimen Requirements: 2 mL Urine
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None



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Test Changes

Scope of Analysis: GC/MS (83788): Meperidine, Normeperidine
Method (CPT Code)

5571B Meprobamate Confirmation, Blood

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (82542)]

Specimen Requirements: 2 mL Blood
Transport Temperature: Refrigerated
Specimen Container: Lavender top tube (EDTA)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (82542): Meprobamate
Method (CPT Code)

5571SP Meprobamate Confirmation, Serum/Plasma

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Specimen Requirements (Special Handling) were changed.
Methods/CPT Codes were changed [GC/MS (82542)]

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).
Scope of Analysis: GC/MS (82542): Meprobamate
Method (CPT Code)

5571TI Meprobamate Confirmation, Tissue

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (80103, 82542)]



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Test Changes

Specimen Requirements: 10 g Tissue
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (80103, 82542): Meprobamate
Method (CPT Code)

9442B Meprobamate Screen, Blood

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (80100)]

Specimen Requirements: 3 mL Blood
Transport Temperature: Refrigerated
Specimen Container: Lavender top tube (EDTA)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (80100): Meprobamate
Method (CPT Code)

9442SP Meprobamate Screen, Serum/Plasma

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Specimen Requirements (Special Handling) were changed.
Methods/CPT Codes were changed [GC/MS (80100)]

Specimen Requirements: 3 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).
Scope of Analysis: GC/MS (80100): Meprobamate
Method (CPT Code)

9442TI Meprobamate Screen, Tissue



New Tests and Test Updates

Test Changes

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (80103, 80100)]

Specimen Requirements: 10 g Tissue
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (80103, 80100): Meprobamate
Method (CPT Code)

2650B Meprobamate, Blood

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Methods/CPT Codes were changed [GC/MS (83805)]

Specimen Requirements: 2 mL Blood
Transport Temperature: Refrigerated
Specimen Container: Lavender top tube (EDTA)
Light Protection: Not Required
Special Handling: None
Rejection Criteria: None
Scope of Analysis: GC/MS (83805): Meprobamate
Method (CPT Code)

2650SP Meprobamate, Serum/Plasma

Summary of Changes: Specimen Requirements (Specimen Container) were changed.
Specimen Requirements (Special Handling) were changed.
Methods/CPT Codes were changed [GC/MS (83805)]

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).
Scope of Analysis: GC/MS (83805): Meprobamate
Method (CPT Code)



New Tests and Test Updates

Test Changes

7665SP T1-AM - Total, Serum/Plasma

Summary of Changes: Specimen Requirements (Transport Temperature) were 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.

7666SP T2 - Total, Serum/Plasma

Summary of Changes: Specimen Requirements (Transport Temperature) were 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: None

7667SP T3 - Total, Serum/Plasma

Summary of Changes: Specimen Requirements (Transport Temperature) were 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: None

7669SP T4 - Total, Serum/Plasma

Summary of Changes: Specimen Requirements (Transport Temperature) were changed.



Effective Date:

Monday, January 07, 2013

New Tests and Test Updates

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: None

7663SP Thyroid Panel 1 - Total, Serum/Plasma

Summary of Changes: Specimen Requirements (Transport Temperature) were 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.

7664SP Thyroid Panel 2 - Total, Serum/Plasma

Summary of Changes: Specimen Requirements (Transport Temperature) were 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: None

7668SP rT3 - Total, Serum/Plasma

Summary of Changes: Specimen Requirements (Transport Temperature) were changed.



Effective Date:

Monday, January 07, 2013

New Tests and Test Updates

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: None



New Tests and Test Updates

Discontinued Tests

Test Code	Test Name	Alternative Test
0337ME	Amphetamines Screen, Meconium	0337U - Amphetamines Screen, Urine
8620ST	Barbiturates Panel (Qualitative), Stool	8620U - Barbiturates Panel, Urine
0512ME	Barbiturates Screen, Meconium	0512U - Barbiturates Screen, Urine
0512ST	Barbiturates Screen, Stool	0512U - Barbiturates Screen, Urine
0568ME	Benzodiazepines Screen, Meconium	0568U - Benzodiazepines Screen, Urine
0960ST	Cannabinoids Panel (Qualitative), Stool	No Alternate Tests Available
9356ME	Cannabinoids Screen, Meconium	9356U - Cannabinoids Screen, Urine
9356ST	Cannabinoids Screen, Stool	9356U - Cannabinoids Screen, Urine
1300ST	Cocaine and Metabolites (Qualitative), Stool	1300U - Cocaine and Metabolites, Urine
0606ME	Cocaine and Metabolites Screen, Meconium	0606U - Cocaine and Metabolites Screen, Urine
1864ST	Drugs of Abuse Screen (9 Panel), Stool	1864U - Drugs of Abuse Screen (9 Panel), Urine
2375B	Hypnotosedatives Screen, Blood	No Alternate Tests Available
2557U	Mandelic Acid, Urine	2029U - Ethylbenzene Exposure Biouptake, Urine 4213U - Styrene Exposure Profile, Urine
8741B	Meprobamate, Blood (Forensic)	No Alternate Tests Available
9324ME	Methadone Screen, Meconium	9324U - Methadone Screen, Urine
8722ST	Methadone and Metabolite (Qualitative), Stool	8722U - Methadone and Metabolite, Urine
9293ME	Methylenedioxymethamphetamine and Metabolite Screen, Meconium	9293U - Methylenedioxymethamphetamine and Metabolite Screen, Urine
3236ME	Opiates Screen, Meconium	3236U - Opiates Screen, Urine
3532ME	Phencyclidine Screen, Meconium	3532U - Phencyclidine Screen, Urine
9334ME	Propoxyphene Screen, Meconium	9334U - Propoxyphene Screen, Urine
4130B	Salicylamide, Blood	No Alternate Tests Available
4130SP	Salicylamide, Serum/Plasma	No Alternate Tests Available
4130U	Salicylamide, Urine	No Alternate Tests Available
4626U	Trichloro-organic Metabolites, Urine	4627U - Trichloroacetic Acid, Urine
3132SP	Vitamin A, Serum/Plasma	No Alternate Tests Available
4779SP	Vitamin E, Serum/Plasma	No Alternate Tests Available