

TOXICOLOGY LABORATORY TEST REPERTOIRE 2021/2022

**Cardiff Toxicology Laboratory
4th Floor, Routledge Academic Centre,
University Hospital Llandough,
Penlan Road
Llandough
CF64 2XX**

Laboratory Open Monday – Friday 08:30 to 17:00

General enquiries	Emma Taylor (Office Manager) Tel – 02921 826894 Email emma.taylor6@wales.nhs.uk
Technical advice	Sandra Morgan (Laboratory- Senior Biomedical Scientist) sandra.morgan3@wales.nhs.uk Nichola Norman (Laboratory- Senior Biomedical Scientist) nichola.norman@wales.nhs.uk
Clinical advice	Katie Jones / Liz Palmer (Clinical Scientists) 029 218 25299 or Katie.Jones14@wales.nhs.uk Joanne Rogers (Consultant Clinical Scientist) 029 218 26892 or Joanne.Rogers@wales.nhs.uk

For urgent requests please contact the laboratory. Samples will be processed as soon as it is feasible to do so.

Gel tubes are not acceptable for most assays due to the potential for chromatographic interference. Samples from gel samples are accepted for cholinesterase phenotyping / pseudocholinesterase activity only.

It is possible for other medications to interfere with analysis. Please state current medications.

For therapeutic drug monitoring it is usual to collect trough samples once steady state is achieved. Some exceptions do apply (notably anti-TB drugs and olanzapine).

Samples should be separated and stored at 2-8°C prior to sending (with the exception of thiopental – please see below)

Assay	Sample Requirement (ml)*	Sample Handling / Transport	Methodology	Reference Range	Turnaround Time (working days)	EQA	Clinical Utility	NHS Charge ¹ 2020/21 (£)
Amiodarone	EDTA Plasma 1 mL (minimum vol 0.5 mL) Sample timing less important due to long half-life.	First Class Post	HPLC	0.5 – 2.0mg/L	7	LGC Standards	Therapeutic drug monitoring (limited utility in toxicity due to long tissue half life)	£31.86
Amitriptyline and nortriptyline	EDTA Plasma 2 mL (minimum vol 1 mL) Trough sample	First Class Post	HPLC	Sum of amitriptyline plus nortriptyline 80 – 200 µg/L	7	LGC Standards	Therapeutic drug monitoring	£31.86
Buprenorphine Confirmation	See <i>opioid differentiation</i>							
Cannabis Confirmation	Urine, plain 2mL	First Class Post	LC-MS (accurate mass)	N/A	7	LGC Standards	Drugs of Abuse	£14.14
Carboxy-haemoglobin	EDTA Whole Blood 0.5mL (minimum vol 100 uL)	First Class Post	Spectrophotometry	< 3 % Smokers may be higher	7	LGC Standards	Suspected exposure / sample not suitable for blood gas analysis	£32.16
Cholinesterase Phenotype	EDTA Plasma 0.5 mL (minimum vol 150 uL) If collecting samples after an episode of prolonged apnoea please wait at least 48 hours after surgery.	First Class Post	Spectrophotometry	Total activity: 650 - 1450 U/L	7	UK NEQAS sample exchange	Suxamethonium apnoea – assessment of risk	£20.04
Clobazam	EDTA Plasma 1 mL (minimum vol 0.5 mL)	First Class Post	HPLC	50 – 300 ug/L	7	LGC Standards	Therapeutic drug monitoring (limited utility)	£31.86

Assay	Sample Requirement (ml)*	Sample Handling / Transport	Methodology	Reference Range	Turnaround Time (working days)	EQA	Clinical Utility	NHS Charge ¹ 2020/21 (£)
Clozapine	EDTA Plasma 0.5mL (minimum vol 100 uL) Trough sample	First Class Post	LC-MS/MS	350 – 600 µg/L	7	LGC Standards	Therapeutic drug monitoring / toxicity	£23.58
Cocaine Confirmation	Urine, plain 2mL	First Class Post	LC-MS (accurate mass)	N/A	7	LGC Standards	Drugs of Abuse	£14.14
Drugs of abuse screens (amphetamine, benzodiazepine, buprenorphine, cannabis, cocaine, methadone metabolite EDDP, opiates)	Urine, plain 5mL	First Class Post	EIA Confirmatory analysis by MS will be performed on positives.	N/A	7	LGC Standards	Drugs of abuse / suspected overdose	£12.98 plus required confirmatory analysis
Ethambutol	EDTA Plasma 0.5 mL (minimum vol 250 uL) 2 h post dose. If suspect delayed absorption collect samples at 2 and 6 h post dose. If concern over toxicity collect pre-dose. Please state sample timing on the request.	First Class Post	GC-MS	2-6 mg/L For peak drug levels for a daily dose regimen. Pre-dose ethambutol concentrations should be less than 1 mg/L	7	SKML Anti TB Drugs	Therapeutic drug monitoring / toxicity	£37.74
Flecainide	EDTA Plasma 0.5 mL (minimum vol 250 uL) Trough sample	First Class Post	HPLC	0.15 – 0.9 mg/L	7	LGC Standards	Therapeutic drug monitoring	£47.98

Assay	Sample Requirement (ml)*	Sample Handling / Transport	Methodology	Reference Range	Turnaround Time (working days)	EQA	Clinical Utility	NHS Charge ¹ 2020/21 (£)
Hydroxycarbazepine	EDTA Plasma 0.5 mL (minimum vol 100 uL) Sample timing less important due to long half-life.	First Class Post	LC-MS/MS	3 – 35 mg/L	7	LGC Standards	Therapeutic drug monitoring	£31.86
Isoniazid	EDTA Plasma 2 mL (minimum vol 1 mL) 2 h post dose. If suspect delayed absorption collect samples at 2 and 6 h post dose.	First Class Post	HPLC	3 – 5 mg/L For peak drug levels for a daily dose regimen.	7	SKML Anti TB Drugs	Therapeutic drug monitoring	£37.74
Isopropanol	see <i>Volatile Alcohols</i>							
Itraconazole	EDTA Plasma 0.5 mL (minimum vol 250 uL) Trough sample	First Class Post	HPLC	➤ 0.5mg/L	7	UK NEQAS	Therapeutic drug monitoring	£31.86
L Amphetamine Fraction	Urine 2mL	First Class Post	GC-NPD	< 20% prescribed (d) amph 20-50% Mixture. > 50% "street" amph	7	Reference Material	Drugs of Abuse Prescribed / 'street' amphetamine	£37.74
Lamotrigine	EDTA Plasma 0.5 mL (minimum vol 100 uL) Trough sample	First Class Post	LC-MS/MS	3 – 15 mg/L	7	LGC Standards	Therapeutic drug monitoring	£20.04

Assay	Sample Requirement (ml)*	Sample Handling / Transport	Methodology	Reference Range	Turnaround Time (working days)	EQA	Clinical Utility	NHS Charge ¹ 2020/21 (£)
Levetiracetam	EDTA Plasma 0.5 mL (minimum vol 100 uL) Trough sample	Levetiracetam is not stable in whole blood and plasma should be separated on the day of receipt and then stored in the fridge prior to sending. An 11% loss after 2 days has been reported in whole blood samples kept at room temperature. First Class Post	LC-MS/MS	12 – 46 mg/L	7	LGC Standards	Therapeutic drug monitoring	£20.04
Methadone Confirmation	Urine, plain 2mL	First Class Post	LC-MS (accurate mass)	N/A	7	LGC Standards	Drugs of Abuse	£14.14
Methanol	<i>see Volatile Alcohols</i>							
Mexiletine	EDTA Plasma 1 mL (minimum vol 0.5 mL)	First Class Post	HPLC	0.6 – 1.7 mg/L	7	Reference Material	Therapeutic drug monitoring	£31.86
Mitotane	EDTA Plasma 0.5 mL (minimum vol 150 uL) Trough sample / >12h post dose	First Class Post	GC-MS	14 – 20 mg/L	7	Reference Material	Therapeutic drug monitoring	£31.86
Olanzapine	EDTA Plasma 0.5 mL (minimum vol 100 uL) 12 hours post dose	Samples must be separated within 7 hours. Protect from light First Class Post	LC-MS/MS	20 – 40 µg/L 12h post dose	7	LGC Standards	Therapeutic drug monitoring	£37.74

Assay	Sample Requirement (ml)*	Sample Handling / Transport	Methodology	Reference Range	Turnaround Time (working days)	EQA	Clinical Utility	NHS Charge ¹ 2020/21 (£)
Opioid Differentiation (tramadol, dihydrocodeine, codeine, morphine, 6-acetylmorphine, oxycodone, buprenorphine, norbuprenorphine and fentanyl)	Urine, plain 2mL	First Class Post	LC-MS	N/A	7	LGC Standards	Drugs of Abuse	£14.14
Oxcarbazepine	See <i>hydroxycarbazepine</i>							
Perhexiline	EDTA Plasma 0.5 mL (minimum vol 250 uL)	First Class Post	GC-MS	0.15 – 0.60	7	Perhexiline QA Programme QEH Australia	Therapeutic drug monitoring	£23.58
Pseudocholinesterase (activity only)	EDTA Plasma 0.5 mL (minimum vol 150 uL)	First Class Post	Spectrophotometry	650 – 1450 U/L	7	UK NEQAS sample exchange	Acute organo-phosphate exposure (limitations apply) For assessment of risk for suxamethonium apnoea cholinesterase phenotyping is usually advised	£17.69
Pyrazinamide	EDTA Plasma 0.5 mL (minimum vol 150 uL) 2 h post dose. If suspect delayed absorption collect samples at 2 and 6 h post dose.	First Class Post	HPLC	20-40 mg/L For peak drug levels for a daily dose regimen	7	SKML Anti TB Drugs	Therapeutic drug monitoring	£31.86

Assay	Sample Requirement (ml)*	Sample Handling / Transport	Methodology	Reference Range	Turnaround Time (working days)	EQA	Clinical Utility	NHS Charge ¹ 2020/21 (£)
Quetiapine	EDTA Plasma 0.5 mL (minimum vol 100 uL)	First Class Post	LC-MS/MS	200-600 µg/L However trough levels may be as low as 50	7	LGC Standards	Therapeutic drug monitoring (limited utility)	£31.86
Risperidone and 9-hydroxy risperidone	EDTA Plasma 0.5 mL (minimum vol 100 uL) Sample timing less important due to long half-life.	First Class Post	HPLC	Total risperidone (sum of risperidone and 9-hydroxy risperidone) 20-60 µg/L	7	LGC Standards	Therapeutic drug monitoring	£31.86
Sertraline	EDTA Plasma 2 mL (minimum vol 1 mL) Trough sample	First Class Post	HPLC	50-250 µg/L	7	LGC Standards	Therapeutic drug monitoring	£31.86
Thiopental	EDTA Plasma 1 mL (minimum vol 250 uL)	Discuss with laboratory prior to sending samples. Due to stability concerns samples MUST arrive within 12 hours of venepuncture . Alternatively plasma may be frozen for transportation.	GC-NPD	None	24 Hours.	Reference Material	Brain stem death testing.	£42.64
Topiramate	EDTA Plasma 0.5 mL (minimum vol 100 uL) Sample timing less important due to long half-life.	First Class Post	LC-MS/MS	5 – 20 mg/L	7	LGC Standards	Therapeutic drug monitoring	£20.04

Assay	Sample Requirement (ml)*	Sample Handling / Transport	Methodology	Reference Range	Turnaround Time (working days)	EQA	Clinical Utility	NHS Charge ¹ 2020/21 (£)
Volatile Alcohols (methanol, ethanol, isopropanol and acetone)	Fluoride Oxalate Plasma Fluoride Oxalate Blood Urine, plain	Courier if urgent.	GC-FID	N/A	24 Hours	LGC Standards	Suspected toxicity	£42.64

*Minimum volumes do not allow for repeat analysis in case of assay failure.

¹An additional sample handling charge of £5 per sample applies.

There is a surcharge for non-NHS patients as follows:

An additional charge of £5 for tests less than £20

An additional charge of 25% for those tests greater than £20