

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:

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 a plastic vial.

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 a plastic vial.

Specimen Minimum Volume

2 mL

Reject Due To

Hemolysis:	NA
Thawing:	Warm OK: Cold OK
Lipemia:	NA
Icterus:	NA
Other	NA

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Varies	Refrigerated (preferred)	14 days	
	Frozen	365 days	
	Ambient	48 hours	

Clinical and Interpretive**Reference Values**

Units: Flunitrazepam ng/mL

7-Aminoflunitrazepam ng/mL

Peak plasma Flunitrazepam concentrations in patients receiving chronic, recommended dosages: 10 – 20 ng/mL.

Note: Flunitrazepam is not legally marketed in the United States.

Performance**PDF Report**

No

Day(s) and Time(s) Test Performed

Monday through Sunday

Analytic Time

5 days

Maximum Laboratory Time

7 - 9 days

Performing Laboratory Location

Medtox Laboratories, Inc.

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](#).

CPT Code Information

80346

LOINC® Information

Test ID	Test Order Name	Order LOINC Value
FFLRO	Flunitrazepam (Rohypnol)	Not Provided

Result ID	Test Result Name	Result LOINC Value
Z1075	Flunitrazepam	73828-6

Result ID	Test Result Name	Result LOINC Value
Z1074	7-Aminoflunitrazepam	73829-4