

## Overview

### Useful For

Detection of in utero drug exposure up to 5 months before birth

Chain of custody is required whenever the results of testing could be used in a court of law. Its purpose is to protect the rights of the individual contributing the specimen by demonstrating that it was under the control of personnel involved with testing the specimen at all times; this control implies that the opportunity for specimen tampering would be limited. Since the evidence of illicit drug use during pregnancy can be cause for separating the baby from the mother, a complete chain of custody ensures that the test results are appropriate for legal proceedings.

### Additional Tests

Test ID	Reporting Name	Available Separately	Always Performed
COCH	Chain of Custody Processing	No	Yes

### NY State Available

Yes

## Specimen

### Specimen Type

Meconium

### Specimen Required

**Container/Tube:** Chain-of-Custody Meconium Kit (T653) includes the specimen containers, seals, and documentation required

**Specimen Volume:** 1 g (approximately 1 teaspoon)

**Collection Instructions:** Collect entire random meconium specimen.

### Additional Information:

1. Specimen that arrives with a broken seal does not meet the chain of custody requirements.
2. The laboratory recommends sending chain-of-custody specimens by overnight shipment.

### Forms

1. [Chain-of-Custody Request](#) is included in the Chain-of-Custody Kit (T282).
2. If not ordering electronically, complete, print, and send a [Therapeutics Test Request](#) (T831) with the specimen.

### Specimen Minimum Volume

0.3 g (approximately 1/4 teaspoon)

**Reject Due To**

Other	Grossly bloody reject, Pink OK
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**Specimen Stability Information**

Specimen Type	Temperature	Time	Special Container
Meconium	Frozen (preferred)	28 days	
	Ambient	28 days	
	Refrigerated	28 days	

**Clinical and Interpretive**
**Clinical Information**

Phencyclidine (PCP) was originally developed as an anesthetic in the 1950s but later was abandoned because of a high frequency of postoperative delirium with hallucinations. It was classed as a dissociative anesthetic because, in the anesthetized state, the patient remains conscious with staring gaze, flat facies, and rigid muscles.(1) PCP binds with high affinity to sites located in the cortex and limbic structures, resulting in blocking of N-methyl-D-aspartate (NMDA)-type glutamate receptors.(1) PCP became a drug of abuse in the 1970s because of its hallucinogenic effects.(1,2)

PCP is approximately 65% protein bound and has a volume of distribution (Vd) of 5.3 to 7.5 L/kg. The drug is metabolized by the liver via oxidative hydroxylation and has a dose-dependent half-life ranging from 7 to 46 hours.(2)

Meconium is the first fecal material passed by the neonate. Meconium forms in the first trimester of pregnancy but is seldom excreted before the 34th week. It is composed of approximately 70% water, bile acids, cholesterol, squamous cells, protein and drug metabolites, and no bacteria are normally present. Prebirth excretion of meconium is a sign of fetal distress.

Because drugs and metabolites can accumulate in meconium, assessment of meconium for the presence of illicit drugs can be an indicator of maternal drug use during pregnancy. Illicit drug use during pregnancy can have a profound effect on fetal development.

The disposition of drug in meconium is not well understood. The proposed mechanism is that the fetus excretes drug into bile and amniotic fluid. Drug accumulates in meconium either by direct deposit from bile or through swallowing of amniotic fluid.(3) The first evidence of meconium in the fetal intestine appears at approximately the 10th to 12th week of gestation, and slowly moves into the colon by the 16th week of gestation.(4) Therefore, the presence of drugs in meconium has been proposed to be indicative of in utero drug exposure during the final 4 to 5 months of pregnancy, a longer historical measure than is possible by urinalysis.(3)

Chain of custody is a record of the disposition of a specimen to document who collected it, who handled it, and who performed the analysis. When a specimen is submitted in this manner, analysis will be performed in such a way that it will withstand regular court scrutiny.

**Reference Values**

Negative

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Positives are reported with a quantitative LC-MS/MS result.

Cutoff concentrations

PCP by LC-MS/MS: 10 ng/g

### **Interpretation**

The presence of phencyclidine in meconium is indicative of in utero drug exposure up to 5 months before birth.

### **Cautions**

Because the results of this test may have legal ramifications, it is recommended that testing be performed using chain of custody. A kit including all the materials necessary to complete chain of custody is available to ensure the test results are appropriate for legal proceedings.

### **Clinical Reference**

1. O'Brien CP: Drug addiction and drug abuse. In Goodman and Gilman's the Pharmacological Basis of Therapeutics. 11th edition. Edited by LL Brunton, JS Lazo, KL Parker. McGraw-Hill Book Company, Inc, 2006
2. Baselt RC: Phencyclidine. In Disposition of Toxic Drugs and Chemicals in Man. Eighth edition. Edited by RC Baselt. Foster City, CA, Biomedical Publications, 2008, pp 1735
3. Ostrea EM Jr, Brady MJ, Parks PM, et al: Drug screening of meconium in infants of drug-dependent mothers: an alternative to urine testing. J Pediatr 1989 Sep;115(3):474-477
4. Ahanya SN, Lakshmanan J, Morgan BL, Ross MG: Meconium passage in utero mechanisms, consequences, and management. Obstet Gynecol Surv 2005 Jan;60(1):45-56; quiz 73-74

### **Performance**

#### **Method Description**

Meconium is mixed with internal standard and then digested with acetic acid. The sample is then extracted with organic solvent and further processed by solid-phase extraction. The extract is analyzed by high-performance liquid chromatography with detection by tandem mass spectrometry.(Unpublished Mayo method)

#### **PDF Report**

No

#### **Day(s) and Time(s) Test Performed**

Monday through Sunday; Varies

#### **Analytic Time**

2 days

#### **Maximum Laboratory Time**

3 days

#### **Specimen Retention Time**

2 weeks

#### **Performing Laboratory Location**

Rochester

## Fees and 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 Regional Manager. 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 U.S. Food and Drug Administration.

### CPT Code Information

83992

G0480 (if appropriate)

### LOINC® Information

Test ID	Test Order Name	Order LOINC Value
PCPMX	Phencyclidine Confirmation, CoC, M	92816-8

Result ID	Test Result Name	Result LOINC Value
36232	PCP Confirmation, Meconium	92816-8
36233	Interpretation	8232-1
36234	Chain of Custody	77202-0