

Reporting Title: Lorazepam (Ativan)**Performing Location:** Medtox Laboratories, Inc.**Specimen Requirements:****Submit only 1 of the following specimens:****Plasma:****Specimen Type:** Plasma**Collection Container/Tube:** Green top**Submission Container/Tube:** Plastic vial**Specimen Volume:** 2 mL**Collection Instructions:** Draw blood in a green-top sodium heparin tube(s), **plasma gel tube is not acceptable.** Centrifuge and send 2 mL of plasma refrigerated in a plastic vial.**Serum:****Specimen Type:** Serum**Collection Container/Tube:** Red top**Submission Container/Tube:** Plastic vial**Specimen Volume:** 2 mL**Collection Instructions:** Draw blood in a plain, red-top tube(s), **serum gel tube is not acceptable.** Centrifuge and send 2 mL of serum refrigerated in a plastic vial.

Specimen Type	Temperature	Time	Special Container
Varies	Refrigerated (preferred)	14 days	
	Frozen	180 days	
	Ambient	72 hours	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
Z1123	Lorazepam (Ativan)	Alphanumeric		59703-9

LOINC® and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

80346

G0480 (if appropriate)

Reference Values:

Reference Range: 50.0 - 240.0 ng/mL