
Overview**Method Name**

Gas Chromatography/Nitrogen Phosphorus Detection (GC-NPD)

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 3 mL of 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 3 mL of serum refrigerated in a plastic vial.

Reject Due To

Hemolysis	NA
Lipemia	NA
Icterus	NA
Other	NA

Specimen Minimum Volume

0.6 mL

Specimen Stability Information

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

Clinical & Interpretive**Reference Values**

Units: ng/mL

Therapeutic range has not been established.

Expected steady state amantadine concentrations in patients receiving recommended daily dosages:

200-1000 ng/mL

Toxicity reported at greater than 2000 ng/mL

Performance**PDF Report**

No

Specimen Retention Time

2 weeks

Performing Laboratory Location

Medtox Laboratories, Inc.

Fees & Codes

Test Classification**CPT Code Information**

80299

LOINC® Information

Test ID	Test Order Name	Order LOINC Value
FAMAN	Amantadine (Symmetrel)	3317-5

Result ID	Reporting Name	LOINC®
Z1198	Amantadine	3317-5