

Reporting Title: Methsuximide (Celontin)
Performing Location: Medtox Laboratories, Inc.

Specimen Requirements:
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 2 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 2 mL of serum refrigerated in a plastic vial.

| Specimen Type | Temperature | Time | Special Container |
|---------------|--------------------------|----------|-------------------|
| Varies | Refrigerated (preferred) | 7 days | |
| | Frozen | 180 days | |
| | Ambient | 72 hours | |

Result Codes:

| Result ID | Reporting Name | Type | Unit | LOINC® |
|-----------|----------------|--------------|------|--------|
| Z1107 | Methsuximide | Alphanumeric | | 3801-8 |

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

Supplemental Report:
No

CPT Code Information:
80339

Reference Values:
10.0 - 40.0 ug/mL

Methsuximide measured as desmethylmethsuximide.