

## Phosphatidylethanol Confirmation, Blood

**Test ID:** PETH

**Useful for:**

Verifying abstinence or use of ethanol especially in liver transplant candidates/patients

**Methods:**

Liquid Chromatography-Tandem Mass Spectrometry (LC-MS/MS)

**Reference Values:**

Negative (<10 ng/mL)

PEth 16:0/18:1 (POPEth): Lower limit of quantification =10 ng/mL

PEth 16:0/18:2 (PLPEth): Lower limit of quantification =10 ng/mL

**Specimen Requirements:**

**Container/Tube:** Lavender top (EDTA)

**Specimen Volume:** 1 mL

**Minimum Volume:** 0.5 mL

**Collection Instructions:**

1. Do not centrifuge.
2. Send whole blood specimen in original tube. **Do not aliquot.**

**Specimen Stability Information:**

Specimen Type	Temperature	Time
Whole Blood EDTA	Frozen (preferred)	21 days
	Refrigerated	7 days

**CPT Code:**

80321

G0480 (if appropriate)

**Day(s) Performed:** Monday through Friday

**Report Available:** 2 to 7 days

**Note:**

The following referral test code(s) will become obsolete.

Test Name	Test ID	Referral Lab Code	Referral Lab
Phosphatidylethanol (PEth), whole blood	FFPET	2804	Medtox

**Questions**

Contact Brandon DeBoom, Laboratory Technologist Resource Coordinator at 800-533-1710.