
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 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.

Reject Due To

Hemolysis	NA
Lipemia	NA
Icterus	NA
Other	NA

Specimen Minimum Volume

0.25 mL

Specimen Stability Information

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

Clinical & Interpretive**Reference Values**

Reference Range: 2.0 - 6.0 ng/mL

Performance**PDF Report**

No

Specimen Retention Time

2 weeks

Performing Laboratory Location

Medtox Laboratories, Inc.

Fees & Codes**Test Classification****CPT Code Information**

80362

LOINC® Information

Test ID	Test Order Name	Order LOINC Value
FDM	Dextromethorphan (DM)	13623-4

Result ID	Reporting Name	LOINC®
Z1148	Dextromethorphan (DM)	13623-4