Effective Date:

Monday, August 06, 2018

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, August 06, 2018

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.

Effective Date:

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Test Updates

Test Code	Test Name	Test Name	Method / CPT Code	Specimen Req.	Stability	Scope	Units	Reference Comments	Discontinue
0395SP	Armodafinil, Serum/Plasma								•
54454B	DUID/DRE Mitragynine Confirmation, Blood (Forensic)				•				
52496B	Loperamide and Metabolite Confirmation, Blood (Forensic)			•				•	
2533B	Loperamide and Metabolite, Blood			•				•	
52489B	Mitragynine Confirmation, Blood				•				
52495B	Mitragynine Confirmation, Blood (Forensic)				•				
3064B	Mitragynine, Blood				•				
3045B	Modafinil/Armodafinil, Blood	•		•		•			
3045SP	Modafinil/Armodafinil, Serum/Plasma	•		•		•			
3433SP	Perampanel, Serum/Plasma				•				

Test Updates

Test Changes

54454B DUID/DRE Mitragynine Confirmation, Blood (Forensic)

Summary of Changes: Stability was changed.

Stability:
Room Temperature: 7 day(s)
Refrigerated: 30 day(s)
Frozen (-20 °C): 30 day(s)
Frozen (-70 °C): 12 month(s)

52496B Loperamide and Metabolite Confirmation, Blood (Forensic)

Summary of Changes: Specimen Requirements 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: None
Rejection Criteria: None
Scope of Analysis: Method (CPT Code): LC-MS/MS (80375): Loperamide, Desmethylloperamide

Compound Name	Units	Reference Comment
Loperamide	ng/mL	Loperamide is an oral anti-diarrhea medication that is available as OTC products in tablets and capsules of 2 mg and liquids containing 1 mg/5 mL or by a prescription. The common regimen for adults is a 4 mg loading dose, followed by 2 mg after every episode of diarrhea. The recommended maximum dose is 8 mg of an OTC product and 16 mg by prescription. Approximately 40% of the drug is absorbed into the bloodstream after oral administration. The drug is metabolized to inactive products (including desmethylloperamide) that are eliminated through both the urine and the feces. The mean elimination half-life of loperamide is approximately 11 hours. Reported therapeutic concentrations in blood or plasma are usually up to 3 ng/mL. Adverse effects of loperamide after therapeutic doses may include dizziness, drowsiness, dry mouth and constipation.
Desmethylloperamide	ng/mL	Desmethylloperamide is an inactive metabolite of loperamide. Plasma concentrations of desmethylloperamide following therapeutic loperamide dosing are usually under 20 ng/mL.

Test Updates

Test Changes

2533B Loperamide and Metabolite, Blood

Summary of Changes: Specimen Requirements 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: None
Rejection Criteria: None
Scope of Analysis: Method (CPT Code): LC-MS/MS (80375): Loperamide, Desmethylloperamide

Compound Name	Units	Reference Comment
Loperamide	ng/mL	Loperamide is an oral anti-diarrhea medication that is available as OTC products in tablets and capsules of 2 mg and liquids containing 1 mg/5 mL or by a prescription. The common regimen for adults is a 4 mg loading dose, followed by 2 mg after every episode of diarrhea. The recommended maximum dose is 8 mg of an OTC product and 16 mg by prescription. Approximately 40% of the drug is absorbed into the bloodstream after oral administration. The drug is metabolized to inactive products (including desmethylloperamide) that are eliminated through both the urine and the feces. The mean elimination half-life of loperamide is approximately 11 hours. Reported therapeutic concentrations in blood or plasma are usually up to 3 ng/mL. Adverse effects of loperamide after therapeutic doses may include dizziness, drowsiness, dry mouth and constipation.
Desmethylloperamide	ng/mL	Desmethylloperamide is an inactive metabolite of loperamide. Plasma concentrations of desmethylloperamide following therapeutic loperamide dosing are usually under 20 ng/mL.

52495B Mitragynine Confirmation, Blood (Forensic)

Summary of Changes: Stability was changed.

Stability: Room Temperature: 7 day(s)
Refrigerated: 30 day(s)
Frozen (-20 °C): 30 day(s)
Frozen (-70 °C): 12 month(s)

Test Updates

Test Changes

52489B Mitragynine Confirmation, Blood

Summary of Changes: Stability was changed.

Stability:
Room Temperature: 7 day(s)
Refrigerated: 30 day(s)
Frozen (-20 °C): 30 day(s)
Frozen (-70 °C): 12 month(s)

3064B Mitragynine, Blood

Summary of Changes: Stability was changed.

Stability:
Room Temperature: 7 day(s)
Refrigerated: 30 day(s)
Frozen (-20 °C): 30 day(s)
Frozen (-70 °C): 12 month(s)

3045B Modafinil/Armodafinil, Blood

Summary of Changes:
Test Name was changed.
Specimen Requirements (Specimen Container) were changed.
Scope of Analysis was changed.
Modafinil / Armodafinil was added.
Modafinil was removed.

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: Method (CPT Code): HPLC (80342): Modafinil / Armodafinil

Compound Name	Units	Reference Comment
Modafinil / Armodafinil	mcg/mL	After 7 daily oral doses of 200 or 600 mg Modafinil: Respective mean peak plasma concentrations 6.4 (+/- 0.7) and 17 (+/- 2.0) mcg/mL After 7 daily oral doses of 250 mg Armodafinil: Mean peak plasma concentration 9.2 +/- 0.7 mcg/mL The blood to plasma ratio is not known for these drugs. This test is not chiral specific; therefore, Armodafinil and/or Modafinil may be present.

Test Updates

Test Changes

3045SP Modafinil/Armodafinil, Serum/Plasma

Summary of Changes: Test Name was changed.
Specimen Requirements (Specimen Container) were changed.
Scope of Analysis was changed.
Modafinil / Armodafinil was added.
Modafinil was removed.

Specimen Requirements: 2 mL Serum or Plasma
Transport Temperature: Refrigerated
Specimen Container: Plastic container (preservative-free)
Light Protection: Not Required
Special Handling: 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: Method (CPT Code) HPLC (80342): Modafinil / Armodafinil

Compound Name	Units	Reference Comment
Modafinil / Armodafinil	mcg/mL	After 7 daily oral doses of 200 or 600 mg Modafinil: Respective mean peak plasma concentrations 6.4 (+/- 0.7) and 17 (+/- 2.0) mcg/mL After 7 daily oral doses of 250 mg Armodafinil: Mean peak plasma concentration 9.2 +/- 0.7 mcg/mL The blood to plasma ratio is not known for these drugs. This test is not chiral specific; therefore, Armodafinil and/or Modafinil may be present.

3433SP Perampanel, Serum/Plasma

Summary of Changes: Stability was changed.

Stability: Room Temperature: 1 month(s)
Refrigerated: 1 month(s)
Frozen (-20 °C): 25 month(s)

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Test Updates

Discontinued Tests

Test Code	Test Name	Alternative Test
0395SP	Armodafinil, Serum/Plasma	3045SP - Modafinil/Armodafinil, Serum/Plasma

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