Atlas Medical CE

Multi-Drug One Step Screen Test Cup Panel (Urine)
Instruction Sheet for testing of any combination of the following drugs:

Amphetamine, Barbiturates, Benzodiazepines, Cocaine, Marijuana, Methadone, Methamphetamine, Methylenedioxymethamphetamine, Opiates/Morphine, Opiates, Phencyclidine, Propoxyphene,Tramadol,Tricyclic Antidepressants, EDDP Buprenorphine and *Oxycodone* ,Ketamine with creatinine and PH.

A rapid, one step screen test for the simultaneous, qualitative detection of multiple drugs and metabolites in human urine.

IVD *For in vitro diagnostic and professional use only.*

2 30°C Store at (2-30º C)

INTENDED USE

The Multi-Drug One Step Screen Test Cup (Urine) is a lateral flow chromatographic immunoassay for the qualitative detection of any combination listed below:

Test	Calibrator	Cut-off
Amphetamine (AMP)	D-Amphetamine	1,000 ng/mL
Amphetamine (AMP)	D-Amphetamine	500 ng/mL
Barbiturates (BAR)	Secobarbital	300 ng/mL
Benzodiazepines (BZO)	Oxazepam	300 ng/mL
Cocaine (COC)	Benzoylecgonine	300 ng/mL
Marijuana (THC)	11-nor-Δ^9-THC-9 COOH	50 ng/mL
Methadone (MTD)	Methadone	300 ng/mL
Methamphetamine (MET)	D-Methamphetamine	1,000 ng/mL
Methamphetamine (MET)	D-Methamphetamine	500 ng/mL
Methylenedioxymethampheta mine (MDMA)	D,L Methylenedioxymethamphetamine	500 ng/mL
Opiates/Morphine (OPI/MOP 300)	Morphine	300 ng/mL
Opiates (OPI 2000)	Morphine	2,000 ng/mL
Phencyclidine (PCP)	Phencyclidine	25 ng/mL
Tricyclic Antidepressants (TCA)	Nortriptyline	1,000 ng/mL
EDDP (Methadone metabolite)	2-Ethylidene-1,5-dimethyl-3,3-diphenylpyrrolidine	100 ng/ml
Tramadol (TML)	Cis-Tramadol	100 ng/ml
Buprenorphine(BUP)	Buprenorphine	10 ng/ml
Buprenorphine(BUP)	Buprenorphine	5 ng/ml
Oxycodone (OXY)	Oxycodone	100ng/ml
Ketamine (KET)	Ketamine	1000 ng/ml
Propoxyphene (PPX)	Propoxyphene	25 ng/ml
Adulteration	Creatinine and PH	

INTRODUCTION

Drug of abuse is any substances thatis illegal or legal drug used inapporoperiate way. This include the repeated use of drugs to produce pleasure,alleviate stressand or avoid reality it also include using prescription drugs other than prescribed or using someone elses prescription.

PRINCIPLE

The Multi-Drug One Step Screen Test Cup (Urine) is an immunoassay based on the principle of competitive binding. Drugs which may be present in the urine specimen compete against their respective drug conjugate for binding sites on their specific antibody.

During testing, a urine specimen migrates upward by capillary action. A drug, if present in the urine specimen below its cut-off concentration, will not saturate the binding sites of its specific antibody coated on the particles. The antibody coated particles will then be captured by the immobilized drug conjugate and a visible colored line will show up in the test line region of the specific drug strip. The colored line will not form in the test line region if the drug level is above its cut-off concentration because it will saturate all the binding sites of the antibody coated on the particles.

A drug-positive urine specimen will not generate a colored line in the specific test line region of the strip because of drug competition, while a drug-negative urine specimen or a specimen containing a drug concentration less than the cut-off will generate a line in the test line region.

To serve as a procedural control, a colored line will always appear at the control line region indicating that proper volume of specimen has been added and membrane wicking has occurred.

Adulteration is the tampering of a urine specimen with the intention of altering the test results. The use of adulterants can cause false negative results in drug tests by either interfering with the screening test and/or destroying the drugs present in the urine. Dilution may also be employed in an attempt to produce false negative drug test results.

One of the best ways to test for adulteration or dilution is to determine certain urinary characteristics such as Creatinine, pH and Nitrite in urine.

Creatinine (CRE): Tests for specimen dilution. Creatinine is a waste product of Creatine, and is an amino-acid contained in muscle tissue and found in urine. A person may attempt to foil a drug test by drinking excessive amounts of water or diuretics such as herbal teas to flush the system. Creatinine and Specific Gravity are two ways to check for dilution and flushing, which are the most common mechanisms used to circumvent drug testing. Low Creatinine and Specific Gravity levels may indicate diluted urine. The absence of Creatinine (<5 mg/dL) is indicative of a specimen not consistent with human urine.

pH: Tests for the presence of acidic or alkaline adulterants in urine. Normal pH levels should be in the range of 4.0 to 9.0. Values outside of this range may indicate that the specimen has been altered.

MATERIALS

Materials Provided

- Cups with multi-drug panels
- Package insert.

Materials Required But Not Provided

- Timer

PRECAUTIONS

- For medical and other professional in vitro diagnostic use only. Do not use after the expiration date.
- The test panel should remain in the sealed pouch until use.
- All specimens should be considered potentially hazardous and handled in the same manner as an infectious agent.
- The used test panel should be discarded according to federal, state and local regulations.

STORAGE AND STABILITY

- The kit can be stored at room temperature or refrigerated (2-30°C). The test panel is stable through the expiration date printed on the sealed pouch.
- The test panel must remain in the sealed pouch until use.
- **Do not freeze.**
- Do not use beyond the expiration date.

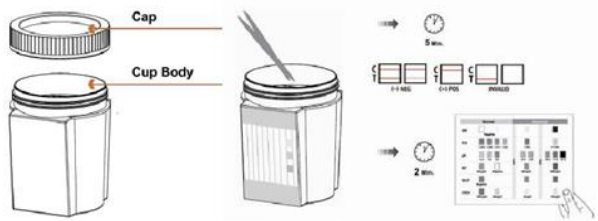
SPECIMEN COLLECTION AND PREPARATION

- The Multiple Drugs Test Cup is intended for use with human urine specimens only.
- Urine collected at any time of the day may be used.
- Turbid specimens should be centrifuged, filtered, or allowed to settle and only the clear supernatant should be used for testing.
- Perform testing immediately after specimen collection. Do not leave specimens at room temperature for prolonged periods. Urine specimens may be stored at 2-8°C for up to 2 days. For long term storage, specimens should be kept below -20°C.
- Bring specimens to room temperature prior to testing. Frozen specimens must be completely thawed and mixed well prior to testing. Avoid repeated freezing and thawing of specimens.
- If specimens are to be shipped, pack them in compliance with all applicable regulations for transportation of etiological agents.

PROCEDURE

Bring tests, specimens, and/or controls to room temperature (15-30°C) before use if specimens have been refrigerated.

1. Remove the cup from its sealed pouch and use it as soon as possible
2. Donor provides a urine specimen in the cup and screws the cap on to the cup.Start the timer.
3. Donor dates and initials the body label. Operator checks the cap for tightness.
4. Remove the peel-off label.
5. Check the temperature strip label at 2-4 minutes after specimen collection. A green color will appear to indicate the temperature of the urine specimen. The proper range for an unadulterated specimen is 90-100°F (32-38°C)
6. Drug test results are indicated by the presence or absence of colored band(s) in the result area. The result should be read at 5 minutes. Do not interpret the result after 8 minutes.
7. Positive test results must be confirmed by another test method. Send the cup and urine specimen intact to a toxicology laboratory for confirmation.
8. For the adulteration, compared with the color card, and the results should be read at 2 minutes，do not interpret the result after 5 minutes .



INTERPRETATION OF RESULTS

POSITIVE: Only one colored band appears, in the control region (C). No colored band appears in the test region (T) for the drug in question. A positive result indicates that the drug concentration exceeds the detectable level.

NEGATIVE: Two colored bands appear on the membrane. One band appears in the control region (C) and another band appears in the test region (T) for the drug in question. A negative result indicates that the drug concentration is below the detectable level.

INVALID: Control band fails to appear. Results from any test which has not produced a control band at the specified read time must be discarded. Please review the procedure and repeat with a new test. If the problem persists,discontinue using the kit immediately and contact your local distributor.

NOTE:

- The intensity of color in the test region (T) may vary depending on the concentration of analytes present in the specimen. Therefore, any shade of color in the test region (T) should be considered negative. Please note that this is a qualitative test only, and cannot determine the concentration of analytes in the specimen.
- Insufficient specimen volume, incorrect operating procedure or expired tests are the most likely reasons for control band failure.

The Result Of Adulteration Strips:

- **Creatinine** :Normal Creatinine levels are between 20 and 350 mg/dL. Under rare condition such as certain kidney diseases show dilute urine.Out of this range could indicate adulteration.
- **PH:** Normal pH levels should be in the range of 4.0 to 9.0. ny result out of this range may be interfer the result (adulteration).

NOTE:

The Urine Adulteration Test Strips (Urine) are meant to aid in the determination of abnormal specimens. While comprehensive, these tests are not meant to be an all-inclusive representation of possible adulterants.

QUALITY CONTROL

Quality Control Of Multiple Drugs Test Cup:

- Internal procedural controls are included in the test. A colored band appearing in the control region (C) is considered an internal positive procedural control, confirming sufficient specimen volume and correct procedural technique.
- External controls are not supplied with this kit. It is recommended that positive and negative controls be tested as a good laboratory practice to confirm the test procedure and to verify proper test performance.

Quality Control Of Adulteration Strips:

- Control standards are not supplied with this kit. However, it is recommended that positive and negative specimens or controls be tested as good laboratory practice to confirm the test procedure and to verify proper test performance.

LIMITATIONS

A.The Limitations Of Multiple Drugs Test Cup:

- The Multiple Drugs Test Cup is for professional in vitro diagnostic use, and should be only used for the qualitative detection of drugs of abuse.
- This assay provides a preliminary analytical test result only. A more specific alternative chemical method must be used in order to obtain a confirmed analytical result. Gas chromatography/mass spectrometry (GC/MS) has been established as the preferred confirmatory method by the National Institute on Drug Abuse (NIDA). Clinical consideration and professional judgment should be applied to any test result, particularly when preliminary positive results are indicated.
- There is a possibility that technical or procedural errors as well as other substances and factors may interfere with the test and cause false results.
- Adulterants, such as bleach and/or alum, in urine specimens may produce erroneous results regardless of the analytical method used. Therefore, please preclude the possibility of urine adulteration prior to testing.
- A positive result indicates the presence of a drug/metabolite only, and does not indicate or measure intoxication.
- A negative result does not at any time rule out the presence of drugs/metabolites in urine, as they may be present below the minimum detection level of the test.
- This test does not distinguish between drugs of abuse and certain medications

B.The Limitations Of Adulteration Strips:

- The Urine Adulteration Test Strips (Urine) are meant to aid in the determination of abnormal specimens. While comprehensive, these tests are not meant to be an all-inclusive representation of possible adulterants.
- **Creatinine:** Normal Creatinine levels are between 20 and 350 mg/dL. Under rare conditions, certain kidney diseases show dilute urine.
- **PH:**Urine sample PH should be in range 4.0-7.0, any result out of this range may be interfer the result.

PERFORMANCE CHARACTERISTICS

Accuracy

A side-by-side comparison was conducted using One Step Multi-Line Screen Test Panel with Cup (Urine) and commercially available drug rapid tests. Testing was performed on approximately 300 specimens previously collected from subjects presenting for Drug Screen Testing. Presumptive positive results were confirmed by GC/MS. The following results were tabulated:

% Agreement with Commercial Kit

	Positive Agreement	Negative Agreement	Total Results
AMP 1000	97%	100%	98%
AMP 500	99%	100%	>99%
BAR	>99%	>99%	99%
BZO	90%	97%	94%
COC	95%	>99%	98%
THC	98%	100%	99%
MTD	99%	>99%	>99%
MET 1000	98%	100%	99%
MET 500	99%	100%	>99%
MDMA	100%	99%	99%
OPI/MOP 300	100%	100%	100%
OPI 2000	>99%	>99%	>99%
PCP	98%	100%	99%
TCA	95%	>99%	99%
EDDP	100%	100%	100%
BUP (10)	88%	>99%	97%
TML	95.8%	100%	98.1%
KET	>99%	100%	>99%
OXY	>99%	95.7%	96%
PPX	>99%	97.1%	97.3%
BUP (5)	100%	100%	100%

% Agreement with GC/MS

	Positive Agreement	Negative Agreement	Total Results
AMP 1000	97%	95%	96%
AMP 500	99%	97%	98%
BAR	>99%	>99%	99%
BZO	96%	96%	96%
COC	96%	>90%	93%
THC	97%	88%	91%
MTD	99%	>94%	>96%
MET 1000	99%	94%	96%
MET 500	100%	96%	98%
MDMA	96%	98%	97%
OPI/MOP 300	100%	94%	97%
OPI 2000	>99%	>90%	>95%
EDDP	100%	94%	97%
PCP	100%	97%	98%
TCA	99%	89%	91%
TML	99.9%	99.9%	99.9%
BUP (10)	98%	99%	99%
KET	98%	99%	98.5%
OXY	>99%	95.7%	96%
PPX	>99%	97.1%	97.3%
BUP (5)	100%	100%	100%

*Note: TCA was based on HPLC data instead of GC/MS.

* *NOTE: BUP was based on LC/MS data instead of GC/MS

Sensitivity

A drug-free urine pool was spiked with drugs to the concentrations at ± 50% cut-off and ± 25% cut-off. The results are summarized below.

results were confirmed by GC/MS. The following

Drug conc. (Cut-off range)	n	AMP		BAR		BZO		BUP(10)		COC		THC		MTD		MET		BUP (5)	
		-	+	-	+	-	+	-	+	-	+	-	+	-	+	-	+	-	+
0	**25**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**
Cut-off-50%	**25**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**
Cut-off-25%	**25**	**25**	**0**	**24**	**1**	**25**	**0**	**25**	**0**	**25**	**0**	**24**	**1**	**25**	**0**	**25**	**0**	**25**	**0**
Cut-off+25%	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**1**	**24**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**
Cut-off+50%	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**	**0**	**25**

Drug conc. (Cut-off range)	n	MDMA		MOP		OPI		OXY		PCP		PPX		TCA		KET	
		-	+	-	+	-	+	-	+	-	+	-	+	-	+	-	+
0	25	25	0	25	0	25	0	25	0	25	0	25	0	25	0	25	0
Cut-off-50%	25	25	0	25	0	25	0	25	0	25	0	25	0	25	0	25	0
Cut-off-25%	25	25	0	25	0	25	0	25	0	25	0	24	1	25	0	25	0
Cut-off+25%	25	0	25	0	25	0	25	0	25	0	25	0	25	2	25	0	25
Cut-off+50%	25	0	25	0	25	0	25	0	25	0	25	0	25	0	25	0	25

Precision

A study was conducted at three physician offices by untrained operators using three different lots of product to demonstrate the within run, between run and between operator precision. An identical panel of coded specimens, containing drugs at the concentration of ± 50% and ± 25% cut-off level, was labeled as blind and tested at each site. The results are given below:

AMPHETAMINE (AMP 1000)

Amphetamine 1000 conc. (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
500	15	15	0	15	0	14	1
750	15	13	2	11	4	11	4
1,250	15	6	9	4	11	4	11
1,500	15	2	13	1	14	1	14

AMPHETAMINE (AMP 500)

Amphetamine 500 conc. (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0

250	15	15	0	15	0	15	0
375	15	15	0	15	0	15	0
625	15	6	9	4	11	7	8
750	15	0	15	0	15	0	15

BARBITURATES (BAR)

Secobarbital conc. (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
150	15	13	2	15	0	15	0
225	15	5	10	7	8	10	5
375	15	2	13	5	10	5	10
450	15	0	15	1	14	1	14

BENZODIAZEPINE (BZO)

Oxazepam conc. (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
150	15	14	1	14	1	15	0
225	15	11	4	14	1	14	1
375	15	0	15	1	14	3	12
450	15	0	15	0	15	0	15

COCAINE (COC)

Benzoylecgonine conc. (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	14*	0	15	0	15	0
150	15	14	1	15	0	14	1
225	15	4	11	5	10	8	7
375	15	0	15	0	15	0	15
450	15	0	15	0	15	1	14

*Note: One invalid result was obtained.

MARIJUANA (THC)

11-nor-Δ^9–THC-9-COOH conc. (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
25	15	15	0	15	0	14	1
37.5	15	9	6	14	1	9	6
62.5	15	2	13	0	15	0	15
75	15	0	15	0	15	0	15

METHADONE (MTD)

Methadone conc. (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
150	15	12	3	15	0	15	0
225	15	8	7	14	1	15	0
375	15	0	15	0	15	1	14
450	15	1	14	0	15	0	15

METHAMPHETAMINE (MET 1000)

Methamphetamine 1000 conc. (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
500	15	15	0	14	1	13	2
750	15	11	4	10	5	10	5
1,250	15	8	7	4	11	6	9
1,500	15	1	14	1	14	0	15

METHAMPHETAMINE (MET 500)

Methamphetamine 500 conc. (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
250	15	15	0	15	0	15	0
375	15	13	2	15	0	14	1
625	15	6	9	3	12	7	8
750	15	0	15	0	15	0	15

METHYLENEDIOXYMETHAMPHETAMINE (MDMA)

MDMA conc. (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
250	15	15	0	15	0	15	0
375	15	15	0	15	0	15	0
625	15	6	9	4	11	7	8
750	15	0	15	0	15	0	15

OPIATES/MORPHINE 300 (Not to be combined with OPI 2000)

Morphine conc. (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
150	15	13	2	13	2	15	0
225	15	3	12	7	8	10	5
375	15	0	15	1	14	0	15
450	15	0	15	0	15	0	15

OPIATES 2000 (Not to be combined with MOP 300)

Morphine conc. (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
1,000	15	15	0	15	0	14	1
1,500	15	13	2	11	4	7	8
2,500	15	4	11	1	14	2	13
3,000	15	0	15	0	15	2	13

PHENCYCLIDINE (PCP)

Phencyclidine conc. (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
12.5	15	15	0	14	1	14	1
18.75	15	11	4	13	2	10	5
31.25	15	8	7	5	10	1	14
37.5	15	4	11	0	15	0	15

TRICYCLIC ANTIDEPRESSANTS (TCA)

Nortriptyline conc. (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
500	15	15	0	15	0	15	0
750	15	14	1	11	4	14	1
1,250	15	8	7	2	13	6	9
1,500	15	1	14	0	15	1	14

BUPRENORPHINE (10 NG/ML)

Buprenorphine Concentration (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
5	15	15	0	15	0	15	0
7.5	15	8	7	10	5	9	6
12.5	15	0	15	1	14	0	15
15	15	0	15	0	15	0	15

EDDP

EDDP Concentration (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
50	15	15	0	15	0	15	0
75	15	10	5	11	4	9	6
125	15	2	13	0	15	1	14
150	15	0	15	0	15	0	15

TRAMADOL

Tramadol Concentration (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
50	15	15	0	15	0	15	0
75	15	9	6	14	1	13	2
125	15	1	14	0	15	1	14
150	15	0	15	0	15	0	15

KETAMINE (KET)

Ketamine Concentration (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
500	15	15	0	15	0	15	0
750	15	10	5	13	2	12	3
1,250	15	1	14	0	15	2	13
1,500	15	0	15	0	15	0	15

Oxycodone (OXY)

Oxcodone concentration (ng/ml)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
50	15	15	0	15	0	15	0
75	15	8	7	14	1	13	2
125	15	0	15	1	14	1	14
150	15	0	15	0	15	0	15

Propoxyphene (PPX)

Propoxyphene concentration (ng/ml)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
12.5	15	15	0	15	0	15	0
18.75	15	9	6	14	1	14	1
31.25	15	1	14	0	15	1	14
37.5	15	0	15	0	15	0	15

BUPRENORPHINE (5 NG/ML)

Buprenorphine Concentration (ng/mL)	n per site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	15	15	0	15	0	15	0
2.5	15	15	0	15	0	15	0
3.75	15	15	0	9	6	1	14
6.25	15	0	15	2	13	0	15
7.5	15	0	15	0	15	0	15

Specificity

The following tables lists the concentration of compounds (ng/mL) that are detected positive in urine by the Multi-Drug One Step Multi-Drug Screen Panel (Urine) at 5 minutes.

AMPHETAMINE 1000	**(ng/ml)**
d-Amphetamine	1,000
l-Amphetamine	100,000
MDA	1,250
Phentermine	1,250
PMA	625
Tyramine	100,000
AMPHETAMINE 500	**(ng/ml)**
d-Amphetamine	500
l-Amphetamine	50,000
MDA	625
Phentermine	625
PMA	313
Tyramine	50,000
METHAMPHETAMINE 1000	**(ng/ml)**
d-Methamphetamine	1,000
Chloroquine	25,000
Fenfluramine	12,500
l-Methamphetamine	10,000
Mephentermine hemisulfate salt	31,250
MDEA	50,000
MDMA	313
PMMA	625
METHAMPHETAMINE 500	**(ng/ml)**
d-Methamphetamine	500
Chloroquine	12,500
Fenfluramine	12,500
l-Methamphetamine	3,125
Mephentermine hemisulfate salt	25,000
MDEA	12,500
MDMA	1,875

PMMA	625
METHYLENEDIOXYMETHAMPHETAMINE	**(ng/ml)**
3,4–MethylenedioxymethamphetamineHCl	500
3,4–MethylenedioxyamphetamineHCl	3,000
3,4–Methylenedioxyethylamphetamine	300
BARBITURATES	**(ng/ml)**
Secobarbital	300
Amobarbital	300
Alphenol	150
Aprobarbital	200
Butabarbital	75
Butethal	100
Butalbital	2,500
Cyclopentobarbital	600
Pentobarbital	300
Phenobarbital	100
OPIATES/MORPHINE 300	**(ng/ml)**
Morphine	300
Codeine	300
Ethylmorphine	6,250
Hydrocodone	50,000
Hydromorphone	3,125
Levophanol	1,500
6-Monoacetylmorphine	400
Morphine 3-β-D-glucuronide	1,000
Norcodeine	6,250
Normorphone	100,000
Oxycodone	30,000
Oxymorphone	100,000
Procaine	15,000
Thebaine	6,250
BENZODIAZEPINES	**(ng/ml)**
Oxazepam	300
Alprazolam	196
α-Hydroxyalprazolam	1,262
Bromazepam	1,562
Chlordiazepoxide	1,562
Clonazepam HCl	781
Clobazam	98
Clonazepam	781
Clorazepate dipotassium	195
Delorazepam	1,562
Desalkylflurazepam	390
Diazepam	195
Estazolam	2,500
Flunitrazepam	390
D,L- Lorazepam	1,562
RS-Lorazepam glucuronide	156
Midazolam	12,500
Nitrazepam	98
Norchlordiazepoxide	195
Nordiazepam	390
Temazepam	98
Triazolam	2,500
OPIATES 2000	**(ng/ml)**
Morphine	2,000
Codeine	2,000
Ethylmorphine	5,000
Hydrocodone	12,500
Hydromorphone	5,000
Levophanol	75,000
6-Monoacetylmorphine	5,000
Morphine 3-β-D-glucuronide	2,000
Norcodeine	12,500
Normorphone	50,000
Oxycodone	25,000
Oxymorphone	25,000
Procaine	150,000
Thebaine	100,000
PHENCYCLIDINE	**(ng/ml)**
Phencyclidine	25
4-Hydroxyphencyclidine	12,500
COCAINE	**(ng/ml)**
Benzoylecgonine	300
Cocaine HCl	780
Cocaethylene	12,500
Ecgonine HCl	32,000
TRICYCLIC ANTIDEPRESSANTS	**(ng/ml)**
Notriptyline	1,000
Nordoxepine	1,000
Trimipramine	3,000
Amitriptyline	1,500
Promazine	1,500
Desipramine	200
Imipramine	400
Clomipramine	12,500
Doxepine	2,000
Maprotiline	2,000
Promethazine	25,000
MARIJUANA	**(ng/ml)**
11-nor-Δ^9 -THC-9 COOH	50
Cannabinol	20,000
11-nor-Δ^8-THC-9 COOH	30
Δ^8 -THC	15,000
Δ^9 -THC	15,000
METHADONE	**(ng/ml)**
Methadone	300
Doxylamine	50,000
EDDP	**(ng/ml)**
EDDP 100	100
TRAMADOL	**(ng/ml)**
(+/-) Chlorpheniramine	50,000
Dimenhydrinate	50,000
Diphenhydramine	50,000
Phencyclidine	50,000
(+)-Chlorpheniramine	100,000
BUPRENORPHINE	**(ng/ml)**
Buprenorphine	10
Norbuprenorphine	20
Buprenorphine 3-D-Glucuronide	15
Norbuprenorphine 3-D-Glucuronide	200
KETAMINE	**(ng/ml)**
Ketamine	1,000
Norketamine	1,000
Dextromethorphan	500
Dextrorphan tartrate	500
D-Norpropoxyphene	31,250
Meperidine	12,500
Mephentermine hemisulfate salt	15,625
D-Methamphetamine	12,500
3,4-Methylenedioxyethylamphetamine (MDEA)	25,000
Nordoxepin hydrochloride	25,000
Phencyclidine	5,000
Promazine	8,000
Promethazine	25,000
OXYCODONE	**ng/mL**
Oxycodone	100
Morphine	50000
Codeine	25000
Morphine 3-b-D-glucuronide	50000
Hydrocodone	1600
Hydromorphone	15000
Normorphone	100000
Oxymorphone	1500
PROPOXYPHENE	**ng/mL**
propoxyphene	300
Norpropoxyphene	7500
Methadone	> 100000
BUPRENORPHINE	**(ng/ml)**
Buprenorphine	5
Norbuprenorphine	5
Buprenorphine 3-D-Glucuronide	10
Norbuprenorphine 3-D-Glucuronide	50

Non Cross-Reacting Compounds

A study was conducted to determine the cross-reactivity of the test with compounds spiked into drug-free PBS stock. The following compounds demonstrated no false positive results on the Multiple Drugs Test Cup when tested at concentrations up to 100 µg/mL

(+)-Naproxen	Creatine	Oxalic Acid
Dimethyllaminoantiyrine	Dextromethorphan	Penicillin-G
Acetaminophen	Dextrorphan tartrate	Pheniramine
Acetone	Dopamine	Phenothiazine
Albumin	Erythromycin	Procaine
Amitriptyline	Ethanol	Protonix
Ampicillin	Furosemide	Pseudoephedrine
Aspartame	Glucose	Quinidine
Aspirin	Guaiacol Glyceryl Ether	Ranitidine
Benzocaine	Hemoglobin	Sertraline
Bilirubin	Ibuprofen	Tyramine
b-Phenylethyl-amine	Imipramine	Vitamin C (Ascorbic Acid)
Caffeine	Isoproterenol	Trimeprazine
Chloroquine	Lidocaine	Venlafaxine
Chlorpheniramine	Methadone	Ibuprofen

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	Catalogue Number		Temperature limit
	*In Vitro* diagnostic medical device		Caution
	Contains sufficient for <n> tests and Relative size		Consult instructions for use (IFU)
	Batch code		Manufacturer
	Do not re-use		Use-by date
	Manufacturer fax number		Do not use if package is damaged
	Manufacturer telephone number		Date of Manufacture
	Keep away from sunlight		Keep dry