



Laboratory Report

SPECIMEN INFORMATION

Requisition #:
Accession #:
Collected:
Received:
Reported:
Specimen ID:

DONOR INFORMATION

Name:
Primary ID:
Reason:
Collection Site:

CLIENT INFORMATION

15046775
REQUEST A TEST LTD
7027 MILL RD STE 201
BRECKSVILLE, OH 44141

Seals Intact: Yes
Split Specimen Received: Y
Tests Ordered: 19023N (SAP 9-50/300 EX OP/N)

Urine Specimen Validity Testing

Acceptable Range

CREATININE	22.1 mg/dL	>= 20 mg/dL
pH	6.0	4.5-8.9
OXIDIZING ADULTERANTS	Negative	

Urine Substance Abuse Panel

	Initial Test Level	MS Confirm Test Level
AMPHETAMINE/METHAMPHETAMINE	1000 ng/mL	500 ng/mL
BARBITURATES	300 ng/mL	200 ng/mL
BENZODIAZEPINES	300 ng/mL	200 ng/mL
COCAINE METABOLITE (BZE)	300 ng/mL	150 ng/mL
MARIJUANA METABOLITE (THCA)	50 ng/mL	15 ng/mL
METHADONE	300 ng/mL	200 ng/mL
OPIATES	300 ng/mL	300 ng/mL
OXYCODONE/OXYMORPHONE	100 ng/mL	100 ng/mL
PHENCYCLIDINE	25 ng/mL	25 ng/mL
PROPOXYPHENE	300 ng/mL	200 ng/mL

AMPHETAMINE/METHAMPHETAMINE	Negative
BARBITURATES	Negative
BENZODIAZEPINES	Negative
COCAINE METABOLITE (BZE)	Negative
MARIJUANA METABOLITE (THCA)	Negative
METHADONE	Negative
OPIATES	Negative
OXYCODONE/OXYMORPHONE	Negative
PHENCYCLIDINE	Negative
PROPOXYPHENE	Negative

CERTIFYING TECHNICIAN/SCIENTIST: KSEI01

SPECIMEN RECEIVED AND PROCESSED IN THE LENEXA DHHS CERTIFIED LABORATORY USING APPLICABLE GUIDELINES.

LAB: Quest Diagnostics-Lenexa
10101 Renner Blvd
Lenexa KS 66219

>> END OF REPORT <<