
Reporting Title: Drug Screen, Prescription/OTC, U
Performing Location: Rochester**Ordering Guidance:**

This test is not performed using chain of custody. For chain-of-custody testing, order PDSUX / Drug Screen, Prescription/Over the Counter, Chain of Custody, Random, Urine.

Specimen Requirements:

Supplies: Sarstedt Aliquot Tube, 5 mL (T914)

Collection Container/Tube: Plastic urine container

Submission Container/Tube: Plastic vial

Specimen Volume: 5 mL

Collection Instructions:

1. Collect a random urine specimen.
2. No preservative. Specimens containing preservative may be canceled.

Specimen Minimum Volume:

1.1 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)	14 days	
	Frozen	14 days	
	Ambient	3 hours	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
31260	Drugs detected:	Alphanumeric		12286-1
45529	Suspect Drug	Alphanumeric		No LOINC Needed

LOINC and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

80307

Reference Values:

Drugs detected are presumptive. Additional testing may be required to confirm the presence of any drugs detected.