

## Overview

### Method Name

Liquid Chromatography/Tandem Mass Spectrometry (LC/MS/MS)

### NY State Available

Yes

## Specimen

### Specimen Type

Varies

### Specimen Required

Submit only 1 of the following specimens:

#### Plasma

Draw blood in a green-top (sodium heparin) tube(s), **plasma gel tube is not acceptable**. Spin down and send 2 mL sodium heparin plasma refrigerated in a plastic vial.

#### Serum

Draw blood in a plain, red-top tube(s), **serum gel tube is not acceptable**. Spin down and send 2 mL of serum refrigerated in a plastic vial.

### Specimen Minimum Volume

0.3 mL

### Reject Due To

Hemolysis	NA
Lipemia	NA
Icterus	NA
Other	NA

### Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Varies	Ambient	72 hours	
	Refrigerated (preferred)	7 days	
	Frozen	180 days	

**Clinical & Interpretive****Reference Values**

Reference Range: 50 - 1000 ng/mL

**Performance****PDF Report**

No

**Day(s) Performed**

Monday through Sunday

**Report Available**

3 to 7 days

**Specimen Retention Time**

2 weeks

**Performing Laboratory Location**

Medtox Laboratories, Inc.

**Fees & Codes****Fees**

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact [Customer Service](#).

**CPT Code Information**

80346

G0480 (if appropriate)

**LOINC® Information**

Test ID	Test Order Name	Order LOINC® Value
FFTEM	Temazepam (Restoril)	59750-0

Result ID	Test Result Name	Result LOINC® Value
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Z1128	Temazepam (Restoril)	59750-0
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