

Reporting Title: Methadone and Metabolite, S**Performing Location:** Rochester**Specimen Requirements:**

Container/Tube: Red top (Serum gel/SST are not acceptable)

Submission Container/Tube: Plastic vial

Specimen Volume: 0.5 mL

Collection Instructions: Centrifuge and aliquot serum into plastic vial within 2 hours of collection.

Specimen Minimum Volume:

0.2 mL

Forms:

If not ordering electronically, complete, print, and send a Therapeutics Test Request (T831) with the specimen.

Specimen Type	Temperature	Time	Special Container
Serum Red	Refrigerated (preferred)	14 days	
	Ambient	14 days	
	Frozen	14 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
36309	Methadone	Numeric	ng/mL	3772-1
36310	EDDP	Numeric	ng/mL	60071-8

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

80358

G0480 (if appropriate)

Reference Values:

Not established