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## Overview

### Useful For

Qualitative detection and identification of prescription or over-the-counter drugs frequently found in drug overdose or used with a suicidal intent

Providing, when possible, the identification of all drugs in the specimen

This test is **not intended for use** in employment-related testing.

This test is **not intended for** therapeutic compliance testing. The assay's limits of detection have been established for drugs at overdose levels, which are generally much higher than therapeutic concentrations.

This test is **not useful for** drugs of abuse or illicit drug testing, including benzodiazepines, opioids, barbiturates, cocaine, and amphetamine type stimulants.

### Special Instructions

- [Prescription and Over-the-Counter Drug Screening List and Limits of Detection](#)

### Method Name

Gas Chromatography Mass Spectrometry (GC-MS)

### NY State Available

Yes

## Specimen

### Specimen Type

Urine

### Ordering Guidance

This test is not performed using chain of custody. For chain-of-custody testing, order PDSUX / Drug Screen, Prescription/Over the Counter, Chain of Custody, Random, Urine.

### Specimen Required

**Supplies:** Sarstedt Aliquot Tube, 5 mL (T914)

**Collection Container/Tube:** Plastic urine container

**Submission Container/Tube:** Plastic vial

**Specimen Volume:** 5 mL

**Collection Instructions:**

1. Collect a random urine specimen.
2. No preservative. **Specimens containing preservative may be canceled.**

**Forms**

If not ordering electronically, complete, print, and send a [Therapeutics Test Request](#) (T831) with the specimen.

**Specimen Minimum Volume**

1.1 mL

**Reject Due To**

All specimens will be evaluated at Mayo Clinic Laboratories for test suitability.

**Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
Urine	Refrigerated (preferred)	14 days	
	Frozen	14 days	
	Ambient	3 hours	

**Clinical & Interpretive****Clinical Information**

This test looks for a broad spectrum of prescription and over-the-counter medications. It is designed to detect drugs that have toxic effects, as well as known antidotes or active therapies that a clinician can initiate to counteract the toxic effect. The test is intended to help physicians manage an apparent overdose or intoxicated patient or to determine if a specific set of symptoms might be due to the presence of drugs. This test is not appropriate for drugs of abuse or illicit drug testing, including benzodiazepines, opioids, barbiturates, cocaine, and amphetamine-type stimulants.

Drugs of toxic significance that are not detected by this test are digoxin, lithium, salicylate, and many drugs of abuse or illicit drugs, some benzodiazepines, and some opioids. For these drugs, see Mayo Clinic Laboratories' drug abuse surveys, drug screens, or individual tests.

For detection limits for drugs detected in this test see [Prescription and Over-the-Counter Drug Screening List and Limits of Detection](#).

**Reference Values**

Drugs detected are presumptive. Additional testing may be required to confirm the presence of any drugs detected.

**Interpretation**

The drugs that are detected by this test are listed in [Prescription and Over-the-Counter Drug Screening List and Limits of Detection](#).

A detailed discussion of each drug detected is beyond the scope of this text. Each report will indicate the drugs

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identified. If a clinical interpretation is required, contact Mayo Clinic Laboratories at 800-533-1710 and ask to speak to a toxicology consultant.

**Cautions**

No significant cautionary statements

**Clinical Reference**

1. Langman LJ, Bechtel LK, Holstege CP. Clinical toxicology. In: Rifai N, Chiu RWK, Young I, Burnham CAD, Wittwer CT, eds. Tietz Textbook of Laboratory Medicine. 7th ed. Elsevier; 2023:chap 43
2. Baselt RC. Disposition of Toxic Drugs and Chemical in Man. 12th ed. Biomedical Publications; 2020

**Performance****Method Description**

Screening is by gas chromatography mass spectroscopy.(Unpublished Mayo method)

**PDF Report**

No

**Day(s) Performed**

Monday through Friday

**Report Available**

2 to 4 days

**Specimen Retention Time**

2 weeks

**Performing Laboratory Location**

Rochester

**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](#).

**Test Classification**

This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. It has not been cleared or approved by the US Food and Drug Administration.

**CPT Code Information**

80307

**LOINC® Information**

Test ID	Test Order Name	Order LOINC® Value
PDSU	Drug Screen, Prescription/OTC, U	12286-1

Result ID	Test Result Name	Result LOINC® Value
31260	Drugs detected:	12286-1
45529	Suspect Drug	No LOINC Needed