

TEST OBSOLETE

NOTIFICATION DATE: May 8, 2009

EFFECTIVE DATE: June 16, 2009

LEVOFLOXACIN
#81955

EXPLANATION: Due to low testing volumes, this assay will become obsolete effective June 16, 2009.

RECOMMENDED ALTERNATIVE TEST:

#90524 Miscellaneous National Jewish Health, (National Jewish test name, Levofloxacin Level)

METHODOLOGY: HPLC

SPECIMEN REQUIREMENTS: Serum: 4 mL (2 mL min) from Red-top tube. Centrifuge, harvest serum and **freeze immediately** in labeled Polypropylene or similar tube. **CRITICAL FROZEN**
CSF: 1 mL Frozen

REQUIRED: Date of Birth, Source, drug name, drug dose (specify PO, IV, IM), # of doses per week, date/time of last dose (for IV start/end time), date/time of blood draw.

NOTE: The lab will not perform testing without the required information. If the time of last dose and the blood draw are not accurately recorded, accurate interpretation of the concentration is not possible.

LIST FEE: \$109.00

CPT CODE: 87188

ANALYTIC TIME: 10 days

DAY(S) SET-UP: Weekdays

QUESTIONS: Contact your Mayo Medical Laboratories' Regional Manager
Jim Nielsen, Mayo Medical Laboratories' Technologist Support
Telephone: 800-533-1710