

Reporting Title: Barbiturates 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. No specimen substitutions.
2. No STATS are accepted for this procedure.
3. For situations where chain of custody is required, a Chain-of-Custody Kit (Supply T282) is available. For chain-of-custody information, see BARBX / Barbiturates Confirmation, Chain of Custody, Urine.
4. Additional drug panels and specific requests are available. Call Mayo Medical Laboratories at 800-533-1710 or 507-266-5700.
5. If urine creatinine is required or adulteration of the sample is suspected, the following test should be requested, ADULT / Adulterants Survey, Urine. For additional information, please refer to ADULT / Adulterants Survey, Urine.

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

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
21442	Butalbital-by GC/MS	Alphanumeric	ng/mL	16237-0
20642	Amobarbital-by GC/MS	Alphanumeric	ng/mL	16239-6
20643	Pentobarbital-by GC/MS	Alphanumeric	ng/mL	16240-4
20644	Secobarbital-by GC/MS	Alphanumeric	ng/mL	16238-8
20645	Phenobarbital-by GC/MS	Alphanumeric	ng/mL	16241-2
20651	Barbiturates Interpretation	Alphanumeric		69050-3
20647	Chain of Custody	Numeric		N/A

CPT Code: 1 x 82205

Reference Values:

Negative

Cutoff concentrations:

BUTALBITAL BY GC-MS

<100 ng/mL

AMOBARBITAL BY GC-MS

<100 ng/mL

PENTOBARBITAL BY GC-MS

<100 ng/mL

SECOBARBITAL BY GC-MS

<100 ng/mL

PHENOBARBITAL BY GC-MS

<100 ng/mL