

Washington State Patrol Toxicology Laboratory

Scope of Testing and Reporting Information

General screening includes volatiles analysis and one or a combination of the following: enzyme multiplied immunoassay (EMIT), basic drug screening by gas chromatography - mass spectrometry/nitrogen phosphorus detection (GC-MS/NPD), drug screening by liquid chromatography - time of flight mass spectrometry (LC-TOF-MS) and cannabinoids screen by liquid chromatography - tandem mass spectrometry (LC-MSMS). Case circumstances may dictate additional screening or targeted analyses, either in-house or by an external laboratory (see Testing Scope B and C). The Toxicology Laboratory reserves the right to decide which method(s) to use. **Please contact the laboratory at 206-262-6100 or toxlab@wsp.wa.gov with any questions.**

Routine testing for law enforcement case submissions will include volatiles and cannabinoids screen/confirmation only. For these cases, a comment will appear on the Toxicology Test Report to indicate testing is limited to volatiles and cannabinoids analyses. Screening by LC-TOF-MS for therapeutic drugs and drugs of abuse will be performed only if specific analytes are indicated on the Request for Analysis form or if case circumstances warrant. Routine testing for urine drug facilitated sexual assault case submissions will include EMIT, GC-MS/NPD screen and urine benzodiazepines analysis.

If analytes listed in Testing Scope A are presumptively identified in screening, but are not confirmed, results are reported as "none detected." This includes analytes with confirmation results less than the lower limit of quantitation/reporting (LOQ) for the confirmation test method.

Confirmation testing for presumptive positive EMIT results may not be performed, based on case type (e.g., death investigation). Where confirmation testing is not performed, or where confirmation testing is performed and no reportable results are obtained (e.g., < LOQ or ND), the drug/drug class is removed from the EMIT panel description on the Toxicology Test Report.

If analytes listed in Testing Scope B are presumptively identified in screening, and confirmation testing is not performed, presumptive results are not reported for those analytes. A comment will appear on the Toxicology Test Report to indicate comprehensive confirmation testing was not performed.

If a low amount of available specimen volume prevents analyses that would otherwise be performed, a comment will appear on the Toxicology Test Report to indicate sample volume is insufficient for complete analysis.

There are analytes for which the Toxicology Laboratory and the external subcontractor laboratory do not have the capability to detect or confirm (e.g., helium, nitrogen). Biochemical testing (e.g., glucose, insulin, vitamin D) is outside the scope of the Toxicology Laboratory testing protocols. The customer may submit specimens to a clinical laboratory for biochemical analysis.

Washington State Patrol Toxicology Laboratory

Testing Scope A

Testing Scope A lists analytes included in standard screening and confirmation analyses performed by the Toxicology Laboratory, test method information and the limit/type of reporting. These analytes are routinely confirmed as part of the laboratory's testing protocol.

Volatiles Analysis

Compound	Screen Method	Confirmation Method	Reporting Limit
acetone	Headspace GC	Headspace GC	10 mg/dL
diffuoroethane	Headspace GC	Headspace GC/MS	POS
ethanol	Headspace GC	Headspace GC	0.01-0.02 g/100 mL
isopropanol	Headspace GC	Headspace GC	10 mg/dL
methanol	Headspace GC	Headspace GC	10 mg/dL
sevoflurane	Headspace GC	Headspace GC/MS	POS

Immunoassay Analysis

Drug/Drug Class	Method	Panel	Reporting
amphetamines	Enzyme-multiplied immunoassay technique (EMIT)	DUI/DRE and Death Investigation	presumptive positive
barbiturates	Enzyme-multiplied immunoassay technique (EMIT)	DUI/DRE and Death Investigation	presumptive positive
benzodiazepines	Enzyme-multiplied immunoassay technique (EMIT)	DUI/DRE and Death Investigation	presumptive positive
cannabinoids	Enzyme-multiplied immunoassay technique (EMIT)	Death Investigation	presumptive positive
cocaine metabolite	Enzyme-multiplied immunoassay technique (EMIT)	DUI/DRE and Death Investigation	presumptive positive
opiates	Enzyme-multiplied immunoassay technique (EMIT)	DUI/DRE and Death Investigation	presumptive positive

NOTE: Urine specimens are analyzed using DUI/DRE immunoassay panel, excluding amphetamines and cannabinoids; for all matrices, a more extensive panel may be run, based on case type/specimens received.

Drug Analysis

Drug	Screen Method	Confirmation Method	Reporting Limit
6-acetylmorphine	LC-TOF-MS	Opiates LC-MSMS	2 ng/mL
7-aminoclonazepam	LC-TOF-MS	Benzodiazepines LC-AJS/LC-MSMS	5 ng/mL
7-aminoflunitrazepam	LC-TOF-MS	Benzodiazepines LC-AJS/LC-MSMS	POS
7-aminonimetazepam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
7-aminonitrazepam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
acetaminophen	LC-TOF-MS	Acetaminophen HPLC	5 mg/L
alpha-OH-alprazolam	LC-TOF-MS	Benzodiazepines LC-AJS/LC-MSMS	5 ng/mL
alprazolam	LC-TOF-MS or GC-MS/NPD	Benzodiazepines LC-AJS/LC-MSMS	5 ng/mL
amitriptyline (confirmed > 200 ng/mL)	LC-TOF-MS or GC-MS/NPD	Tricyclic Antidepressants LC-MSMS	0.025 mg/L
amobarbital**	LC-TOF-MS (neg mode)	Barbiturates GC-MS	0.5 mg/L
amphetamine	LC-TOF-MS	Amphetamines LC-MSMS	0.01 mg/L
benzoylcegonine (confirmed > 50 ng/mL)	LC-TOF-MS	Cocaine and Metabolites GC-MS	0.01 mg/L
bromazolam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
buprenorphine*	LC-TOF-MS	Buprenorphine, Norbuprenorphine and Naloxone LC-MSMS	POS ≥ 0.2 ng/mL
bupropion (confirmed > 200 ng/mL)	LC-TOF-MS or GC-MS/NPD	Select Basic Drugs LC-MSMS	0.01 mg/L
butalbital**	LC-TOF-MS (neg mode)	Barbiturates GC-MS	0.5 mg/L
carbon monoxide†	CO-Oximeter Spectrophotometry	CO-Oximeter Spectrophotometry	≥ 5% saturation carboxyhemoglobin
carboxy-THC (delta-9)	Cannabinoids LC-MSMS Screen	Cannabinoids LC-MSMS	5 ng/mL
carisoprodol	LC-TOF-MS or GC-MS/NPD	Carisoprodol and Meprobamate GC-MS	1 mg/L
chlordiazepoxide	LC-TOF-MS or GC-MS/NPD	Benzodiazepines LC-AJS/LC-MSMS	0.01 mg/L
citalopram (confirmed > 200 ng/mL)	LC-TOF-MS or GC-MS/NPD	Select Basic Drugs LC-MSMS	0.01 mg/L
clobazam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
clomipramine	LC-TOF-MS or GC-MS/NPD	Tricyclic Antidepressants LC-MSMS	0.025 mg/L
clonazepam	LC-TOF-MS	Benzodiazepines LC-AJS/LC-MSMS	0.01 mg/L
clonazepam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
cocaethylene	LC-TOF-MS or GC-MS/NPD	Cocaine and Metabolites GC-MS	0.01 mg/L
cocaine	LC-TOF-MS or GC-MS/NPD	Cocaine and Metabolites GC-MS	0.01 mg/L
codeine	LC-TOF-MS or GC-MS/NPD	Opiates LC-MSMS	0.01 mg/L
cyclobenzaprine (confirmed > 100 ng/mL)	LC-TOF-MS or GC-MS/NPD	Select Basic Drugs LC-MSMS	0.01 mg/L
delorazepam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
demoxepam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
desalkylfurazepam	LC-TOF-MS	Benzodiazepines LC-AJS/LC-MSMS	5 ng/mL
desipramine (confirmed > 200 ng/mL)	LC-TOF-MS or GC-MS/NPD	Tricyclic Antidepressants LC-MSMS	0.025 mg/L
dextromethorphan (confirmed > 50 ng/mL)	LC-TOF-MS or GC-MS/NPD	Select Basic Drugs GC-MS/NPD	0.05 mg/L
diazepam	LC-TOF-MS or GC-MS/NPD	Benzodiazepines LC-AJS/LC-MSMS	0.01 mg/L
diphenhydramine (confirmed > 50 ng/mL)	LC-TOF-MS or GC-MS/NPD	Select Basic Drugs GC-MS/NPD	0.05 mg/L
doxepin (confirmed > 200 ng/mL)	LC-TOF-MS or GC-MS/NPD	Tricyclic Antidepressants LC-MSMS	0.025 mg/L
estazolam	LC-TOF-MS	Benzodiazepines LC-AJS/LC-MSMS	5 ng/mL
etizolam	LC-TOF-MS	Benzodiazepines LC-AJS/LC-MSMS	5 ng/mL
fentanyl*	LC-TOF-MS or GC-MS/NPD or Fentanyl LC-MSMS Screen	Fentanyl/Norfentanyl LC-MSMS	0.5 ng/mL
flualprazolam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
flubromazepam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
flubromazolam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
flunitrazepam	LC-TOF-MS	Benzodiazepines LC-AJS/LC-MSMS	5 ng/mL
flunitrazepam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
fluoxetine (confirmed > 200 ng/mL)	LC-TOF-MS or GC-MS/NPD	Selective Serotonin Reuptake Inhibitors by GC-MS	0.025 mg/L
flurazepam	LC-TOF-MS	Benzodiazepines LC-AJS/LC-MSMS	5 ng/mL
gabapentin	LC-TOF-MS	Gabapentin by LC-MS	1 mg/L
hydrocodone	LC-TOF-MS or GC-MS/NPD	Opiates LC-MSMS	0.01 mg/L
hydromorphone	LC-TOF-MS	Opiates LC-MSMS	2 ng/mL
imipramine (confirmed > 200 ng/mL)	LC-TOF-MS or GC-MS/NPD	Tricyclic Antidepressants LC-MSMS	0.025 mg/L
lorazepam	LC-TOF-MS	Benzodiazepines LC-AJS/LC-MSMS	5 ng/mL
lormetazepam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
MDA	LC-TOF-MS or GC-MS/NPD	Amphetamines LC-MSMS	0.01 mg/L
MDMA	LC-TOF-MS or GC-MS/NPD	Amphetamines LC-MSMS	0.01 mg/L
meclonazepam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
meprobamate	LC-TOF-MS or GC-MS/NPD	Carisoprodol and Meprobamate GC-MS	1 mg/L
methadone	LC-TOF-MS or GC-MS/NPD	Methadone LC-MS	0.01 mg/L
methamphetamine	LC-TOF-MS	Amphetamines LC-MSMS	0.01 mg/L
midazolam	LC-TOF-MS	Benzodiazepines LC-AJS/LC-MSMS	5 ng/mL
morphine	LC-TOF-MS	Opiates LC-MSMS	0.01 mg/L
naloxone*	LC-TOF-MS	Buprenorphine, Norbuprenorphine and Naloxone LC-MSMS	POS ≥ 0.2 ng/mL
n-desmethyloclobazam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
nimetazepam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
nitrazepam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
nitrazepam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
norbuprenorphine*	LC-TOF-MS	Buprenorphine, Norbuprenorphine and Naloxone LC-MSMS	POS ≥ 0.2 ng/mL
nordiazepam	LC-TOF-MS or GC-MS/NPD	Benzodiazepines LC-AJS/LC-MSMS	0.01 mg/L
norfentanyl*	LC-TOF-MS	Fentanyl/Norfentanyl LC-MSMS	POS ≥ 0.5 ng/mL
nortriptyline	LC-TOF-MS or GC-MS/NPD	Tricyclic Antidepressants LC-MSMS	0.025 mg/L
o-desmethylvenlafaxine (confirmed > 200 ng/mL)	LC-TOF-MS	Select Basic Drugs LC-MSMS	0.01 mg/L
oxazepam	LC-TOF-MS or GC-MS/NPD	Benzodiazepines LC-AJS/LC-MSMS	0.01 mg/L
oxycodone	LC-TOF-MS or GC-MS/NPD	Opiates LC-MSMS	0.01 mg/L
oxymorphone	LC-TOF-MS	Opiates LC-MSMS	0.01 mg/L
pentobarbital**	LC-TOF-MS (neg mode)	Barbiturates GC-MS	0.5 mg/L
phenazepam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
phencyclidine	LC-TOF-MS or GC-MS/NPD	Phencyclidine GC-MS	0.01 mg/L
phenobarbital**	LC-TOF-MS (neg mode)	Barbiturates GC-MS	0.5 mg/L
pseudoephedrine	LC-TOF-MS or GC-MS/NPD	Amphetamines LC-MSMS	0.01 mg/L
pyrazolam	LC-TOF-MS	Designer Benzodiazepines LC-MSMS	POS ≥ 5 ng/mL
quetiapine	LC-TOF-MS or GC-MS/NPD	Benzodiazepines and Quetiapine LC-MSMS	0.02 mg/L
secobarbital**	LC-TOF-MS (neg mode)	Barbiturates GC-MS	0.5 mg/L
sertraline (confirmed > 200 ng/mL)	LC-TOF-MS or GC-MS/NPD	Selective Serotonin Reuptake Inhibitors by GC-MS	POS ≥ 0.025 mg/L
temazepam	LC-TOF-MS or GC-MS/NPD	Benzodiazepines LC-AJS/LC-MSMS	0.01 mg/L
THC (delta-9)	LC-MSMS Cannabinoids Screen	Cannabinoids LC-MSMS	1 ng/mL
tramadol (confirmed > 100 ng/mL)	LC-TOF-MS or GC-MS/NPD	Basic Drugs GC-MS/NPD	0.05 mg/L
trazodone (confirmed > 200 ng/mL)	LC-TOF-MS or GC-MS/NPD	Trazodone LC-MS	0.02 mg/L
triazolam	LC-TOF-MS	Benzodiazepines and Quetiapine LC-MSMS	0.01 mg/L
trimipramine (confirmed > 200 ng/mL)	LC-TOF-MS	Tricyclic Antidepressants LC-MSMS	0.025 mg/L
venlafaxine (confirmed > 200 ng/mL)	LC-TOF-MS or GC-MS/NPD	Select Basic Drugs LC-MSMS	0.01 mg/L
zolpidem	LC-TOF-MS or GC-MS/NPD	Zolpidem LC-MS	0.01 mg/L
zopiclone	LC-TOF-MS	Benzodiazepines LC-AJS/LC-MSMS	POS ≥ 0.01 mg/L

*Denotes drugs detected by LC-TOF-MS at concentrations > therapeutic levels; targeted screens are available for detection of parent or metabolites at lower concentrations.

**Barbiturates detected by LC-TOF-MS in negative mode only; negative mode analysis performed based on case circumstances/request information.

†Carbon monoxide testing is performed only if requested by the customer; this test method is not included in the scope of the laboratory's ANAB accreditation.

NOTE: LC-TOF-MS analysis is limited to blood specimens only. Urine, serum and tissue homogenate specimens are screened by EMIT, and/or GC-MS/NPD and/or LC-MSMS cannabinoids screen.

Benzodiazepine confirmation for urine, serum or tissue homogenate may be performed by Benzodiazepines and Quetiapine LC-MSMS (in place of Benzodiazepines LC-AJS/LC-MSMS), with limit for qualitative or quantitative reporting at 0.01 mg/L.

**Washington State Patrol Toxicology Laboratory
Testing Scope B**

Testing Scope B lists analytes which may be identified in standard screening analyses, but are not confirmed as part of the laboratory's standard testing protocol. Note that confirmation testing will not be performed based solely on the inclusion of these analytes on the submitted Request for Analysis form. The Toxicology Laboratory evaluates whether confirmation is warranted, based on individual case circumstances or communication with the customer. Confirmation of these analytes may require that testing be performed by an external laboratory.

Drug Analysis

Drug	Screen Method	Drug	Screen Method
3-methyl fentanyl	LC-TOF-MS	lamotrigine	LC-TOF-MS
4-ANPP	LC-TOF-MS	levetiracetam	LC-TOF-MS
4-methoxy-butyryl fentanyl	LC-TOF-MS	lidocaine	LC-TOF-MS or GC-MS/NPD
7-hydroxymitragynine	LC-TOF-MS	loperamide	LC-TOF-MS
acetyl fentanyl	LC-TOF-MS	MDPV	LC-TOF-MS or GC-MS/NPD
acetyl norfentanyl	LC-TOF-MS	menitrazepam	LC-TOF-MS
acryl fentanyl	LC-TOF-MS	meperidine	LC-TOF-MS or GC-MS/NPD
4-ANPP	LC-TOF-MS	metaxalone	LC-TOF-MS
adinazolam	LC-TOF-MS	methaqualone	LC-TOF-MS
amantadine	LC-TOF-MS	methocarbamol	LC-TOF-MS
aripiprazole	LC-TOF-MS	methylclonazepam	LC-TOF-MS
atenolol	LC-TOF-MS	methylone	LC-TOF-MS
atomoxetine	LC-TOF-MS	methylphenidate	LC-TOF-MS
baclofen	LC-TOF-MS	metizolam	LC-TOF-MS
benzocaine	LC-TOF-MS or GC-MS/NPD	metoprolol	LC-TOF-MS
β-hydroxythiofentanyl	LC-TOF-MS	mirtazapine	LC-TOF-MS
bromazepam	LC-TOF-MS	mitragynine	LC-TOF-MS
brompheniramine	LC-TOF-MS	naltrexone	LC-TOF-MS
brorphine	LC-TOF-MS	naproxen	LC-TOF-MS
bupivacaine	LC-TOF-MS or GC-MS/NPD	nifoxipam	LC-TOF-MS
buspirone	LC-TOF-MS	norfluoxetine	LC-TOF-MS or GC-MS/NPD
butyryl fentanyl	LC-TOF-MS	norketamine	LC-TOF-MS
caffeine	LC-TOF-MS or GC-MS/NPD	normeperidine	LC-TOF-MS
camazepam	LC-TOF-MS	norquetiapine	LC-TOF-MS
carbamazepine	LC-TOF-MS	n-propylamphetamine	LC-TOF-MS
carfentanil	LC-TOF-MS	olanzapine	LC-TOF-MS
cathinone	LC-TOF-MS	oxcarbazepine	LC-TOF-MS
cetirizine	LC-TOF-MS	para-fluorobutyryl fentanyl	LC-TOF-MS
cevadine	LC-TOF-MS	para-fluorofentanyl	LC-TOF-MS
chlorpheniramine	LC-TOF-MS or GC-MS/NPD	paroxetine	LC-TOF-MS
chlorpromazine	LC-TOF-MS or GC-MS/NPD	perlapine	LC-TOF-MS
clonidine	LC-TOF-MS or GC-MS/NPD	phentermine	LC-TOF-MS
cloniprazepam	LC-TOF-MS	phenytoin	LC-TOF-MS
clotiazepam	LC-TOF-MS	pregabalin	LC-TOF-MS
clozapine	LC-TOF-MS or GC-MS/NPD	primidone	LC-TOF-MS
cyproheptadine	LC-TOF-MS	promethazine	LC-TOF-MS
deschloroketamine	LC-TOF-MS	propranolol	LC-TOF-MS
desmethylclomipramine	LC-TOF-MS	propoxyphene	LC-TOF-MS or GC-MS/NPD
desmethyldoxepin	LC-TOF-MS or GC-MS/NPD	protriptyline	LC-TOF-MS
desmethylsertraline	LC-TOF-MS or GC-MS/NPD	remifentanil	LC-TOF-MS
diclozepam	LC-TOF-MS	remifentanil acid	LC-TOF-MS
diltiazem	LC-TOF-MS or GC-MS/NPD	risperidone	LC-TOF-MS
doxylamine	LC-TOF-MS or GC-MS/NPD	salicylic acid**	LC-TOF-MS (neg mode)
duloxetine	LC-TOF-MS	tapentadol	LC-TOF-MS
ephedrine	LC-TOF-MS	thioridazine	LC-TOF-MS
flutazolam	LC-TOF-MS	tizanidine	LC-TOF-MS
fonazepam	LC-TOF-MS	topiramate**	LC-TOF-MS (neg mode)
furanyl fentanyl	LC-TOF-MS	trimipramine	LC-TOF-MS
guaifenesin	LC-TOF-MS	valeryl fentanyl	LC-TOF-MS
halazepam	LC-TOF-MS	valproic acid**	LC-TOF-MS (neg mode)
hydroxyzine	LC-TOF-MS	verapamil	LC-TOF-MS or GC-MS/NPD
ibuprofen**	LC-TOF-MS (neg mode)	veratridine	LC-TOF-MS
isobutyryl fentanyl	LC-TOF-MS	vilazodone	LC-TOF-MS
isotonitazene	LC-TOF-MS	zaleplon	LC-TOF-MS
ketamine	LC-TOF-MS or GC-MS/NPD	zonisamide	LC-TOF-MS
lacosamide	LC-TOF-MS		

NOTE: This list is not all-inclusive; additional analytes may be added to the LC-TOF-MS database as reference materials become available.

**Analytes detected by LC-TOF-MS in negative mode only; negative mode analysis performed based on case circumstances/request information.

Testing Scope C

Testing Scope C lists those analytes for which the laboratory does not have the capability to detect and/or confirm in the standard testing protocol. The Toxicology Laboratory evaluates whether testing is warranted, based on individual case circumstances, information on the submitted Request for Analysis form, or communication with the customer however, analysis will not be performed based solely on the inclusion of these analytes on the submitted request for analysis form. Any screening or targeted analyses/confirmation testing for these analytes will be performed by an external laboratory.

Drug
cyanide
designer opioids
ethylene glycol
GHB
haloperidol
lithium
LSD
mesoridazine
metoclopramide
nefazidone
nitrous oxide
pentazocine
pheniramine
phenethylpropanolamine
procaine
propofol
psilocin
strychnine
synthetic cannabinoids "spice"
synthetic cathinones "bath salts"
trimethoprim
ziprasidone

Washington State Patrol Toxicology Laboratory

Testing Scope A - Measurement Uncertainty for Quantitative Methods

Analyte	Confirmation Method	Expanded Uncertainty	Coverage Factor
6-acetylmorphine	Opiates LC-MSMS	24.81%	k = 3, 99.7%
7-aminoclonazepam	Benzodiazepines LC-AJS/LC-MSMS	29.14%	k = 3, 99.7%
acetaminophen	Acetaminophen HPLC	41.31%	k = 3, 99.7%
alpha-OH-alprazolam	Benzodiazepines LC-AJS/LC-MSMS	27.03%	k = 3, 99.7%
alprazolam	Benzodiazepines LC-AJS/LC-MSMS	27.85%	k = 3, 99.7%
amitriptyline	Tricyclic Antidepressants LC-MSMS	19.35%	k = 3, 99.7%
amobarbital	Barbiturates GC-MS	26.31%	k = 3, 99.7%
amphetamine	Amphetamines LC-MSMS	18.87%	k = 3, 99.7%
benzoylcegonine	Cocaine and Metabolites GC-MS	18.18%	k = 3, 99.7%
bupropion	Select Basic Drugs LC-MSMS	21.00%	k = 3, 99.7%
butalbital	Barbiturates GC-MS	26.31%	k = 3, 99.7%
carboxy-THC (delta-9)	Cannabinoids LC-MSMS	21.66%	k = 3, 99.7%
carisoprodol	Carisoprodol and Meprobamate GC-MS	41.61%	k = 3, 99.7%
chlordiazepoxide	Benzodiazepines LC-AJS/LC-MSMS	24.17%	k = 3, 99.7%
citalopram	Select Basic Drugs LC-MSMS	25.83%	k = 3, 99.7%
clomipramine	Tricyclic Antidepressants LC-MSMS	19.35%	k = 3, 99.7%
clonazepam	Benzodiazepines LC-AJS/LC-MSMS	28.55%	k = 3, 99.7%
cocaethylene	Cocaine and Metabolites GC-MS	18.18%	k = 3, 99.7%
cocaine	Cocaine and Metabolites GC-MS	18.18%	k = 3, 99.7%
codeine	Opiates LC-MSMS	24.81%	k = 3, 99.7%
cyclobenzaprine	Select Basic Drugs LC-MSMS	18.54%	k = 3, 99.7%
desalkylflurazepam	Benzodiazepines LC-AJS/LC-MSMS	27.11%	k = 3, 99.7%
desipramine	Tricyclic Antidepressants LC-MSMS	19.35%	k = 3, 99.7%
desmethylclomipramine	Tricyclic Antidepressants LC-MSMS	19.35%	k = 3, 99.7%
desmethyldoxepin	Tricyclic Antidepressants LC-MSMS	19.35%	k = 3, 99.7%
dextromethorphan	Select Basic Drugs GC-MS/NPD	28.38%	k = 3, 99.7%
diazepam	Benzodiazepines LC-AJS/LC-MSMS	22.58%	k = 3, 99.7%
diphenhydramine	Select Basic Drugs GC-MS/NPD	28.38%	k = 3, 99.7%
doxepin	Tricyclic Antidepressants LC-MSMS	19.35%	k = 3, 99.7%
estazolam	Benzodiazepines LC-AJS/LC-MSMS	26.86%	k = 3, 99.7%
ethanol	Headspace GC	8.20%	k = 3, 99.7%
etizolam	Benzodiazepines LC-AJS/LC-MSMS	28.94%	k = 3, 99.7%
fentanyl	Fentanyl/Norfentanyl LC-MSMS	46.83%	k = 3, 99.7%
flunitrazepam	Benzodiazepines LC-AJS/LC-MSMS	26.13%	k = 3, 99.7%
fluoxetine	Selective Serotonin Reuptake Inhibitors by GC-MS	20.31%	k = 3, 99.7%
flurazepam	Benzodiazepines LC-AJS/LC-MSMS	23.99%	k = 3, 99.7%
gabapentin	Gabapentin by LC-MS	27.75%	k = 3, 99.7%
hydrocodone	Opiates LC-MSMS	24.81%	k = 3, 99.7%
hydromorphone	Opiates LC-MSMS	24.81%	k = 3, 99.7%
imipramine	Tricyclic Antidepressants LC-MSMS	19.35%	k = 3, 99.7%
lorazepam	Benzodiazepines LC-AJS/LC-MSMS	25.19%	k = 3, 99.7%
MDA	Amphetamines LC-MSMS	20.55%	k = 3, 99.7%
MDMA	Amphetamines LC-MSMS	19.23%	k = 3, 99.7%
meprobamate	Carisoprodol and Meprobamate GC-MS	41.61%	k = 3, 99.7%
methadone	Methadone LC-MS	26.94%	k = 3, 99.7%
methamphetamine	Amphetamines LC-MSMS	18.99%	k = 3, 99.7%
midazolam	Benzodiazepines LC-AJS/LC-MSMS	23.72%	k = 3, 99.7%
morphine	Opiates LC-MSMS	24.81%	k = 3, 99.7%
nordiazepam	Benzodiazepines LC-AJS/LC-MSMS	26.66%	k = 3, 99.7%
norfentanyl	Fentanyl/Norfentanyl LC-MSMS (POS only as of 4/24/21)	46.83%	k = 3, 99.7%
norfluoxetine	Selective Serotonin Reuptake Inhibitors by GC-MS	20.31%	k = 3, 99.7%
nortriptyline	Tricyclic Antidepressants LC-MSMS	19.35%	k = 3, 99.7%
o-desmethylvenlafaxine	Select Basic Drugs LC-MSMS	21.09%	k = 3, 99.7%
oxazepam	Benzodiazepines LC-AJS/LC-MSMS	23.50%	k = 3, 99.7%
oxycodone	Opiates LC-MSMS	24.81%	k = 3, 99.7%
oxymorphone	Opiates LC-MSMS	24.81%	k = 3, 99.7%
pentobarbital	Barbiturates GC-MS	26.31%	k = 3, 99.7%
phencyclidine	Phencyclidine GC-MS	23.49%	k = 3, 99.7%
phenobarbital	Barbiturates GC-MS	26.31%	k = 3, 99.7%
pseudoephedrine	Amphetamines LC-MSMS	22.29%	k = 3, 99.7%
quetiapine	Benzodiazepines and Quetiapine LC-MSMS	contact the laboratory	
secobarbital	Barbiturates GC-MS	26.31%	k = 3, 99.7%
temazepam	Benzodiazepines LC-AJS/LC-MSMS	26.66%	k = 3, 99.7%
THC (delta-9)	Cannabinoids LC-MSMS	26.00%	k = 3, 99.7%
tramadol	Basic Drugs GC-MS/NPD	28.38%	k = 3, 99.7%
trazodone	Trazodone LC-MS	18.69%	k = 3, 99.7%
triazolam	Benzodiazepines and Quetiapine LC-MSMS	23.13%	k = 3, 99.7%
trimipramine	Tricyclic Antidepressants LC-MSMS	19.35%	k = 3, 99.7%
venlafaxine	Select Basic Drugs LC-MSMS	22.68%	k = 3, 99.7%
zolpidem	Zolpidem LC-MS	28.77%	k = 3, 99.7%

NOTE: Measurement uncertainty for ethanol and THC appear on the Toxicology Test Report. Measurement uncertainty for other drugs may be requested from the laboratory for an individual case. The coverage factor of k = 3 is used, corresponding to the confidence level of approximately 99.7%.