

Overview

Method Name

Gas Chromatography-Mass Spectrometry (GC-MS)

NY State Available

Yes

Specimen

Specimen Type

Varies

Specimen Required

Submit only 1 of the following specimens:

Serum:

Draw blood in a plain, red-top tube(s), **serum gel tube is not acceptable**. Spin down and send 5 mL of serum refrigerated in plastic vial.

Plasma:

Draw blood in a green-top (sodium heparin) tube(s), **plasma gel tube is not acceptable**. Spin down and send 5 mL sodium heparin plasma refrigerated in plastic vial.

Reject Due To

Hemolysis NA

Lipemia NA

Icterus NA

Other plasma gel tube; SST tube

Specimen Minimum Volume

2 mL

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Varies	Refrigerated (preferred)	14 days	
	Frozen	180 days	

Clinical & Interpretive

Reference Values

Negative

Units: ng/mL

Test Performed by: Medtox Laboratories, Inc.

402 W. County Road D

St. Paul, MN 55112

Interpretation

Assay threshold: 1.0 ng/mL

Performance**PDF Report**

No

Performing Laboratory Location

Medtox Laboratories, Inc.

Fees & Codes**Test Classification**

This test was developed and its performance characteristics determined by LabCorp. It has not been cleared or approved by the Food and Drug Administration.

CPT Code Information

80349

LOINC® Information

Test ID	Test Order Name	Order LOINC Value
FFTCC	THC Confirmation, MS, SP	16542-3

Result ID	Test Result Name	Result LOINC Value
Z4770	Cannabinoids	48943-5
Z4771	Tetrahydrocannabinol (THC)	73935-9
Z4772	Carboxy-THC	48944-3
Z4773	Hydroxy-THC	48934-4
Z4774	Cannabinol	87379-4
Z4775	Cannabidiol	82964-8