

**Test Definition: FISON** 

Isoniazid (INH)

# Overview

#### **Method Name**

High-Performance Liquid chromatography with Ultraviolet Detection (HPLC-UV)

#### **NY State Available**

Yes

# **Specimen**

## **Specimen Type**

Serum Red

## **Specimen Required**

Specimen Type: Serum Container/Tube: Red-top Specimen Volume: 2 mL

Collection Instructions: 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.

## **Specimen Minimum Volume**

0.5 mL

## **Reject Due To**

| Hemolysis | NA NA |
|-----------|-------|
| Lipemia   | NA NA |
| Icterus   | NA    |
| Other     | NA    |

# **Specimen Stability Information**

| Specimen Type | Temperature              | Time     | Special Container |
|---------------|--------------------------|----------|-------------------|
| Serum Red     | Refrigerated (preferred) | 14 days  |                   |
|               | Ambient                  | 72 hours |                   |
|               | Frozen                   | 180 days |                   |

# **Clinical & Interpretive**

#### **Reference Values**



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Units: ug/mL

The effective concentration range of isoniazid is dependent upon the minimum inhibitory concentration of the pathogen being treated.

Toxic range: greater than 20 ug/mL

#### **Performance**

#### **PDF Report**

No

# Day(s) Performed

Monday through Saturday

#### **Report Available**

5 to 9 days

## **Specimen Retention Time**

2 weeks

# **Performing Laboratory Location**

Medtox Laboratories, Inc.

# Fees & Codes

## **Fees**

- Authorized users can sign in to <u>Test Prices</u> for detailed fee information.
- Clients without access to Test Prices can contact <u>Customer Service</u> 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact <u>Customer Service</u>.

#### **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**

80299

#### **LOINC®** Information

| Test ID | Test Order Name    | Order LOINC® Value |
|---------|--------------------|--------------------|
| FISON   | Isoniazid (INH), S | 3697-0             |



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| Result ID | Test Result Name   | Result LOINC® Value |
|-----------|--------------------|---------------------|
| Z1207     | Isoniazid (INH), S | 3697-0              |