

Reporting Title: Methylphenidate and Metabolite, U**Performing Location:** Rochester**Additional Testing Requirements:**

If urine creatinine is required or adulteration of the sample is suspected, also order ADULT / Adulterants Survey, Random, Urine. For more information, see ADULT / Adulterants Survey, Random, Urine.

Specimen Requirements:

Supplies: Sarstedt 5 mL Aliquot Tube (T914)

Collection Container/Tube: Plastic urine container

Submission Container/Tube: Plastic, 5-mL tube

Specimen Volume: 5 mL

Collection Instructions:

1. Collect a random urine specimen.
2. No preservative.

Additional Information:

1. No specimen substitutions.
2. STATS are not accepted for this test.

Specimen Minimum Volume:

1 mL

Forms:

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

Specimen Type	Temperature	Time	Special Container
Urine	Refrigerated (preferred)	10 days	
	Frozen	28 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
608882	Methylphenidate by LC-MS/MS	Alphanumeric	ng/mL	20548-4
608883	Ritalinic Acid by LC-MS/MS	Alphanumeric	ng/mL	72790-9
608884	Methylphenidate Interpretation	Alphanumeric		69050-3

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

80360

G0480 (if appropriate)

Reference Values:

Negative

Cutoff concentrations:

Methylphenidate by LC-MS/MS: 10 ng/mL

Ritalinic Acid by LC-MS/MS: 50 ng/mL