

## Overview

### Useful For

Qualitatively (present vs not detected) identifying 33 opioid compounds (parent drug and metabolites) in urine to help determine compliance or identify illicit opioid drug use

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

### Method Name

Only orderable as part of profile. For more information see:

-CSMPU / Controlled Substance Monitoring Panel, Random, Urine

-TOSU / Targeted Opioid Screen, Random, Urine

Liquid Chromatography-Tandem Mass Spectrometry, High-Resolution Accurate Mass (LC-MS/MS HRAM)

### NY State Available

Yes

## Specimen

### Specimen Type

Urine

### Specimen Required

Only orderable as part of profile. For more information see:

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-TOSU / Targeted Opioid Screen, Random, Urine

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

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

**Submission Container/Tube:** Plastic, 5-mL tube

**Specimen Volume:** 1 mL

### Collection Instructions:

1. Collect a random urine specimen.
2. No preservative

### Specimen Minimum Volume

0.5 mL

### Reject Due To

Gross	Reject
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hemolysis	
Gross icterus	Reject

### Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Urine	Refrigerated (preferred)	14 days	
	Frozen	28 days	
	Ambient	72 hours	

### Clinical & Interpretive

#### Clinical Information

Opioids are a large class of medications commonly used to relieve acute and chronic pain or help manage opioid abuse and dependence. Medications that fall into this class include buprenorphine, codeine, fentanyl, hydrocodone, hydromorphone, methadone, morphine, oxycodone, oxymorphone, tapentadol, tramadol, and others. Opioids work by binding to the opioid receptors that are found in the brain, spinal cord, gastrointestinal tract, and other organs.

Common side effects include drowsiness, confusion, nausea, constipation, and, in severe cases, respiratory depression depending on the dose. These medications can also produce physical and psychological dependence and have a high risk for abuse and diversion, which is one of the main reasons many professional practice guidelines recommend compliance testing in patients prescribed these medications.

Opioids are readily absorbed from the gastrointestinal tract, nasal mucosa, lungs, and after subcutaneous or intramuscular injection. Opioids are primarily excreted from the kidney in both free and conjugated forms. This assay doesn't hydrolyze the urine sample and looks for both parent drugs and metabolites (including glucuronide forms). The detection window for most opioids in urine is approximately 1 to 3 days with longer detection times for some compounds (ie, methadone).

#### Reference Values

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-CSMPU / Controlled Substance Monitoring Panel, Random, Urine

-TOSU / Targeted Opioid Screen, Random, Urine

Not Detected

Cutoff concentrations:

Codeine: 25 ng/mL

Codeine-6-beta-glucuronide: 100 ng/mL

Morphine: 25 ng/mL

Morphine-6-beta-glucuronide: 100 ng/mL

6-Monoacetylmorphine: 25 ng/mL

Hydrocodone: 25 ng/mL

Norhydrocodone: 25 ng/mL

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Dihydrocodeine: 25 ng/mL  
Hydromorphone: 25 ng/mL  
Hydromorphone-3-beta-glucuronide: 100 ng/mL  
Oxycodone: 25 ng/mL  
Noroxycodone: 25 ng/mL  
Oxymorphone: 25 ng/mL  
Oxymorphone-3-beta-glucuronide: 100 ng/mL  
Noroxymorphone: 25 ng/mL  
Fentanyl: 2 ng/mL  
Norfentanyl: 2 ng/mL  
Meperidine: 25 ng/mL  
Normeperidine: 25 ng/mL  
Naloxone: 25 ng/mL  
Naloxone-3-beta-glucuronide: 100 ng/mL  
Methadone: 25 ng/mL  
2-Ethylidene-1,5-dimethyl-3,3-diphenylpyrrolidine: 25 ng/mL  
Propoxyphene: 25 ng/mL  
Norpropoxyphene: 25 ng/mL  
Tramadol: 25 ng/mL  
O-desmethyltramadol: 25 ng/mL  
Tapentadol: 25 ng/mL  
N-desmethyltapentadol: 50 ng/mL  
Tapentadol-beta-glucuronide: 100 ng/mL  
Buprenorphine: 5 ng/mL  
Norbuprenorphine: 5 ng/mL  
Norbuprenorphine glucuronide: 20 ng/mL

**Interpretation**

If an opioid or its corresponding metabolites is identified (present), it indicates that the patient has used the respective opioid in the recent past. The absence of expected opioids or their metabolites may indicate noncompliance, inappropriate timing of specimen collection relative to drug administration, poor drug absorption, diluted or adulterated urine, or limitations of testing. The concentration of the drug must be greater than or equal to the cutoff to be reported as present. If a specific drug concentration is required, the laboratory must be contacted within 2 weeks of specimen collection/testing to request quantification by a second analytical technique at an additional charge.

**Cautions**

No significant cautionary statements

**Clinical Reference**

1. Gutstein HB, Akil H: Opioid analgesics. In: Brunton LL, Lazo JS, Parker KL. Goodman and Gilman's: The Pharmacological Basis of Therapeutics. 11th ed. McGraw-Hill; 2006:chap 21
2. Chronic Pain in America: Roadblocks to Relief, survey conducted for the American Pain Society, The American Academy of the Pain Medicine and Janssen. Pharmaceutica; 1999
3. Magnani B, Kwong T: Urine drug testing for pain management. Clin Lab Med. 2012;32(32):379-390. doi: 10.1016/j.cll.2012.07.001

## Performance

### Method Description

The urine sample is diluted with internal standard and then analyzed by liquid chromatography- tandem mass spectrometry using a high resolution-accurate mass orbi-trap detector.(Unpublished Mayo method)

### PDF Report

No

### Day(s) Performed

Monday through Saturday

### Report Available

2 to 4 days

### Specimen Retention Time

14 days

### 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. This test has not been cleared or approved by the US Food and Drug Administration.

### CPT Code Information

80364 (G0481 if appropriate)

### LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
TOPSU	Targeted Opioid Screen, U	95796-9

Result ID	Test Result Name	Result LOINC® Value
42323	Codeine	19411-8

42324	Codeine-6-beta-glucuronide	89310-7
42325	Morphine	19597-4
42326	Morphine-6-beta-glucuronide	89308-1
42327	6-monoacetylmorphine	19321-9
42328	Hydrocodone	19482-9
42329	Norhydrocodone	89304-0
42330	Dihydrocodeine	19446-4
42331	Hydromorphone	19486-0
42332	Hydromorphone-3-beta-glucuronide	89309-9
42333	Oxycodone	19642-8
42334	Noroxycodone	89303-2
42335	Oxymorphone	19646-9
42336	Oxymorphone-3-beta-glucuronide	89301-6
42337	Noroxymorphone	89302-4
42338	Fentanyl	59673-4
42339	Norfentanyl	43199-9
42340	Meperidine	19532-1
42341	Normeperidine	27920-8
42342	Naloxone	42618-9
42343	Naloxone-3-beta-glucuronide	89307-3
42344	Methadone	19550-3
42345	EDDP	93495-0
42346	Propoxyphene	19429-0
42347	Norpropoxyphene	19632-9
42348	Tramadol	19710-3
42349	O-desmethyltramadol	86453-8
42350	Tapentadol	72485-6
42351	N-desmethyltapentadol	89306-5
42352	Tapentadol-beta-glucuronide	89300-8
42353	Buprenorphine	93494-3
42354	Norbuprenorphine	82371-6
42355	Norbuprenorphine glucuronide	89305-7
65059	Opioid Interpretation	69050-3