Test Definition: MTDNU

Methadone Confirmation, Urine

Reporting Title: Methadone Confirmation, U
Performing Location: Rochester

Specimen Requirements:

Container/Tube: Plastic, 60-mL urine bottle
Specimen Volume: 20 mL
Collection Instructions:
1. Collect a random urine specimen.
2. No preservative.
Additional Information:
1. For situations where chain-of-custody is required, a Chain-of-Custody Kit (Supply T282) is available. For chain-of-custody information, see COCH/9426 Chain-of-Custody Processing.
2. Additional drug panels and specific requests are available. Call Mayo Medical Laboratories at 800-533-1710 or 507-266-5700.

Specimen Type	Temperature	Time
Urine	Refrigerated (preferred)	14 days
	Frozen	14 days
	Ambient	72 hours

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
21105	Immunoassay Screen	Numeric		16199-2
56028	EDDP-by GC-MS	Alphanumeric	ng/mL	50542-0
83129	Methadone-by GC-MS	Alphanumeric	ng/mL	3774-7
21107	Interpretation	Alphanumeric		69050-3
21110	Chain of Custody	Numeric		In Process

CPT Code: 1 × 83840

Reflex Tests:

Test ID	Reporting Name	CPT Units	CPT Code	Always Performed	Orderable Separately
ADULT	Adulterants Survey, U			Yes	No

Result Codes for Reflex Tests:

Test ID	Result ID	Reporting Name	Type	Unit	LOINC®
ADULT	20606	Creatinine, U	Numeric	mg/dL	In Process
ADULT	22312	Specific Gravity	Numeric		5811-5
ADULT	23509	pH	Numeric		2756-5
ADULT	23511	Oxidants	Alphanumeric		In Process
ADULT	23510	Nitrites	Alphanumeric	mcg/mL	32710-6
ADULT	30914	Comment	Alphanumeric		48767-8

Reference Values:

Negative
Positives are reported with a quantitative GC-MS result.
Cutoff concentrations:
IMMUNOASSAY SCREEN
<300 ng/mL

METHADONE BY GC-MS
<100 ng/mL

2-ETHYLIDENE-1,5-DIMETHYL-3,3-DIPHENYLPYRROLIDINE BY GC-MS
<100 ng/mL