Multi-Drug Rapid Test Panel

(Urine)

Package Insert

Instruction Sheet for testing of any combination of the following drugs: ACE/AMP/BAR/BZO/BUP/COC/THC/MTD/MET/MDMA/MOP/MQL/OPI/PCP/PPX/TCA/TML/KET/OX Y/COT/EDDP/FYL/K2/6-MAM/MDA/ETG/CLO/LSD/MPD/ZOL/MEP/ALC/MDPV/DIA/ZOP/MCAT/7-A CL/CFYL/CAF/CAT/TRO/ALP

A rapid test for the simultaneous, qualitative detection of multiple drugs and drug metabolites in human urine. For healthcare professionals including professionals at point of care sites. Immunoassay for in vitro diagnostic use only

[INTENDED USE]

The Multi-Drug Rapid Test Panel is a rapid chromatographic immunoassay for the gualitative detection of multiple drugs and drug metabolites in urine at the following cut-off concentrations:

	urine at the following cut-off concentrations	
Test	Calibrator	Cut-off (ng/mL)
Acetaminophen (ACE 5,000)	Acetaminophen	5,000
Amphetamine (AMP1,000)	d-Amphetamine	1,000
Amphetamine (AMP 500)	d-Amphetamine	500
Amphetamine (AMP 300)	d-Amphetamine	300
Barbiturates (BAR 300)	Secobarbital	300
Barbiturates (BAR 200)	Secobarbital	200
Benzodiazepines (BZO 500)	Oxazepam	500
Benzodiazepines (BZO 300)	Oxazepam	300
Benzodiazepines (BZO 200)	Oxazepam	200
Benzodiazepines (BZO 100)	Oxazepam	100
Buprenorphine (BUP 10)	Buprenorphine	10
Buprenorphine (BUP 5)	Buprenorphine	5
Cocaine (COC 300)	Benzoylecgonine	300
Cocaine (COC 200)	Benzoylecgonine	200
Cocaine (COC 150)	Benzoylecgonine	150
Cocaine (COC 200) Cocaine (COC 150) Cocaine (COC 100)	Benzoylecgonine	100
Marijuana (THC300)	11-nor-Δ9-THC-9 COOH	300
Marijuana (THC200)	11-nor-∆9-THC-9 COOH	200
Marijuana (THC150)	11-nor-∆9-THC-9 COOH	150
Marijuana (THC 50)	11-nor-Δ9-THC-9 COOH	50
Marijuana (THC 30)	11-nor-Δ9-THC-9 COOH	30
Marijuana (THC 35)	11-nor-Δ9-THC-9 COOH	25
Methadone (MTD 300)	Methadone	300
Methadone (MTD 200)	Methadone d Mothamphotomine	200
Methamphetamine (MET 1,000)	d-Methamphetamine	1,000
Methamphetamine (MET 500)	d-Methamphetamine	500
Methamphetamine (MET 300)	d-Methamphetamine	300
Methylenedioxymethamphetamine	d,I-Methylenedioxymethamphetamine	300
(MDMA 300)	.,,	
Methylenedioxymethamphetamine	d,I-Methylenedioxymethamphetamine	500
(MDMA 500)	=,:	
Methylenedioxymethamphetamine	d,I-Methylenedioxymethamphetamine	1,000
(MDMA 1,000)		
Morphine (MOP 300)	Morphine	300
Morphine (MOP 200)	Morphine	200
Morphine (MOP 100)	Morphine	100
Methaqualone(MQL)	Methaqualone	300
Opiate (OPI 2,000)	Morphine	2,000
Phencyclidine (PCP)	Phencyclidine	25
Propoxyphene (PPX)	Propoxyphene	300
Tricyclic Antidepressants (TCA)	Nortriptyline	1,000
Tramadol (TML 100)	Cis-Tramadol	100
Tramadol (TML 200)	Cis-Tramadol	200
Tramadol (TML 300)	Cis-Tramadol	300
Ketamine (KET 1,000)	Ketamine	1,000
Ketamine (KET 500)	Ketamine	500
Ketamine (KET 300)	Ketamine	300
Ketamine (KET100)	Ketamine	100
Oxycodone (OXY)	Oxycodone	100
	Cotinine	200
Cotinine(COT200) Cotinine(COT100)	Cotinine	100
		100
2-ethylidene-1,5-dimethyl-	2-ethylidene-1,5-dimethyl-	300
3,3-diphenylpyrrolidine (EDDP300)	3,3-diphenylpyrrolidine	
2-ethylidene-1,5-dimethyl-	2-ethylidene-1,5-dimethyl-	100
3,3-diphenylpyrrolidine (EDDP100)	3,3-diphenylpyrrolidine	
Fentanyl(FYL20)	Norfentanyl	20
Fentanyl(FYL10)	Norfentanyl	10
Synthetic Marijuana (K2-50)	JWH-018、JWH-073	50
Synthetic Marijuana (K2-30)	JWH-018、JWH-073	30
Synthetic Marijuana (K2-25)	JWH-018、JWH-073	25
6-mono-aceto-morphine	6-MAM	10
(6-MAM10)		
(±) 3,4-Methylenedioxy-	(±) 3,4-Methylenedioxy-	500
Amphetamine(MDA500)	Amphetamine	
Ethyl- β-D-Glucuronide(ETG500)	Ethyl- β -D-Glucuronide	500
Ethyl- β-D-Glucuronide(ETG1,000)	Ethyl- β -D-Glucuronide	1,000
Clonazepam(CLO 400)	Clonazepam	400
Clonazepam(CLO 150)	Clonazepam	150
Lysergic Acid Diethylamide (LSD)	Lysergic Acid Diethylamide	20
Lysergic Acid Diethylamide (LSD)	Lysergic Acid Diethylamide	50
Methylphenidate (MPD)	Methylphenidate	300
Zolpidem(ZOL)	Zolpidem	500
	-opiooni	~~

Mephedrone	Mephedrone	100
3, 4-methylenedioxypyrovalerone (MDPV)	3, 4-methylenedioxypyrovalerone	1000
Diazepam(DIA 300)	Diazepam	300
Diazepam(DIA 200)	Diazepam	200
Zopiclone (ZOP 50)	Zopiclone	50
Methcathinone (MCAT 500)	S(-)-Methcathinone	500
7-Aminoclonazepam(7-ACL300)	7-Aminoclonazepam	300
7-Aminoclonazepam(7-ACL200)	7-Aminoclonazepam	200
7-Aminoclonazepam(7-ACL100)	7-Aminoclonazepam	100
Carfentanyl(CFYL500)	Carfentanyl	500
Caffeine(CAF)	Caffeine	1000
Cathine (CAT)	(+)-Norpseudoephedrine	150
Tropicamide(TRO)	Tropicamide	350
Alprazolam(ALP)	Alprazolam	100
Test	Calibrator	Cut-off

Alcohol(ALC) Alcohol Configurations of the Multi-Drug Rapid Test Panel come with any combination of the above listed drug analytes. This assay provides only a preliminary analytical test result. A more specific alternate chemical method must be used in order to obtain a confirmed analytical result. Gas chromatography/mass spectrometry (GC/MS) is the preferred confirmatory method. Clinical consideration and professional judgment should be applied to any drug of abuse test result, particularly when preliminary positive results are indicated.

[SUMMARY]

The Multi-Drug Rapid Test Panel is a rapid urine screening test that can be performed without the use of an instrument. The test utilizes monoclonal antibodies to selectively detect elevated levels of specific drugs in urine.

Acetaminophen (ACE)

Acetaminophen is one of the most commonly used drugs, yet it is also an important cause of serious liver injury. Acetaminophen is the generic name of a drug found in many common brand name over-the-counter (OTC) products, such as Tylenol, and Prescription (Rx) products, such as Vicodin and Percocet. Acetaminophen is an important drug, and its effectiveness in relieving pain and fever is widely known. Unlike other commonly used drugs to reduce pain and fever (e.g., non steroidalant inflammatory drugs (NSAIDs), such as aspirin, ibuprofen, and naproxen), at recommended doses acetaminophen does not cause adverse effects such as stomach discomfort and bleeding and acetaminophen is considered safe when used according to the directions on its OTC or Rx labeling. However, taking more than the recommended amount can cause liver damage, ranging from abnormalities in liver function blood tests to acute liver failure and even death. Many cases of overdose are caused by patients inadvertently taking more than the recommended dose (i.e., 4 grams a day) of a particular product, or by taking more than one product containing acetaminophen (e.g., an OTC product and an Rx drug containing acetaminophen). The mechanism of liver injury is not related to acetaminophen itself, but to the production of a toxic metabolite. The toxic metabolite binds with liver proteins, which cause cellular injury. The ability of the liver to remove this metabolite before it binds to liver protein influences the extent of liver injury

The Multi-Drug Rapid Test Panel yields a positive result when the concentration of Acetaminophen in urine exceeds 5 000ng/ml

Amphetamine (AMP)

Amphetamine is a Schedule II controlled substance available by prescription (Dexedrine®) and is also available on the illicit market. Amphetamines are a class of potent sympathomimetic agents with therapeutic applications. They are chemically related to the human body's natural catecholamines: epinephrine and norepinephrine. Acute higher doses lead to enhanced stimulation of the central nervous system (CNS) and induce euphoria, alertness, reduced appetite, and a sense of increased energy and power. Cardiovascular responses to amphetamines include increased blood pressure and cardiac arrhythmias. More acute responses produce anxiety, paranoia, hallucinations, and psychotic behavior. The effects of Amphetamines generally last 2-4 hours following use and the drug has a half-life of 4-24 hours in the body. About 30% of amphetamines are excreted in the urine in unchanged form, with the remainder as hydroxylated and deaminated derivatives.

The Multi-Drug Rapid Test Panel yields a positive result when the concentration of amphetamines in urine exceeds detective level.

Barbiturates (BAR)

Barbiturates are CNS depressants. They are used therapeutically as sedatives, hypnotics, and anticonvulsants barbiturates are almost always taken orally as capsules or tablets. The effects resemble those of intoxication with alcohol. Chronic use of barbiturates leads to tolerance and physical dependence.

Short-acting barbiturates taken at 400 mg/day for 2-3 months can produce a clinically significant degree of physical dependence. Withdrawal symptoms experienced during periods of drug abstinence can be severe enough to cause death.

Only a small amount (less than 5%) of most barbiturates are excreted unaltered in the urine.

he approximate detection time limits for ba	rbiturates are:	
Short acting (e.g. Secobarbital)	100 mg PO (oral)	4.5 days

Long acting (e.g. Phenobarbital) 400 mg PO (oral) 7 davs The Multi-Drug Rapid Test Panel yields a positive result when the concentration of barbiturates in urine exceeds detective level

Benzodiazepines (BZO)

Benzodiazepines are medications that are frequently prescribed for the symptomatic treatment of anxiety and sleep disorders. They produce their effects via specific receptors involving a neurochemical called gamma aminobutyric acid (GABA). Because they are safer and more effective, benzodiazepines have replaced barbiturates in the treatment of both anxiety and insomnia. Benzodiazepines are also used as sedatives before some surgical and medical procedures, and for the treatment of seizure disorders and alcohol withdrawal

Risk of physical dependence increases if benzodiazepines are taken regularly (e.g., daily) for more than a few months, especially at higher than normal doses. Stopping abruptly can bring on such symptoms as trouble sleeping, gastrointestinal upset, feeling unwell, loss of appetite, sweating, trembling, weakness, anxiety and changes in perception.

Only trace amounts (less than 1%) of most benzodiazepines are excreted unaltered in the urine; most of the concentration in urine is conjugated drug. The detection period for benzodiazepines in urine is 3-7

The Multi-Drug Rapid Test Panel yields a positive result when the concentration of benzodiazepines in urine exceeds detective level.

Buprenorphine (BUP)

Buprenorphine is a potent analoesic often used in the treatment of opioid addiction. The drug is sold under the trade names Subutex™, Buprenex™, Temgesic™ and Suboxone™, which contain Buprenorphine HCl alone or in combination with Naloxone HCl. Therapeutically, Buprenorphine is used as a substitution treatment for opioid addicts. Substitution treatment is a form of medical care offered to opiate addicts (primarily beroin addicts) based on a similar or identical substance to the drug normally used. In substitution therapy, Buprenorphine is as effective as Methadone but demonstrates a lower level of physical dependence. Concentrations of free Buprenorphine and Norbuprenorphine in urine may be less than 1 ng/ml after therapeutic administration, but can range up to 20 ng/ml in abuse situations. The plasma half -life of Buprenorphine is 2-4 hours.⁷While complete elimination of a single dose of the drug can take as long as 6 days, the window of detection for the parent drug in urine is thought to be approximately 3 days.

Substantial abuse of Buprenorphine has also been reported in many countries where various forms of the drug are available. The drug has been diverted from legitimate channels through theft, doctor shopping, and fraudulent prescriptions, and been abused via intravenous, sublingual, intranasal and inhalation routes

The Multi-Drug Rapid Test Panel yields a positive result when the Buprenorphine in urine exceeds detective leve

Cocaine(COC)

0.02%

Cocaine is a potent central nervous system stimulant and a local anesthetic. Initially, it brings about extreme energy and restlessness while gradually resulting in tremors, over-sensitivity and spasms. In large amounts, cocaine causes fever, unresponsiveness, difficulty in breathing and unconsciousness. Cocaine is often self-administered by nasal inhalation, intravenous injection and free-base smoking. It is excreted in the urine in a short time primarily as benzoylecgonine.^{3,4}Benzoylecgonine, a major metabolite of cocaine, has a longer biological half-life (5-8 hours) than cocaine (0.5-1.5 hours), and can generally be detected for 24-48 hours after cocaine exposure."

The Multi-Drug Rapid Test Panel yields a positive result when the concentration of benzoylecgonine in urine exceeds detective level.

Marijuana (THC)

THC (A9-tetrahydrocannabinol) is the primary active ingredient in cannabis (marijuana). When smoked or orally administered, THC produces euphoric effects. Users have impaired short-term memory and slowed learning. They may also experience transient episodes of confusion and anxiety. Long-term, relatively heavy use may be associated with behavioral disorders. The peak effect of marijuana administered by smoking occurs in 20-30 minutes and the duration is 90-120 minutes after one cigarette. Elevated levels of urinary metabolites are found within hours of exposure and remain detectable for 3-10 days after smoking. The main metabolite excreted in the urine is 11-nor-∆9-tetrahydrocannabinol-9-carboxylic acid (THC-COOH).

The Multi-Drug Rapid Test Panel yields a positive result when the concentration of THC-COOH in urine exceeds detective level

Methadone (MTD)

Methadone is a narcotic analgesic prescribed for the management of moderate to severe pain and for the treatment of opiate dependence (heroin, Vicodin, Percocet, morphine). The pharmacology of oral methadone is very different from IV methadone. Oral methadone is partially stored in the liver for later use. IV methadone acts more like heroin. In most states you must go to a pain clinic or a methadone maintenance clinic to be prescribed methadone.

Methadone is a long acting pain reliever producing effects that last from twelve to forty-eight hours. Ideally, methadone frees the client from the pressures of obtaining illegal heroin, from the dangers of injection, and from the emotional roller coaster that most opiates produce. Methadone, if taken for long periods and at large doses, can lead to a very long withdrawal period. The withdrawals from methadone are more prolonged and troublesome than those provoked by heroin cessation, yet the substitution and phased removal of methadone is an acceptable method of detoxification for patients and therapists.

The Multi-Drug Rapid Test Panel yields a positive result when the concentration of methadone in urine exceeds detective level.

Methamphetamine (MET)

Methamphetamine is an addictive stimulant drug that strongly activates certain systems in the brain. Methamphetamine is closely related chemically to Amphetamine, but the central nervous system effects of Methamphetamine are greater. Methamphetamine is made in illegal laboratories and has a high potential for abuse and dependence. The drug can be taken orally, injected, or inhaled. Acute higher doses lead to enhanced stimulation of the central nervous system and induce euphoria, alertness, reduced appetite, and a sense of increased energy and power. Cardiovascular responses to Methamphetamine include increased blood pressure and cardiac arrhythmias. More acute responses produce anxiety, paranoia, hallucinations, psychotic behavior, and eventually, depression and . exhaustion

The effects of Methamphetamine generally last 2-4 hours and the drug have a half-life of 9-24 hours in the body. Methamphetamine is excreted in the urine primarily as Amphetamine, and oxidized and deaminated derivatives. However, 10-20% of Methamphetamine is excreted unchanged. Thus, the presence of the parent compound in the urine indicates Methamphetamine use. Methamphetamine is generally detectable in the urine for 3-5 days, depending on urine pH level.

The Multi-Drug Rapid Test Panel is a rapid urine screening test that can be performed without the use of an instrument. The test utilizes a monoclonal antibody to selectively detect elevated levels of Methamphetamine in urine. The Multi-Drug Rapid Test Panel yields a positive result when the Methamphetamine in urine exceeds detective level.

Methylenedioxymethamphetamine (MDMA)

Methylenedioxymethamphetamine (ecstasy) is a designer drug first synthesized in 1914 by a German drug company for the treatment of obesity.⁵ Those who take the drug frequently report adverse effects, such as increased muscle tension and sweating. MDMA is not clearly a stimulant, although it has, in common with amphetamine drugs, a capacity to increase blood pressure and heart rate. MDMA does produce some perceptual changes in the form of increased sensitivity to light, difficulty in focusing, and blurred vision in some users. Its mechanism of action is thought to be via release of the neurotransmitter serotonin. MDMA may also release dopamine, although the general opinion is that this is a secondary effect of the drug (Nichols and Oberlender, 1990). The most pervasive effect of MDMA, occurring in virtually all people who took a reasonable dose of the drug, was to produce a clenching of the jaws. The Multi-Drug Rapid Test Panel yields a positive result when the concentration of

Methylenedioxymethamphetamine in urine exceeds detective level

Morphine (MOP)

Opiate refers to any drug that is derived from the opium poppy, including the natural products, morphine and codeine, and the semi-synthetic drugs such as heroin. Opioid is more general, referring to any drug that acts on the opioid receptor

Opioid analgesics comprise a large group of substances which control pain by depressing the CNS. Large doses of morphine can produce higher tolerance levels, physiological dependency in users, and may lead to substance abuse. Morphine is excreted unmetabolized, and is also the major metabolic product of codeine and heroin. Morphine is detectable in the urine for several days after an opiate dose.²

The Multi-Drug Rapid Test Panel yields a positive result when the concentration of morphine in urine exceeds detective level.

Morphine/Opiate (OPI)

The Multi-Drug Rapid Test Panel yields a positive result when the concentration of morphine in urine exceeds 2,000 ng/mL. This is the suggested screening cut-off for positive specimens set by the Substance Abuse and Mental Health Services Administration (SAMHSA, USA).1 See morphine (MOP 300) for summary.

Methaqualone (MQL)

Methaqualone (Quaalude, Sopor) is a quinazoline derivative that was first synthesized in 1951 and found clinically effective as a sedative and hypnotic in 1956.¹⁰It soon gained popularity as a drug of abuse and in 1984 was removed from the US market due to extensive misuse. It is occasionally encountered in illicit form, and is also available in European countries in combination with diphenhydramine (Mandrax). Methaqualone is extensively metabolized *in vivo* principally by hydroxylation at every possible position on the molecule. At least 12 metabolites have been identified in the urine.

The Multi-Drug Rapid Test Panel yields a positive result when the concentration of Methaqualone in urine exceeds 300ng/mL.

Phencyclidine (PCP)

Phenoviclidine, also known as PCP or Angel Dust, is a hallucinogen that was first marketed as a surgical anesthetic in the 1950's. It was removed from the market because patients receiving it became delirious and experienced hallucinations.

PCP is used in powder, capsule, and tablet form. The powder is either snorted or smoked after mixing it with marijuana or vegetable matter. PCP is most commonly administered by inhalation but can be used intravenously, intra-nasally, and orally. After low doses, the user thinks and acts swiftly and experiences mood swings from euphoria to depression. Self-injurious behavior is one of the devastating effects of PCP.

PCP can be found in urine within 4 to 6 hours after use and will remain in urine for 7 to 14 days, depending on factors such as metabolic rate, user's age, weight, activity, and diet.6 PCP is excreted in the urine as an unchanged drug (4% to 19%) and conjugated metabolites (25% to 30%).⁶

The Multi-Drug Rapid Test Panel yields a positive result when the concentration of phencyclidine in urine exceeds 25 ng/mL. This is the suggested screening cut-off for positive specimens set by the Substance Abuse and Mental Health Services Administration (SAMHSA, USA).¹

Propoxyphene (PPX)

Propoxyphene (PPX) is a narcotic analgesic compound bearing structural similarity to methadone. As an analgesic, propoxyphene can be from 50-75% as potent as oral codeine. Darvocet™, one of the most common brand names for the drug, contains 50-100 mg of propoxyphene napsylate and 325-650 mg of acetaminophen. Peak plasma concentrations of propoxyphene are achieved from 1 to 2 hours post dose. In the case of overdose, propoxyphene blood concentrations can reach significantly higher levels.

In humans, propoxyphene is metabolized by N-demethylation to yield norpropoxyphene. Norpropoxyphene has a longer half-life (30 to 36 hours) than parent propoxyphene (6 to 12 hours). The accumulation of norpropoxyphene seen with repeated doses may be largely responsible for resultant toxicity.

The Multi-Drug Rapid Test Panel yields a positive result when the concentration of Propoxyphene or Norpropoxyphene in urine exceeds 300 ng/mL. At present, the Substance Abuse and Mental Health Services Administration (SAMHSA) does not have a recommended screening cut-off for propoxyphene positive specimens.

Tricyclic Antidepressants (TCA)

TCA (Tricyclic Antidepressants) are commonly used for the treatment of depressive disorders. TCA overdoses can result in profound CNS depression, cardiotoxicity and anticholinergic effects. TCA overdose is the most common cause of death from prescription drugs. TCAs are taken orally or sometimes by injection. TCAs are metabolized in the liver. Both TCAs and their metabolites are excreted in urine mostly in the form of metabolites for up to ten days.

The Multi-Drug Rapid Test Panel yields a positive result when the concentration of tricyclic antidepressants in urine exceeds 1,000 ng/mL. At present, the Substance Abuse and Mental Health Services Administration (SAMHSA) does not have a recommended screening cut-off for tricyclic antidepressant positive specimens.

Tramadol (TML)

Tramadol(TML) is a quasi-narcotic analgesic used in the treatment of moderate to severe pain. It is a synthetic analog of codeine, but has a low binding affinity to the mu-opioid receptors. Large doeso for tramadol can develop tolerance and physiological dependency and lead to its abuse. Tramadol is extensively metabolized after oral administration. Approximately 30% of the dose is excreted in the urine as unchanged drug, whereas 60% is excreted as metabolites. The major pathways appear to be N- and O- demethylation, glucoronidation or sulfation in the liver.

The Multi-Drug Rapid Test Panel is a rapid urine screening test that can be performed without the use of an instrument. The test utilizes a monoclonal antibody to selectively detect elevated levels of Tramadol in urine. The Multi-Drug Rapid Test Panel yields a positive result when Tramadol in urine exceed detective level.

Ketamine(KET)

Ketamine is a dissociative anesthetic developed in 1963 to replace PCP (Phencyclidine). While Ketamine is still used in human anesthesia and veterinary medicine, it is becoming increasingly abused as a street drug. Ketamine is molecularly similar to PCP and thus creates similar effects including numbness, loss of coordination, sense of invulnerability, muscle rigidity, aggressive / violent behavior, slurred or blocked speech, exaggerated sense of strength, and a blank stare. There is depression of respiratory function but not of the central nervous system, and cardiovascular function is maintained. The effects of Ketamine generally last 4-6 hours following use. Ketamine is excreted in the urine as unchanged drug (2.3%) and metabolites (96.8%).¹⁰

The Multi-Drug Rapid Test Panel is a rapid urine screening test that can be performed without the use of an instrument. The test utilizes a monoclonal antibody to selectively detect elevated levels of Ketamine in urine. The Multi-Drug Rapid Test Panel yields a positive result when Ketamine in urine exceeds detective level.

Oxycodone (OXY)

Oxýcodone is a sémi-synthetic opioid with a structural similarity to codeine. The drug is manufactured by modifying thebaine, an alkaloid found in the opium poppy. Oxycodone, like all opiate agonists, provides pain relief by acting on opioid receptors in the spinal cord, brain, and possibly directly in the affected tissues. Oxycodone is prescribed for the relief of moderate to high pain under the well-known pharmaceutical trade names of OxyContine, Tylox®, Percodan® and Percocet®. While Tylox®, Percodan® and Percocet® contain only small doses of oxycodone hydrochloride combined with other analgesics such as acetaminophen or aspirin, OxyContine, Contine to the yday of oxycodone hydrochloride in a time-release form. Oxycodone is known to metabolize by demethylation into oxymorphone noroxycodone. In a 24-hour urine, 33-61% of a single, 5 mg oral dose is excreted with the primary constituents being unchanged drug (13-19%), conjugated drug (7-29%) and conjugated oxymorphone (13-14%). The window of detection for Oxycodone in urine is expected to be similar to that of other opioids such as morphine.

The Multi-Drug Rapid Test Panel is a rapid urine screening test that can be performed without the use of an instrument. The test utilizes a monoclonal antibody to selectively detect elevated levels of Oxycodone in urine. The Multi-Drug Rapid Test Panel yields a positive result when Oxycodone in urine exceeds 100ng/mL.

Cotinine (COT)

Cotinine is the first-stage metabolite of nicotine, a toxic alkaloid that produces stimulation of the autonomic ganglia and central nervous system when in humans. Nicotine is a drug to which virtually every member of a tobacco-smoking society is exposed whether through direct contact or second-hand inhalation. In addition to tobacco, nicotine is also commercially available as the active ingredient in smoking replacement therapies such as nicotine gum, transdermal patches and nasal sprays.

In a 24-hour urine, approximately 5% of a nicotine dose is excreted as unchanged drug with 10% as cotinine and 35% as hydroxycotinine; the concentrations of other metabolites are believed to account for less than 5%. "While cotinine is thought to be an inactive metabolite, if's elimination profile is more stable than that of nicotine which is largely urine pH dependent. As a result, cotinine is considered a good biological marker for determining nicotine use. The plasma half-life of nicotine is approximately 60 minutes following inhalation or parenteral administration. "Nicotine and cotinine are rapidly eliminated by the kidney; the window of detection for cotinine in urine at a cutoff level of 200 ng/mL is expected to be up to 2-3 days after nicotine use.

The Multi-Drug Rapid Test Panel yields a positive result when the concentration of Cotinine in urine exceeds detective level.

2-ethylidene-1,5-dimethyl-3,3-diphenylpyrrolidine (EDDP)

Methadone is an unusual drug in that its primary unhary metabolites (EDDP and EMDP) are cyclic in structure, making them very difficult to delect using immunoassays targeted to the native compound.¹⁰Exacerbating this problem, there is a subsection of the population classified as 'extensive metabolizers' of methadone. In these individuals, a urine specimen may not contain enough parent methadone to yield a positive drug screen even if the individual is in compliance with their methadone maintenance. EDDP represents a better urine marker for methadone maintenance than unmetabolized methadone.

The Multi-Drug Rapid Test Panel yields a positive result when the concentration of EDDP in urine exceeds detective level.

Fentanyl (FYL)

Fentanyl, belongs to powerful narcotics analgesics, and is a μ special opiates receptor stimulant. Fentanyl is one of the varieties that been listed in management of United Nations "Single Convention of narcotic drug in 1961". Among the opiates agents that under international control, fentanyl is one of the most commonly used to cure moderate to severe pain1. After continuous injection of fentanyl, the sufferer will have the performance of protracted opioid abstinence syndrome, such as taxia and irritability etc2,3, which presents the addiction after taking fentanyl main la long time. Compared with drug addicts of amphetamine, drug addicts who take fentanyl mainly have got the possibility of higher infection rate of $\frac{1}{10}$, more dangerous injection behavior and more lifelong medication overdose4.

The FYL Rapid Test Dipstick (Urine) is a rapid urine screening test that can be performed without the use of an instrument. The test utilizes a monoclonal antibody to selectively detect elevated levels of FYL in urine. The FYL Rapid Test Dipstick (Urine) yields a positive result when FYL in urine exceeds detective level.

Synthetic Marijuana (K2)

Synthetic Marijuana or K2 a psychoactive herbal and chemical product that, when consumed, mimics the effects of Marijuana. It is best known by the brand names K2 and Spice, both of which have largely become genericized trademarks used to refer to any synthetic Marijuana product. The studies suggest that synthetic marijuana intoxication is associated with acute psychosis, worsening of previously stable psychotic disorders, and also may have the ability to trigger a chronic (long-term) psychotic disorder among vulnerable individuals such as those with a family history of mental illness.

Elevated levels of urinary metabolites are found within hours of exposure and remain detectable for 72 hours after smoking (depending on usage/dosage). As of March 1, 2011, five cannabinoids, JWH -018, JWH - 013, CP- 47, JWH - 200and cannabicyclohexanol are now illegal in the US because these substances have the potential to be extremely harmful and, therefore, pose an imminent hazard to the public safety.

The Multi-Drug Rapid Test Panel yields a positive result when the synthetic marijuana metabolite in urine exceeds detective level.

6-mono-aceto-morphine (6-MAM)

6-Monoacetylmorphine (6-MAM) or 6-acetylmorphine (6-AM) is one of three active metabolites of heroin (diacetylmorphine), the others being morphine and the much less active 3-monoacetylmorphine (3-MAM). 6-MAM is rapidly created from heroin in the body, and then is either metabolized into morphine or excreted in the urine. 6-MAM remains in the urine for no more than 24 hours. So a urine specimen must be collected soon after the last heroin use, but the presence of 6-MAM guarantees that heroin was in fact used as recently as within the last day. 6-MAM is naturally found in the brain, but in such small quantities that detection of this compound in urine virtually guarantees that heroin has recently been consumed.

The 6-MAM Rapid Test Cassette is a rapid urine screening test that can be performed without the use of an instrument. The test utilizes a monoclonal antibody to selectively detect elevated levels of 6-MAM in urine. The 6-MAM Rapid Test Cassette yields a positive result when 6-MAM in urine reaches 10ng/ml. This is the suggested screening cut-off for positive specimens set by the Substance Abuse and Mental Health Services Administration (SAMHSA, USA).

(±) 3, 4-Methylenedioxyamphetamine (MDA)

3.4-Methylenedioxyamphetamine (MDA), also known as tenamfetamine (INN), or with the street name "Sally" or "Sass" or "Sass-a-frass", is a psychedelic and entactogenic drug of the phenethylamine and amphetamine chemical classes. It is mainly used as a recreational drug, an entheogen, and a tool in use to supplement various types of practices for transcendence, including in meditation, psychonautics, and as an agent in psychedelic psychotherapy. It was first synthesized by G. Mannish and W. Jacobson in 1910. There are about 20 different synthetic routes described in the literature for its preparation.

Ethyl- β-D-Glucuronide(ETG)

Ethyl Glucuronide (ETG) is a metabolite of ethyl alcohol which is formed in the body by glucuronidation following exposure to ethanol, such as by drinking alcoholic beverages. It is used as a biomarker to test for ethanol use and to monitor alcohol abstinence in situations where drinking is prohibited, such as in the military, in professional monitoring programs(health professionals, attorneys, airline pilots in recovery from addictions), in schools, in liver transplant clinics, or in recovering alcoholic patients. ETG can be measured in urine up to approximately 80 hours after ethanol is ingested. ETG is a more accurate indicator of the recent exposure to alcohol than measuring for the presence of ethanol itself. The Multi-Drug Rapid Test Panel yields a positive result when the concentration of Ethyl Glucuronide in urine exceeds detective level

Clonazepam(CLO)

Clonazepam is a benzodiazepine drug having anxiolytic, anticonvulsant, muscle relaxant, amnestic, sedative, and hypnotic properties. Clonazepam has an intermediate onset of action, with a peak blood level occurring one to four hours after oral administration. Long-term effects of benzodiazepines include tolerance, benzodiazepine dependence, and benzodiazepine withdrawal syndrome, which occurs in one third of patients treated with clonazepam for longer than four weeks. Benzodiazepines such as clonazepam have a fast onset of action, high effectivity rate, and low toxicity in overdose; however, as with most medications, it may have drawbacks due to adverse or paradoxical effects. The detection period for the Benzodiazepines in the urine is 3-7 days.

The Multi-Drug Rapid Test Panel yields a positive result when the Benzodiazepines in urine exceeds detective level

Lysergic Acid Diethylamide (LSD)

Lysergic acid diethylamide (LSD) is a white powder or a clear, colorless liquid. LSD is manufactured from lysergic acid which occurs naturally in the ergot fungus that grows on wheat and rye. It is a Schedule I controlled substance, available in liquid, powder, tablet (microdots), and capsule form. LSD is recreationally used as a hallucinogen for its ability to alter human perception and mood. LSD is primarily used by oral administration, but can be inhaled, injected, and transdermally applied. LSD is a non-selective 5-HT agonist, may exert its hallucinogenic effect by interacting with 5-HT 2Areceptors as a partial agonist and modulating the NMDA receptor-mediated sensory, perceptual, affective and cognitive processes. LSD mimics 5-HT a f5-HT 1A receptors, producing a marked slowing of the firing rate of serotonergic neurons. LSD has a plasma half-life of 2.5-4 hours. Metabolites of LSD include N-desmethyl-LSD, hydroxy-LSD, 2-oxo-LSD, and 2-oxo-3-hydroxy-LSD. These metabolites are all inactive. LSD use can typically be detected in urine for periods of 2-5 days.

The Multi-Drug Rapid Test Panel yields a positive result when Lysergic Acid Diethylamide in urine exceeds detective level.

Methylphenidate (MPD)

Methylphenidate (Ritalin) is a psychostimulant drug approved for treatment of ADHD or attention-deficit hyperactivity disorder, postural orthostatic tachycardia syndrome and narcolepsy. Methylphenidate primarily acts as a norepinephrine-dopamine reuptake inhibitor. Methylphenidate is most active at modulating levels of dopamine and to a lesser extent norepinephrine. Similar to cocaine, methylphenidate binds to and blocks dopamine transporters and norepinephrine transporters. Methylphenidate has both dopamine transporters and norepinephrine transporters. Methylphenidate has both dopamine transporter and norepinephrine transporters. Methylphenidate may also exert a neuroprotective action against the norepinephrine transporters. Methylphenidate may also exert a neuroprotective action against the neurotoxic effects of Parkinson's disease and methamphetamine abuse. Methylphenidate taken orally has a bioavailability of 11-52% with a duration of action around 1-4 hours fornistant release, 3-8 hours for sustained release, and 8-12 hours for extended release(Concerta). The half-life of methylphenidate is 2-3 hours, depending on the individual. The peak plasma time is achieved at about 2 hours.

The Multi-Drug Rapid Test Panel yields a positive result when the Methylphenidate (Ritalin) in urine exceeds 300 ng/mL.

Zolpidem(ZOL)

Zolpidem (brand names Ambien, Ambien CR, Intermezzo, Stilnox, Stilnoct, Sublinox, Hypnogen, Zonadin, Sanval and Zolsana) is a prescription medication used for the treatment of insomnia and some brain disorders.¹It is a short-acting nonbenzodiazepine hypotic of the imidazopyridine class¹ that potentiates GABA, an inhibitory neurotransmitter, by binding to GABAA receptors at the same location as benzodiazepines.² It works quickly, usually within 15 minutes, and has a short half-life of two to three hours.

Zolpidem may be detected in blood or plasma to confirm a diagnosis of poisoning in hospitalized patients, provide evidence in an impaired driving arrest, or to assist in a medico-legal death investigation. Blood or plasma Zolpidem concentrations are usually in a range of 30–300 µg/l in persons receiving the drug therapeutically, 100–700 µg/l in those arrested for impaired driving, and 1000–7000 µg/l in victims of acute over dosage. Analytical techniques, in general, involve gas or liquid chromatography.^{34,5}

The Multi-Drug Rapid Test Panel yields a positive result when Zolpidem in urine reaches 50ng/ml. Alcohol(ALC)

Alcohol intoxication can lead to loss of alertness, coma, death and birth defects. Determination of ethyl alcohol in blood, saliva and urine is commonly used for measuring legal impairment, alcohol poisoning, etc. The BAC (Blood Alcohol Content) at which a person becomes impaired is variable. The United States Department of Transportation (DOT) has established a BAC of 0.02% (0.02g/dL) as the cut-off level at which an individual is considered positive for the presence of alcohol.

The Multi-Drug Rapid Test Panel yields a positive result when the concentration of Alcohol in urine exceeds 0.02%.

Mephedrone(MEP100)

Mephedrone, also known as 4-methylmethcathinone (4-MMC) or 4-methylephedrone is a synthetic stimulant drug of the amphetamine and cathinone classes. Slang names include drone, 12M-CAT, 13 White Magic14 and meow meow. 15It is chemically similar to the cathinone compounds found in the khat plant of eastern Africa.

Mephedrone comes in the form of tablets or a powder, which users can swallow, snort or inject, producing similar effects to MDMA, amphetamines and cocaine. In addition to its stimulant effects, Mephedrone produces side effects, of which teeth grinding are the most common. A number of metabolites are possible, however the n-demethyl metabolite of Mephedrone will be 4-Methylcathinone. This metabolite appears to be nearly inactive as a Monoamine Oxydase Inhibitor. On further metabolism of this metabolite one of the possible metabolites is 4-Methylnorephedrine, caused by the reduction of the Keto.A dose of 150mg-250mg is the average, giving a duration of around 2 hours.the duration will lengthen in larger 250mg+ dosages.

3, 4-methylenedioxypyrovalerone(MDPV)

3. 4-methylenedioxypyrovalerone (MDPV) is a psychoactive recreational drug with stimulant properties which acts as a norepinephrine-dopamine reuptake inhibitor (NDRI). It was first developed in the 1960s by a team at Boehringer Ingelheim. MDPV remained an obscure stimulant until around 2004 when it was reportedly sold as a designer drug. Products labeled as bath salts containing MDPV were previously sold as recreational drugs in gas stations and convenience stores in the United States, similar to the marketing for Spice and K2 as incense.

MDPV is the 3,4-methylenedioxy ring-substituted analog of the compound pyrovalerone, developed in the 1960s, which has been used for the treatment of chronic fatigue and as an anorectic, but caused problems of abuse and dependence. However, despite its structural similarity, the effects of MDPV bear little resemblance to other methylenedioxy phenylalkylamine derivatives such as 3,4-methylenedioxy-N-methylamphetamine (MDMA), instead producing primarily stimulant effects with only mild entactooenic qualities.

MDPV undergoes CYP450 2D6, 2C19, 1A2, and COMT phase 1 metabolism (liver) into methylcatechol and pyrrolidine, which in turn are glucuronated (uridine 5 -diphospho-glucuronosyl-transferase) allowing it to be excreted by the kidneys, with only a small fraction of the metabolites being excreted into the stools. No free pyrrolidine will be detected in the urine.

Diazepam (DIA)

Diazepam is a medication of the benzodiazepine family that typically produces a calming effect. It has anticonvulsant properties. Diazepam has no effect on GABA levels and no effect on glutamate decarboxylase activity, but has a slight effect on gamma-amino butyric acid transaminase activity. Diazepam can be administered orally, intravenously intramuscularly (IM), or as a suppository. When administered orally, it is rapidly absorbed and has a fast onset of action. The onset of action is one to five minutes for IV administration and 15–30 minutes for IM administration. The duration of diazepam's peak pharmacological effects is 15 minutes to one hour for both routes of administration. The bioavailability after oral administration is 100% and 90% after rectal administration. Peak plasma levels occur between 30 and 90 minutes after oral administration and between 30 and 60 minutes after intramuscular administration; after rectal administration, peak plasma levels occur after 10 to 45 minutes. Diszepam is highly protein-bound, with 86 to 99% of the absorbed drug being protein-bound. The distribution half-life of diazepam is 2 to 13 minutes. When diazepam is administered IM, absorption is slow, erratic, and incomplete.

Zopiclone (ZOP)

Zopiclone is a nonbenzodiazepine hypotic agent used in the treatment of insomnia. It is a cyclopyrrolone, which increases the normal transmission of the neurotransmitter gamma-aminobutyric acid in the central nervous system, as benzodiazepines do, but in a different way. Zopiclone is indicated for the short-term treatment of insomnia where sleep initiation or sleep maintenance are prominent symptoms. Long-term use is not recommended, as tolerance, dependence, and addiction can occur with prolonged use. Zopiclone is partly extensively metabolized in the liver to form an active N-demethylated derivative (N-desmethylzopiclone) and an inactive zopiclone-N-oxide.

In urine, the N-demethyl and N-oxide metabolites account for 30% of the initial dose. Between 7 and 10% of zopiclone is recovered from the urine, indicating extensive metabolism of the drug before excretion. The terminal elimination half-life of zopiclone ranges from 3.5 to 6.5 hours (5 hours on average).¹⁶ Time to peak plasma concentration is 1 - 2 h, the absorption rate constant is 1.3 h-1 and maximum plasma concentration after administration of 7.5 mo is 131ua/1.

Zopiclone may be measured in blood, plasma, or urine by chrömatographic methods. Plasma concentrations are typically less than 100µg/l during therapeutic use, but frequently exceed 100µg/l in automotive vehicle operators arrested for impaired driving ability and may exceed 1000µg/l in acutely poisoned patients. Post mortem blood concentrations are usually in a range of 0.4-3.9 mg/l in victims of fatal acute overdose^{1,71,819}

Methcathinone(MCAT)

Methcathrinone, is a monóamine alkaloid and psychoactive stimulant, a substituted cathrinone. Methcathrinone is a highly addictive drug, primarily psychologically addicting and most of the signs of addiction to the drug are emotional or psychological. It has been popularized and continues to be sold under misleading names such as "bath salts", "plant fertilizers" or "research chemicals", but it is actually a powerful psycho-stimulant used as a "bath salts", "plant drug. Effects of this drug typically last from 4 to 6 hours. It is used as a recreational drug due to its potent stimulant and euphoric effects and is considered to be addictive, with both physical and psychological withdrawal occurring if its use is discontinued after prolonged or high-dosage administration ⁴⁰. It is usuals as a Schedule I controlled substance by the Convention on Psychotropic Substances and the United States' Controlled Substances Ard and as such it is not considered to be actificative in the treatment, diagnosis, prevention, or cure of any disease, and has no approved medical use. Methcathinone has very strong affinities for the dopamine transporter and the norepinephrine (noradrenaline) transporter. Its affinity for the serotonin transporter is less than that of methamphetamine.⁴⁷

Effects of short term intoxication are similar to those produced by crack cocaine or methamphetamine: stimulation of heart rate and respiration; feeling of euphoria; loss of appetite; increased alertness; pupils may be dilated; body temperature may be slightly elevated. Acute intoxication at higher doses may also result in: insomnia, tremors and muscle twitching, fever, headaches, convulsions, irregular heart rate and respirations, anxiety, restlessness, caranoia. hallucinations and delusions.

7-aminoclonazepam (7-ACL)

7-aminocionazepam is the major metabolite of clonazepam. Clonazepam sold under the brandname Klonopin among others, is a medication used to prevent and treat seizures, panic disorder, and for the movement disorder known as akathisia. It is a type of benzodiazepine. As a major metabolite, 7-aminocionazepam may be used to monitor use of the parent drug, clonazepam. Clonazepam, marketed as Klonopin and Rivotfil, is a long-acting benzodiazepine with anxiolytic, anticonvulsant, muscle relaxant, and hyponotic properties.

The Multi-Drug Rapid Test Panel (Urine) is a rapid urine-screening test that can be performed without the use of an instrument. The test utilizes the antibody to selectively detect elevated levels of 7-aminoclonazepam in urine. The Multi-Drug Rapid Test Panel (Urine) yields a positive result when the 7-aminoclonazepam in urine exceed the cut-off weel

Carfentanyl(CFYL)

Carfentanyl is an analog of the synthetic opioid analgesic fentanyl. It is 10,000 times more potent than morphine, making it among the most potent commercially used opioids. Carfentanil was first synthesized in 1974. It is marketed under the trade name Wildnil as a general anaesthetic agent for large animals. Side effects of carfentanil are similar to those of fentanyl, which include itching, nausea and respiratory depression, which can be life-threatening. Carfentanil is classified as Schedule II under the Controlled Substances Act in the United States with a DEA ACSCN of 9743.

Caffeine(CAF)

Caffeine is a central nervous system (CNS) stimulant of the methylxanthine class. It is the world's most widely consumed psychoactive drug. It is found in the seeds, nuts, or leaves of a number of plants native to South America and East Asia and confers on them several survival and reproductive benefits. Caffeine can produce a mild form of drug dependence – associated with withdrawal symptoms such as sleepiness, headache, and irritability – when an individual stops using caffeine after repeated daily intake. ¹³⁴¹⁵After Intravenous administration of caffeine the urine level of the drug is approximately the same in each of

^{13:44:3}After intravenous administration of caffeine the urine level of the drug is approximately the same in each of the first 4 hourly specimens. Blood samples taken 10 and 70 minutes after injection of the drug were analyzed and showed 0.29 and 0.28mg, per 100 cc. respectively. There are to be contrasted with the 1st hour urine which contained 0.73mg.per 100 cc., essentially 3 times that in the blood. After oral administration of caffeine to the horse the concentration of caffeine in the urine rose progressively during the first 3 hours, remained relatively constant through the 8th hours. At 48 hours, a urine specimen contained approximately 0.17mg, per 100 cc. of caffeine. In addition, flu-like symptoms, nausea/vorniting, and muscle pain/stiffness were judged likely to represent valid symptom categories. In experimental studies, the incidence of headache was 50% and the incidence of clinically significant distress or functional impairment was 13%. Typically, onset of symptoms occurred 12–24 h after abstinence, with peak intensity at 20–51 h, and for a duration of 2–9 days. ¹⁵1% to 3% of caffeine is excreted unchanged in the urine. The rate of caffeine metabolism is variable, with a half-life of 4 to 6h.

Cathine (CAT)

Cathinone, also known as benzoylethanamine, or β -keto-amphetamine is a monoamine alkaloid found in the shrub Catha edulis (CAT) and is chemically similar to ephedrine, Cathinone, methCathinone and other amphetamines. It with amphetamine, ephedrine, methamphetamine and mephedrone belongs to excitatory amphetamines psychiatric drugs, has the strong central excitement and suppress appetite, has been widely applied in the depression, fatigue, obesity, gastric ulcer, etc. The earliest found in Arab tea, because of its structure and pharmacological activities are similar to amphetamine.²³

S-(-)-Cathinone (S-(-)-alpha-aminopropiophenone) is the major active principle of khat leaves (Catha edulis), which are widely used in East Africa and the Arab peninsula as an amphetamine-like stimulant. After oral administration of synthesized cathinone (isomers, racemate), 22-52% was recovered in 24 h urine samples mainly as aminoalcohol metabolites. With GC/MS, HPLC and CD, the main metabolite of S-(-)-cathinone was identified as R/S-(-)-norephedrine and the main metabolite of R-(+)-cathinone as

R/R-(-)-norpseudoephedrine. Both aminoalcohols are formed by a stereospecific keto reduction. 24

Use too much Cathinone can cause loss of appetite, anxiety, irritability, insomnia, illusion and panic attacks. Abusers have for a long time for the development of personality disorder and continuing the risk of myocardial infarction. The World Anti-Doping Agency's list of prohibited substances (used for the Olympic Games among other athletic events) bars cathine in concentrations of over 5 micrograms per milliliter in urine. Cathine is a Schedule III drug under the Convention on Psychotropic Substances.²⁶ **Tropicamide(TRO)**

Tropicamide is an antimuscarinic drug usually prescribed as an ophthalmic solution to induce short-term mydriasis and cycloplegia. Tropicamide is currently abused (injected intravenously) as an inexpensive recreational deliriant drug²⁶.

Misuse of tropicamide typically occurs through IV injection; its effects last from 30 min to 6 h, and It is usually mixed with heroin, methadone, and other opioid drugs to potentiate the " rush" when injected intravenous/9⁶.Medical effects of tropicamide misuse include slurred speech, persistent mydriasis, unconsciousness/unresponsiveness, hallucinations, kidney pain, dysphoria, "open eye dreams," hyperthermia, tremors, suicidal feelings, convulsions, psychomotor agitation, tachycardia and headache.

The TRO Rapid Test Dipstick (Urine) is a rapid urine screening test that can be performed without the use of an instrument. The test utilizes a monoclonal antibody to selectively detect elevated levels of tropicamide in urine. The TRO Rapid Test Dipstick (Urine) yields a positive result when tropicamide in urine exceeds 350ng/mL Alprazolam (ALP)

Alprazolam, available under the trade name Xanax among others, is a short-acting anxiolytic of the benzodiazepine class. It is commonly used for the treatment of panic disorder, and anxiety disorders, such as generalized anxiety disorder (GAD) or social anxiety disorder (SAD). ^{27,28}Alprazolam, like other benzodiazepines, binds to specific sites on the GABAA receptor. It possesses anxiolytic, sedative, hypnotic, skeletal muscle relaxant, anticonvulsant, and amnestic properties.

A mean half-life of alprazolam of 16.3 hours has been observed in healthy elderly subjects (range: 9.0-26.9 hours, n=16) compared to 11.0 hours (range: 6.3-15.8 hours, n=16) in healthy adult subjects.

Alprazolam and its metabolites are excreted primarily in the urine. The pharmacokinetics of alprazolam and two of its major active metabolites (4-hydroxyalprazolam and α-hydroxyalprazolam) are linear, and concentrations are proportional up to the recommended maximum daily dose of 10 mg given once daily. [3] Peak concentrations in the plasma occur in one to two hours following administration. Plasma levels are proportionate to the dose given; over the dose range of 0.5 to 3.0 mg, peak levels of 8.0 to 37ng/ml were observed.²⁹

[PRINCIPLE (FOR DOA TESTS EXCLUDING ALCOHOL)]

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. The antibody will then react with the drug-protein conjugate and a visible colored line will show up in the test region of the specific drug dipstick. The presence of drug above the cut-off concentration will saturate all the binding sites of the antibody. Therefore, the colored line will not form in the test region.

A drug-positive urine specimen will not generate a colored line in the specific test region of the dipstick because of drug competition, while a drug-negative urine specimen will generate a line in the test region because of the absence of drug competition.

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

[PRINCIPLE (FOR ALCOHOL)]

The urine Alcohol Rapid Test consists of a plastic strip with a reaction pad attached at the tip. On contact with alcohol, the reaction pad will change colors depending on the concentration of alcohol present. This is based on the high specificity of alcohol oxidase for ethyl alcohol in the presence of peroxidase and enzyme substrate such as TMB.

[REAGENTS(FOR DOA TESTS EXCLUDING ALCOHOL)]

Each test line contains anti-drug mouse monoclonal antibody and corresponding drug-protein conjugates. The control line contains goat anti-rabbit IgG polyclonal antibodies and rabbit IgG. [REAGENTS (FOR ALCOHOL)]

Tetramethylbenzidine,

Alcohol Oxidase Peroxidase

[PRECAUTIONS]

- For healthcare professionals including professionals at point of care sites.
- Immunoassay for *in vitro* diagnostic use only. The test Panel should remain in the sealed pouch until
- Infinitionassay for in vitro diagnostic use only. 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]

Store as packaged in the sealed pouch at 2-30°C. The test is stable through the expiration date printed on the sealed pouch. The test Panels must remain in the sealed pouch until use. DO NOT FREEZE. Do not use beyond the expiration date.

[SPECIMEN COLLECTION AND PREPARATION] Urine Assay

The urine specimen should be collected in a clean and dry container. Urine collected at any time of the day may be used. Urine specimens exhibiting visible precipitates should be centrifuged, filtered, or allowed to stell to obtain a clear specimen for testing.

Specimen Storage

Urine specimens may be stored at 2-8°C for up to 48 hours prior to testing. For prolonged storage, specimens may be frozen and stored below -20°C. Frozen specimens should be thawed and mixed well before testing. When testing cards with S.V.T. or Alcohol storage of urine specimens should not exceed 2 hours at room temperature or 4 hours refrigerated prior to testing. **IMATFRIALS**

Materials Provided

- Test Panels
 Package insert
- Adulteration Color Chart (when applicable)

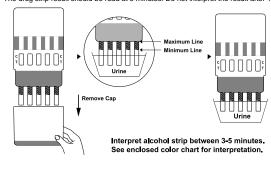
Materials Required But Not Provided

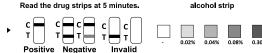
timer [DIRECTIONS FOR USE]

Allow the test, urine specimen, and/or controls to reach room temperature (15-30°C) prior to testing.

- Bring the pouch to room temperature before opening it. Remove the test panel from the sealed pouch and use it within one hour.
- 2. Remove the cap.
- 3. With the arrow pointing toward the urine specimen, immerse the test panel vertically in the urine specimen for at least 10 to 15 seconds. Immerse the dipstick to at least the level of the wavy lines, but not above the arrow on the test panel.

- 4. Replace the cap and place the test panel on a non-absorbent flat surface.
- Start the timer and wait for the colored line(s) to appear.
- Read the Alcohol strip between 3-5 minutes according to color chart provided separately/on foil pouch.
 The drug strip result should be read at 5 minutes. Do not interpret the result after 10 minutes.





[INTERPRETATION OF RESULTS]

(Please refer to the illustration above)

NEGATIVE:* A colored line appears in the Control region (C) and colored lines appear in the Test region (T). This negative result means that the concentrations in the urine sample are below the designated cut-off levels for a particular drug tested.

*NOTE: The shade of the colored lines(s) in the Test region (T) may vary. The result should be considered negative whenever there is even a faint line.

POSITIVE: A colored line appears in the Control region (C) and NO line appears in the Test region (T). The positive result means that the drug concentration in the urine sample is greater than the designated cut-off for a specific drug.

INVÄLID: No line appears in the Control region (C). Insufficient specimen volume or incorrect procedural techniques are the most likely reasons for Control line failure. Read the directions again and repeat the test with a new test card. If the result is still invalid, contact your manufacturer. [INTERPRETATION OF RESULTS (ALCOHOL STRIP)]

Negative: Almost no color change by comparing with the background. The negative result indicates that

the urine alcohol level is less than 0.02%.

Positive: A distinct color developed all over the pad. The positive result indicates that the urine alcohol concentration is 0.02% or higher.

Invalid: The test should be considered invalid If only the edge of the reactive pad turned color that might be ascribed to insufficient sampling. The subject should be re-tested. Besides, if the color pad has a blue color before applying urine sample, do not use the test.

QUALITY CONTROL

A procedural control is included in the test. A line appearing in the control region (C) is considered an internal procedural control. It confirms sufficient specimen volume, adequate membrane wicking and correct procedural technique.

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

LIMITATIONS

- The Multi-Drug Rapid Test Panel provides only a qualitative, preliminary analytical result. A secondary analytical method must be used to obtain a confirmed result. Gas chromatography/mass spectrometry (GC/MS) is the preferred confirmatory method.¹¹⁰
- There is a possibility that technical or procedural errors, as well as interfering substances in the urine specimen may cause erroneous results.
- Adulterants, such as bleach and/or alum, in urine specimens may produce erroneous results regardless of the analytical method used. If adulteration is suspected, the test should be repeated with another urine specimen.
- 4. A positive result does not indicate level or intoxication, administration route or concentration in urine.
- A negative result may not necessarily indicate drug-free urine. Negative results can be obtained when drug is present but below the cut-off level of the test.
- 6. This test does not distinguish between drugs of abuse and certain medications.
- 7. A positive test result may be obtained from certain foods or food supplements. Alcohol in the atmosphere, such as spray from perfumes, deodorizers, glass cleaners etc. can affect the Alcohol Rapid Tests. Therefore, adequate measures should be taken to avoid undue interference from such atmospheric agents in the testing area.
- The test is only for detection of presence/ absence of alcohol in the urine, which may result from habitual drinking or medications and does not discriminate the two.

EXPECTED VALUES

The negative result indicates that the drug concentration is below the detectable level. Positive result means the concentration of drug is above the detectable level. [PERFORMANCE CHARACTERISTICS]

Accuracy

A side-by-side comparison was conducted using the Multi-Drug Rapid Test Panel and commercially available drug rapid tests. Testing was performed on approximately 250 specimens per drug type previously collected from subjects presenting for Drug Screen Testing. Presumptive positive results were confirmed by GC/MS.

Multi-Drug Ra	hod pid Test Papel	Positive	Negative	% agreement with GC/MS
ACE	Positive	29	1	93.5%
5,000	Negative	2	68	98.6%
AMP	Positive	103	3	98.1%
1,000	Negative	2	142	97.9%
AMP	Positive	110	2	99.1%
500	Negative	1	137	98.6%
AMP	Positive	116	2	99.1%
300	Negative	1	131	98.5%
BAR	Positive	98	2	96.1%
300	Negative	4	146	98.6%
BAR	Positive	101	3	95.3%
200	Negative	5	141	97.9%
BZO	Positive	112	3	98.2%
500	Negative	2 121	133	97.8%
BZO	Positive	2		98.4%
300 BZO	Negative Positive	127	126	99.2% 99.2%
200		127	120	99.2%
BZO	Negative	128	3	99.2%
100	Positive Negative	120	118	99.2 %
BUP	Positive	105	0	99.1%
10	Negative	1	144	>99.9%
BUP	Positive	105	0	99.1%
5	Negative	1	144	>99.9%
coc	Positive	111	3	98.2%
300	Negative	2	134	97.8%
COC	Positive	40	0	>99.9%
200	Negative	0	60	>99.9%
COC	Positive	116	4	98.3%
150	Negative	2	128	97.0%
COC	Positive	117	4	99.2%
100	Negative	1	128	97.0%
THC	Positive	85	3	95.5%
300	Negative	4	158	98.1%
THC	Positive	85	4	93.4%
200	Negative	6	155	97.5%
THC	Positive	86	4	94.5%
150	Negative	5	155	97.5%
THC	Positive	92	3	97.9%
50	Negative	2	153	98.1%
THC	Positive	94	3	97.9%
30	Negative	2	151	98.1%
THC	Positive	95	4	96.9%
25	Negative	3	148	97.4%
MTD	Positive	89	2	98.9%
300 MTD	Negative	1 91	158	98.8% 98.7%
200	Positive	1	156	98.7%
MET	Negative Positive	76	5	96.2%
1,000	Negative	3	166	97.1%
MET	Positive	83	5	97.6%
500	Negative	2	160	97.0%
MET	Positive	88	4	97.8%
300	Negative	2	156	97.5%
MDMA	Positive	99	1	98.0%
1,000	Negative	2	148	99.3%
MDMA	Positive	102	1	98.1%
500	Negative	2	145	99.3%
MDMA	Positive	103	1	98.1%
300	Negative	2	144	99.3%
MOP	Positive	95	7	95.0%
300	Negative	5	143	95.3%
MOP	Positive	95	6	95.0%
200	Negative	5	144	96.0%
MOP	Positive	98	5	97.0%
100	Negative	3	144	96.6%
MQL	Positive	79	11	89.8%
	Negative	9	151	93.2%
OPI	Positive	117	8	96.7%
	Negative	4	121	93.8%
PCP	Positive	85	5	92.4%
	Negative	7	153	96.8%
PPX	Positive	97	9	96.0%
	Negative	4	140	94.0%
TCA	Positive	91	13	94.8%
	Negative Positive	5	141	91.6%
TML 100		82	12	88.2%
	Negative Positive	11	145	92.4%
TML 200		82	6	88.2% 96.2%
	Negative	11	151	
TML 300	Positive	81 11	6 152	88.0% 96.2%
	Negative	77	3	96.2% 97.5%
KET	Positive			

	lethod	-			GC/			% 2	greemer	nt with G	C/MS
Multi-Drug F				Positiv	/e	Neg	ative	70 di	-		5,140
KET		Positive		81			3			7.6%	
500		Vegative		2			64			3.2%	
KET		Positive		89			4			6.7%	
300		Vegative		3			54			7.5%	
KET		Positive		97			4			5.0%	
100		Vegative		4		1	45			7.3%	
OXY		Positive		84			1			.7%	
100		Vegative		2		1	63			9.4%	
COT		Positive		88			4			6.7%	
200		Vegative		3		1	55			.5%	
COT		Positive		93			3			.9%	
100		Vegative		2			52	-		8.1%	
EDDP		Positive		92			1	_		7.9%	
300		Vegative Positive		2 95			55	-		9.4%	
EDDP							5	-		5.9%	
100 FYL		Negative Desitive		3 79			47 1	-		6.7% 8.8%	
20		Positive		1		1	69	-			
FYL		Negative Desitive				I		-		9.4%	
		Positive		80			1	_		3.8%	
10		Vegative		1		1	68	_		9.4%	
K2-50		Positive		78			3	_		7.5%	
		Negative Desitive		2		1	67	-		3.2%	
K2-30		Positive		82			2	_		7.6%	
		Vegative		2		1	64	_		3.8%	
K2-25		Positive		82			3	_		7.6%	
. ==		Vegative		2			63	_		3.2%	
6-MAM10		Positive		42			2	_		.7%	
		Vegative		1		1	05	_		3.1%	
MDA500		Positive		103			3	_		3.1%	
		Vegative		2		1	42			.9%	
ETG500		Positive		83			1			7.6%	
E10000		Vegative		2		1	64			9.4%	
ETG1,000		Positive		81			1			5.3%	
		Vegative		4		1	64			9.4%	
CLO		Positive		101			1			7.1%	
400	1	Vegative		3			45		99	9.3%	
CLO		Positive		103			2			9.0%	
150		Vegative		1		1	44			3.6%	
LSD 20		Positive		33			1		94	.3%	
LOD 20	1	Vegative		2			64		98	3.5%	
LSD 50		Positive		32			1		94	1.1%	
L3D 30	1	Vegative		2			65		98	3.5%	
MDD		Positive		35			1		94	.6%	
MPD	1	Vegative		2		l	52		98	3.4%	
701		Positive		20			2		90).9%	
ZOL		Vegative		2		(66			′.1%	
		Positive		19			2		90).5%	
MEP100	1	Vegative		2		l	64		97	′.0%	
		Positive		28			1			3.3%	
MDPV		Vegative		2		(69			3.6%	
DIA 000		Positive		121			1			3.4%	
DIA 300		Vegative		2		1	26			0.2%	
DIA 202		Positive	1	121			1			3.4%	
DIA 200		Vegative	1	2		1	26			9.2%	
		Positive	1	19			2			6.4%	
ZOP 50		Vegative		3		-	2 69			.2%	
		Positive		20			4			.2 <i>%</i>	
MCAT 500		Vegative		20			4 76			5.0%	
		Positive		32			1			1.1%	
7-ACL 300		Vegative		2			43			7.7%	
		Positive		35			1			1.6%	
7-ACL 200		Negative		2			40	-		7.6%	
		Positive		36			+0 1	-		.0 %	
7-ACL 100		Vegative		2		· .	39	-		7.5%	
		Positive		36			1	-		.5%	
CFYL 500		1		30		· .	72	-			
		Negative Positive		21			3	-		3.6% .3%	
CAF 1000		Positive		21		-	5 66	-		5.7%	
		Vegative Positive		19			2	-).5%	
CAT 150		Positive		2			2 73	_		7.3%	
		Negative Positive						_			
TRO 350		Positive		23			2	_		2.0%	
		Negative Regitive		2			54	_		<u>.0%</u>	
ALP 100		Positive		20			2	_		0.9%	
-		Vegative		2	4		74	1	97	7.4%	
	105	A 8 4 5		greemer				D70	070	070	
	ACE	AMP	AMP	AMP	BAR	BAR	BZO	BZO	BZO	BZO	BUP
o olitik ko	5,000	1,000	500	300	300	200	500	300	200	100	10
ositive	*	>99.9%	>99.9%	s >99.9%	>99.9%	>99.9%	>99.9%	>99.9%	>99.9%	>99.9%	>99.9%
greement											<u> </u>
egative	*	>99.9%	>99.9%	»>99.9%	>99.9%	>99.9%	>99.9%	>99.9%	>99.9%	>99.9%	>99.9%
greement	*										
otal Results		>99.9%	>99.9%	⁶ >99.9%	>99.9%	>99.9%	>99.9%	>99.9%	>99.9%	>99.9%	>99.9%

	BU		COC		OC		OC	CO		TH		TH	<u> </u>	THC	1	MTD	—	MTD	T 7	MET
	ВU 5	~	300		00		150	10		1H 15		1H 50		1HC 25		300		200		,000
Positive Agreement	*		>99.9	%	*		*	>99.	9%	>99.	.9%	>99.	9%	>99.9%	% >	99.99	% >9	99.9%	5 >S	99.9%
Vegative	*		>99.9	%	*		*	>99.	9%	>99.	.9%	>99.9	9%	>99.9%	%>	99.99	% >9	99.9%	;<	99.9%
Agreement Fotal	*	_	>99.9	-	*	┢	*	>99.				>99.9	_	>99.9%	+		-		+	
Results			>99.9	70				>99.	9%	>99.	9%	>99.	970	>99.97	/0 >	99.9	/0 >5	99.97	, >8	99.97
	ME	т	MET	ME	MA	М	DMA	MDN	MA	MC)P	МО	P		T	0.01	Т.		Т.	
Positive	500		300		000	5	500	30		30	00	10	0	MQL		OPI		PCP		PPX
greement	>99.9	9%	>99.9	% >99	9.9%	>9	9.9%	*		>99.	.9%	>99.9	9%	>99.9%	6	*	>9	99.9%	5 >9	99.9%
legative greement	>99.9	9%	>99.9	% >99	9.9%	>9	9.9%	*		>99.	.9%	>99.9	9%	>99.9%	6	*	>9	99.9%	5 >9	99.9%
otal Results	>99.9	9%	>99.9	% >99	9.9%	>9	9.9%	*		>99.	.9%	>99.9	9%	>99.9%	6	*	>9	99.9%	÷ >۶	99.9%
Cesuits						I							1							
		т	CA	TML 100		ML DO	TM 30		KET ,00		KET 500		ET 00	KET 100		OXY		OT 200	CC 10	
Positive Agreemer	at	1	*	*	-	*	*			9%>9					%	*		*	*	
Negative		t	*			•	*	~	a a	9%>9	0 0%	/~~ac	.9%	>99.9	%	*	+	*	*	,
Agreemer Total Res			*	*		•	*)%>9		_	.9%		_	*	-	*	*	,
		1			<u> </u>		<u> </u>							1					_	
		DDF 300	P EDI 10		:YL 20		YL IO	K2 50		K2 30	K5 25		MA 10	M MD 50		ET0 500		ETG ,000		LO 00
Positive Agreemen		*	*		*		*	*	Τ	*	*		*	*		*		*		*
Negative		*	*	+	*		*	*	╈	*	*	+	*	*		*	+	*	-	*
Agreemen Total Resu		*	*	-	*	-	*	*	+	*	*	+	*	*	-	*	+	*	-	*
			<u> </u>		_	۱ <u> </u>				T1 . 0	۱ <u>ــــــــــــــــــــــــــــــــــــ</u>			1	-					10.1
1	CL	0	LSD 20	LSD 50	MF	D	ZOL	TH0	~ 2	THC 30/30	MO 20	P	IEP 00	MDP V			DIA 200	ZO 50		ИСА Т
Positive			*			_	*	>99		0	20	- -	*	1000	-	*	*		+	500 *
Agreemen				<u> </u>	_			>99			<u> </u>	+						<u> </u>	+	
Agreemer	'nt	•	*	*	*	'	*	%		*	*		*	*		*	*	*		*
Total Results	,	•	*	*	*		*	>99 %	.9	*	*		*	*		*	٠	*		*
			T	7-AC	<u> </u>	7-A	CL	7-A0	2I		FYL		CAF		AT	T	TRC		AL	D
				300	-	20	0	10		5	00		000		50		350			
Positive A	-			*	+	*		*			*	\perp	*		*		*		*	
Negative /	-	mer	nt	*	+	*		*			*	+	*	+	*	+	*	+	*	
Total Res * Note:		1 on	GC/N		a ins				erc				-		^					
A study we demonstrate speciments and tested ACETAM	ate the s, con d at ea INOPI	e wi Itain Ach HEN	ithin ru ning dr site. T N (ACI	un, be rugs at The res E5,000	twee t con sults	en ri Icen	un ar itratio giver	s by nd bet ons of n belo	layp twee ± 5	en op	perat and :	tor pr	recis % cu	sion. A	n ic	lentic	al ca	ard of eled,	f co	ded
			hetan c. (ng/					per ite	F	-	е А +	-	-		+			+		
			0					0		10	0		10		0		0	0	_	
			2,500 3,750					0		10 9	0		10 9		0 1	1	-	0	-	
			6,250					0	_	1	9		1		9			9		
AMPHET			7,500	,000)			1	0	<u> </u>	0	1(U	0	1	0	(J	10		
	A	٨mp	hetan	nine				per		Site	еA			Site B			Site	θC		
	(ono	c. (ng/ 0	nL)		_		ite 0	-	- 10	+	· · · ·	- 10)	+	1	0	+	-	
			500					0	_	10	0		10)	0		0	0		
			750			_[0	_	9 1	1		8		2		9	1	_	
			1,250 1,500					0	_	1 0	9 1(2		8	2		8 10		
				· ·												1	Site		_	
			hetan c. (ng/					per ite	⊢	Site	eA +	-+	-	Site B	+	+	Site	+ C	-	
			0					0		10	0)	10)	0	1	0	0		
		-	250			_[0	_	10	0		10 9		0		0	0	_	
			375 625					0		9 2	1		9		1 9	2	9 2	1	-	
			750					0	_	0	10		0	1	0	(10		

AMPHETAMINE (AMP 300)

AMPHETAMINE (AMP 300)							
Amphetamine	n per		e A		eВ		еC
conc. (ng/mL)	site	- 10	+	-	+	-	+
150	10 10	10	0	10 10	0	10 10	0
225	10	8	2	8	2	8	2
375	10	2	8	2	8	2	8
450	10	0	10	0	10	0	10
BARBITURATES (BAR 300)							
Secobarbital	n per	Sit	e A	Sit	eВ	Sit	еC
conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
150	10	10	0	10	0	10	0
225	10	9	1 8	8	2	9	1 8
375 450	10	0	0 10	0	9 10	0	0 10
BARBITURATES (BAR 200)	10	Ŭ	10	Ŭ	10	Ŭ	10
Secobarbital	n per	Sit	e A	Sit	e B	Sit	e C
conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
100	10	10	0	10	0	10	0
150	10	9	1	9	1	9	1
250	10	1	9	1	9	1	9
300 BENZODIAZEPINES (BZO 500)	10	0	10	0	10	0	10
Oxazepam	n per	Sit	e A	Sit	eВ	Sit	еC
conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
250	10	10	0	10	0	10	0
375	10	8	2	9	1	8	2
625	10	1	9	2	8	1	9
750	10	0	10	0	10	0	10
BENZODIAZEPINES (BZO 300)		0.14	e A	Cit	e B	0.14	e C
Oxazepam conc. (ng/mL)	n per site	-	e A +	-	еь +	-	+
0	10	10	+ 0	10	+ 0	10	+ 0
150	10	10	0	10	0	10	0
225	10	9	1	9	1	9	1
375	10	1	9	1	9	1	9
450	10	0	10	0	10	0	10
BENZODIAZEPINES (BZO 200)		0.1		0.1	-	0.4	
Oxazepam conc. (ng/mL)	n per site	- Sit	e A	- Sit	e B	- Sit	e C
0	10	- 10	+ 0	- 10	+ 0	- 10	+
100	10	10	0	10	0	10	0
150	10	9	1	8	2	9	1
250	10	1	9	1	9	2	8
300	10	0	10	0	10	0	10
BENZODIAZEPINES (BZO 100)							
Oxazepam	n per		e A		e B		еC
conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
50 75	10	10 9	0	10 8	0	10 7	0
125	10	9	9	0 1	9	2	8
150	10	0	9 10	0	9 10	0	10
BUPRENORPHINE (BUP 10)	10	Ű	10	Ŭ	10	ů	
Buprenorphine	n per	Sit	e A	Sit	e B	Sit	еC
conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
5	10	10	0	10	0	10	0
7.5	10	9	1	9	1	8	2
12.5	10	1	9	1	9	1	9
15 BUPRENORPHINE (BUP 5)	10	0	10	0	10	0	10
Buprenorphine	n per	Sit	e A	Sit	eВ	Sit	еC
conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
2.5	10	10	0	10	0	10	0
3.75	10	9	1	9	1	8	2
6.25	10	1	9	1	9	1	9
7.5	10	0	10	0	10	0	10
COCAINE (COC 300)							
Benzoylecgonine	n per		e A		е В		еC
conc. (ng/mL)	site	-	+	-	+	-	+

	•						
0	10	10	0	10	0	10	0
150	10	10	0	10	0	10	0
225	10	9	1	9	1	9	1
375 450	10 10	1	9 10	1	9 10	1	9 10
COCAINE (COC 200)	10	0	10	0	10	0	10
Benzoylecgonine	n per	Sit	e A	Sit	e B	Site	эC
conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
100	10	10	0	10	0	10	0
150	10	9	1	9	1	9	1
250	10	1	9	1	9	1	9
300	10	0	10	0	10	0	10
COCAINE (COC 150)	n nor	Sit	ο A	Sit	B	Site	- C
Benzoylecgonine conc. (ng/mL)	n per site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
75	10	10	0	10	0	10	0
112.5	10	9	1	9	1	9	1
187.5	10	2	8	2	8	2	8
225	10	0	10	0	10	0	10
COCAINE (COC 100)						1	
Benzoylecgonine	n per	Sit	e A	Sit	эB	Site	
conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
50 75	10 10	10 9	0	10 9	0	10 9	0
125	10	2	8	2	8	2	8
125	10	2	0 10	0	0 10	2	0 10
ARIJUANA (THC300)	10	Ŭ	10	Ŭ	10	Ū	10
11-nor∆ 9-THC-9 COOH	n per	Sit	e A	Sit	e B	Site	еC
Concentration (ng/mL)	site	- 10	+	- 10	+	- 10	+
0 150	10 10	10	0	10	0	10	0
225	10	8	2	9	1	9	1
375	10	2	8	3	7	1	9
450 MARIJUANA (THC200)	10	0	10	0	10	0	10
11-nor∆ 9-COOH	n per	Sit	еA	Sit	эB	Site	a C
conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
100	10	10	0	10	0	10	0
150	10	9	1	9	1	9	1
250	10	2	8	1	9	1	9
300	10	0	10	0	10	0	10
ARIJUANA (THC150)		Sit	ο A	Sit	B	Site	- C
11-nor∆ 9-COOH conc. (ng/mL)	n per site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
75	10	10	0	10	0	10	0
112.5	10	9	1	9	1	9	1
187.5	10	2	8	1	9	1	9
225	10	0	10	0	10	0	10
ARIJUANA (THC50)					_		
	-						0
11-nor-∆ 9-COOH	n per	Sit		Sit		Site	
conc. (ng/mL)	site	-	+	-	+	-	+
conc. (ng/mL) 0	site 10	- 10	+ 0	- 10	+ 0	- 10	+ 0
conc. (ng/mL) 0 25	site 10 10	- 10 10	+ 0 0	- 10 10	+ 0 0	- 10 10	+ 0 0
conc. (ng/mL) 0 25 37.5	site 10 10 10	- 10 10 9	+ 0 0 1	- 10 10 8	+ 0 0 2	- 10 10 9	+ 0 0 1
conc. (ng/mL) 0 25 37.5 62.5	site 10 10 10 10	- 10 10 9 1	+ 0 0 1 9	- 10 10 8 1	+ 0 0 2 9	- 10 10 9 2	+ 0 0 1 8
conc. (ng/mL) 0 25 37.5 62.5 75	site 10 10 10	- 10 10 9	+ 0 0 1	- 10 10 8	+ 0 0 2	- 10 10 9	+ 0 0 1
conc. (ng/mL) 0 25 37.5 62.5 75	site 10 10 10 10	- 10 10 9 1	+ 0 1 9 10	- 10 10 8 1	+ 0 2 9 10	- 10 10 9 2	+ 0 1 8 10
conc. (ng/mL) 0 25 37.5 62.5 75 IARIJUANA (THC25) 11-nor-△ 9-COOH conc. (ng/mL)	site 10 10 10 10 10 10 n per site	- 10 10 9 1 0 Situ	+ 0 1 9 10 e A +	- 10 10 8 1 0 Situ	+ 0 2 9 10 • B +	- 10 10 9 2 0 Site	+ 0 1 8 10 e C +
conc. (ng/mL) 0 25 37.5 62.5 75 MARIJUANA (THC25) 11-nor-Δ 9-COOH conc. (ng/mL) 0	site 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 9 1 0 Situ - 10	+ 0 1 9 10 e A + 0	- 10 10 8 1 0 Situ - 10	+ 0 2 9 10 • B + 0	- 10 10 9 2 0 Site - 10	+ 0 0 1 8 10 • C + 0
conc. (ng/mL) 0 25 37.5 62.5 75 IARIJUANA (THC25) 11-nor-△ 9-COOH conc. (ng/mL) 0 12.5	site 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 9 1 0 Situ - 10 10	+ 0 1 9 10 e A + 0 0	- 10 10 8 1 0 Situ - 10 10	+ 0 2 9 10 • B + 0 0	- 10 10 9 2 0 0 Site - 10 10	+ 0 1 8 10 e C + 0 0
conc. (ng/mL) 0 25 37.5 62.5 75 11-nor-∆ 9-COOH conc. (ng/mL) 0 12.5 18.75	site 10	- 10 9 1 0 Sitt - 10 10 8	+ 0 1 9 10 e A + 0 0 2	- 10 10 8 1 0 Sitt - 10 10 8	+ 0 2 9 10 • B + 0 0 2	- 10 9 2 0 Site - 10 10 8	+ 0 1 8 10 • C + 0 0 2
conc. (ng/mL) 0 25 37.5 62.5 75 IARIJUANA (THC25) 11-nor-△ 9-COOH conc. (ng/mL) 0 12.5 18.75 31.25	site 10	- 10 9 1 0 Situ - 10 10 8 1	+ 0 1 9 10 e A + 0 0 2 9	- 10 10 8 1 0 Situ - 10 10 8 1	+ 0 2 9 10 • B + 0 0 2 9 9	- 10 9 2 0 Situ - 10 10 8 2	+ 0 1 8 10 • C + 0 0 2 8
conc. (ng/mL) 0 25 37.5 62.5 75 MARIJUANA (THC25) 11-nor-0 9-COOH conc. (ng/mL) 0 12.5 18.75 31.25 37.5	site 10	- 10 9 1 0 Sitt - 10 10 8	+ 0 1 9 10 e A + 0 0 2	- 10 10 8 1 0 Sitt - 10 10 8	+ 0 2 9 10 • B + 0 0 2	- 10 9 2 0 Site - 10 10 8	+ 0 1 8 10 • C + 0 0 2
conc. (ng/mL) 0 25 37.5 62.5 75 ARIJUANA (THC25) 11-nor-∆ 9-COOH conc. (ng/mL) 0 12.5 18.75 31.25 37.5 MARIJUANA (THC30)	site 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 9 1 0 5 it 10 10 8 1 0	+ 0 1 9 10 e A + 0 0 2 9	- 10 8 1 0	+ 0 2 9 10 • B + 0 0 2 9 9	- 10 9 2 0	+ 0 1 8 10 • C + 0 0 2 8
conc. (ng/mL) 0 25 37.5 62.5 75 MARIJUANA (THC25) 11-nor-0 9-COOH conc. (ng/mL) 0 12.5 18.75 31.25 37.5	site 10	- 10 9 1 0 5 it 10 10 8 1 0	+ 0 1 9 10 e A + 0 0 2 9 10	- 10 8 1 0	+ 0 2 9 10 ⇒ B + 0 0 2 9 10	- 10 9 2 0	+ 0 1 8 10 e C + 0 0 2 8 10
conc. (ng/mL) 0 25 37.5 62.5 75 MARIJUANA (THC25) 11-nor-Δ 9-COOH conc. (ng/mL) 0 12.5 31.25 37.5 MARIJUANA (THC30) 11-nor-Δ 9-COOH conc. (ng/mL) 0 0 0 12.5 37.5 MARIJUANA (THC30) 11-nor-Δ 9-COOH 0 0	site 10	- 10 10 9 1 0 Situ - 10 10 8 1 0 - 10 10 10 10 10 10 10 10 10 10	+ 0 1 9 10 e A + 0 0 2 9 10 Site A + 0	- 10 10 8 1 0 Situ - 10 10 8 1 0 - 10 10 10 10 10 10 10 10 10 10	+ 0 2 9 10 • B + 0 0 2 9 10 • Site B - 0	- 10 10 9 2 0 Situ - 10 10 8 2 0 + 10	+ 0 1 8 10 • C + 0 0 2 8 10 Site C - 0
conc. (ng/mL) 0 25 37.5 62.5 75 MARIJUANA (THC25) 11-nor-△ 9-COOH conc. (ng/mL) 0 12.5 31.25 37.5 J1-nor-△ 9-COOH conc. (ng/mL) 0 12.5 18.75 J1.25 37.5 JARIJUANA (THC30) 11-nor-△ 9-COOH conc. (ng/mL) 0 15	site 10	- 10 10 9 1 0 Situ - 10 10 8 1 0 - 10 10 10 10 10 10 10 10 10 10	+ 0 1 9 10 e A + 0 0 2 9 10 Site A + 0 0	- 10 10 8 1 0 Site - 10 10 8 1 0 - 10 10 10 10 10 10 10 10 10 10	+ 0 2 9 10 8 8 + 0 0 2 9 10 5 8 10 5 10 5 10 5 10 0 0 0	- 10 10 9 2 0 - 10 10 8 2 0 - 10 10 - 10 10 - 10 10 10 10 10 10 - - - - - - - - - - - - -	+ 0 1 8 10 e C + 0 0 2 8 10 Site C - 0 0
conc. (ng/mL) 0 25 37.5 62.5 75 MARIJUANA (THC25) 11-nor-A 9-COOH conc. (ng/mL) 0 12.5 31.25 37.5 MARIJUANA (THC30) 11-nor-A 9-COOH 0.0 0.0	site 10	- 10 10 9 1 0 Situ - 10 10 8 1 0 - 10 10 10 10 10 10 10 10 10 10	+ 0 1 9 10 e A + 0 0 2 9 10 Site A + 0	- 10 10 8 1 0 Situ - 10 10 8 1 0 - 10 10 10 10 10 10 10 10 10 10	+ 0 2 9 10 • B + 0 0 2 9 10 • Site B - 0	- 10 10 9 2 0 Situ - 10 10 8 2 0 + 10	+ 0 1 8 10 • C + 0 0 2 8 10 Site C - 0

METHADONE	Methadone	np	er		Site A	`		Site	В	1	Site	с
	conc. (ng/mL)	si		-		+		-	+		-	+
	0	1	0	10)	0	1	10	0	1	10	C
	150	1	0	10)	0	1	10	0	1	10	C
	225	1	0	9		1		9	1		9	1
	375	1		1		9	-	1	9	_	1	g
	450	1	0	0		10		0	10		0	1
METHADONE		1			Site A			Site	P		Site	
	Methadone conc. (ng/mL)	n p si		-	Site P	+		- Site	в +		- Site	+ +
	0	1		10		+ 0		-	0	_	-	- (
	100	1	-	10		0	-	10	0	_	10	(
	150	1	-	8		2	_	8	2	_	8	2
	250	1		1	_	9	_	1	9	_	2	8
	300	1		0		10	-	0	10		0	1
METHAMPHE	TAMINE (MET1,000)		-									
	ethamphetamine	np			Site A	1		Site	В		Site	ЭС
	conc. (ng/mL)	si	te	-		+		-	+		-	- +
	0	1	-	10		0	_	10	0	_	10	0
	500	1	-	10		0	_	10	0	-	10	0
	750	1		9		1	_	9	1	_	9	1
	1,250	1		1		9	_	2	8	_	1	9
MET	1,500	1	0	0		10		0	10		0	10
	TAMINE (MET 500)	-			Site A			Site	B	T	Site	. C
	ethamphetamine conc. (ng/mL)	n p si			Sile P	+	⊢	- Site	+	+	- 5116	<u>ن د</u> +
	0		0	- 10		+		-	+	_	- 10	1
	250	1	-	10		0	_	10	0	_	10	0
	375	1		9	-	1	_	9	1	-	9	1
	625	1		1		9	_	1	9	_	1	g
	750	1		0		10	-	0	10	_	0	1(
METHAMPHE	TAMINE (MET300)		-			-		-				
	ethamphetamine	np			Site A	1		Site	В		Site	ЭС
	conc. (ng/mL)	si	te	-		+		-	+		-	+
	0	1		10)	0	1	10	0	-	10	C
	150	1		10)	0	_	10	0	-	10	C
	225	1	-	9		1	_	9	1		9	1
	375	1		1		9	_	1	9	_	1	9
	450	1		0		10		0	10		0	10
	DIOXYMETHAMPHETA enedioxymethamphetam		np			Site A	isy	5	ite B		Sit	e C
Metryle	conc. (ng/mL)		si		-	- 4	F	-	+		-	1
	0		1		10	0		10	0		10	(
-	500		1		10	0		10	0		10	(
	750			0	9	1		9	1		8	
	1,250		1		1	ę		1	9		1	9
	1,500		1		0	1		0	10		0	1
	DIOXYMETHAMPHETA		(MDN	AA 50		stas	y					
Methyle	enedioxymethamphetam	ine	np		S	Site A			ite B			te C
	conc. (ng/mL)		si		-	4		-	+		-	-
	0		1		10	(10	0	_	10	(
	250		1		10	(10	0		10	(
	375			0	8	2		9	1		9	
	625 750		1		1	1		1	9		1	ې 1
METHYLENE		MINE						U	1 10	,	U	<u>1 1</u>
	enedioxymethamphetam		np			Site A	•	S	ite B		Sit	e C
	conc. (ng/mL)		si		-		F	-	+		-	
	0		1	0	10	()	10	0		10	(
	250		1	0	10	()	10	0		10	(
	375		1	0	8	2	2	9	1		7	;
	625			0	2	8		1	9		1	•
	750		1	0	0	1	0	0	10)	0	1
		-		-	0.	ia (-	~	to P	-1	0.1	~ ^
MORPHINE (N			n pe site		- 51	te A	+	- 5	te B	+	- Sit	e C
MORPHINE (N	Morphine					+	_		+			•
MORPHINE (N	conc. (ng/mL)				10							
	conc. (ng/mL) 0		10		10	0	+	10	0	-	10	-
	conc. (ng/mL) 0 150		10 10		10	0		10	0		10	(
	conc. (ng/mL) 0		10									(

MORPHINE (MOP 200)

MORPHINE (MOP 200)				-			
Morphine	n per		e A		еB	Site	
conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
100	10	10	0	10	0	10	0
150	10	7	3	9	1	9	1
250	10	1	9	2	8	1	9
300 MORPHINE (MOP 100)	10	0	10	0	10	0	10
Morphine	n per	Sit	еA	Sit	еB	Site	e C
conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
50	10	10	0	10	0	10	0
75	10	9	1	9	1	9	1
125	10	1	9	1	9	1	9
150	10	0	10	0	10	0	10
METHAQUALONE (MQL 300)	-				_		
Methaqualone	n per		e A		e B	Site	1
conc. (ng/mL)	site	-	+	-	+	-	+
0 150	10	10 10	0	10 10	0	10 10	0
	-		-		-	-	-
225 375	10 10	9	1 9	9 1	1 9	9 1	1
450	10	0	9 10	0	9 10	0	9 10
430 MORPHINE/OPIATE (OPI 2,000)	10	5	10	5	10	5	10
Morphine	n per	Sit	e A	Sit	e B	Site	еC
conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
1,000	10	10	0	10	0	10	0
1,500	10	9	1	9	1	9	1
2,500	10	1	9	1	9	1	9
3,000	10	0	10	0	10	0	10
PHENCYCLIDINE (PCP)	-						
Phencyclidine	n per	Sit	e A	Sit	e B	Site	эC
conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
12.5	10	10	0	10	0	10	0
18.75	10	8	2	9	1	9	1
31.25	10	1	9	1	9	1	9
37.5	10	0	10	0	10	0	10
PROPOXYPHENE (PPX)							
Propoxyphene	n per	Sit	e A	Sit	еB	Site	эС
conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
150	10	10	0	10	0	10	0
225	10	8	2	9	1	9	1
375	10	1	9	1	9	1	9
450 TRICYCLIC ANTIDEPRESSANTS (TCA	10	0	10	0	10	0	10
Nortriptyline	n per	Sit	e A	Sit	e B	Site	e C
conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
500	10	10	0	10	0	10	0
750	10	9	1	8	2	8	2
1,250	10	1	9	1	9	1	9
1,500	10	0	10	0	10	0	10
TRAMADOL (TML 100)	-	-		-	-	-	-
Tramadol conc. (ng/mL)	n per	Sit	e A	Sit	e B	Site	1
	site	- 10	+	- 10	+	- 10	+
0 50	10	10 10	0	10 10	0	10 10	0
75	10	9	1	9	1	8	2
125	10	3 1	9	9	9	2	8
150	10	0	10	0	10	0	10
FRAMADOL (TML 200)		. <u> </u>		<u> </u>		<u> </u>	
	n per	Sit	e A	Sit	e B	Site	еC
Tramadol conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
	10	10	0	10	0	10	0
100					4	0	2
150	10	9	1	9	1	8	_
		9 1 0	1 9 10	9 1 0	9 10	0 2 0	8 10

Tramadol conc. (ng/mL)	n per	Sit	e A	Sit	e B	Site	e C
	site		+	-	+	-	+
0	10	10	0	10	0	10	0
150	10	10	0	10	0	10	0
225	10	9	1	9	1	8	2
375	10	1	9	1	9	2	8
450	10	0	10	0	10	0	10
ETAMINE (KET1, 000)	1	Cit	e A	Cit	эB	Site	
Ketamine conc. (ng/mL)	n per site	- 510	е А +	SIL	эв +	-	e C +
0	10	10	+ 0	10	+ 0	10	+ 0
500	10	10	0	10	0	10	0
750	10	9	1	8	2	9	1
1,250	10	1	9	1	9	2	8
1,500	10	0	10	0	10	0	10
ETAMINE (KET500)						Ŧ	
	n per	Sit	eА	Sit	эB	Site	еC
Ketamine conc. (ng/mL)	site		+		+	-	+
0	10	10	0	10	0	10	0
250	10	10	0	10	0	10	0
375	10	9	1	9	1	8	2
625	10	1	9	1	9	2	8
750	10	0	10	0	10	0	10
ETAMINE (KET300)							
Ketamine conc. (ng/mL)	n per	Sit	e A	Sit		Site	
	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
150	10	10	0	10	0	10	0
225 375	10 10	9 1	1 9	9 1	1 9	9 1	1 9
-		0		0		0	
450 ETAMINE (KET100)	10	0	10	0	10	0	10
	n per	Sit	eΑ	Sit	∍ B	Site	e C
Ketamine conc. (ng/mL)	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
50	10	10	0	10	0	10	0
75	10	9	1	9	1	9	1
125	10	1	9	1	9	2	8
150	10	0	10	0	10	0	10
XYCODONE (OXY100)	1						
Oxycodone conc. (ng/mL)	n per	Sit	eΑ	Sit	эB	Site	еC
	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
50	10	10 9	0	10 9	0	10 9	0
75 125	10	9 1	9	9 1	9	9 1	9
125	10 10	0	9 10	0	9 10	0	10
DTININE (COT 200)	10	U	10	0	10	0	10
	n per	Sit	еA	Sit	a B	Site	e C
Cotinine conc. (ng/mL)	site	-	+	-	+	-	+
Cotinine conc. (ng/mL) 0		- 10	+ 0	- 10	+	- 10	+
	site	-		- 10 10		- 10 10	
0	site 10	- 10	0		0	-	0
0 100	site 10 10	- 10 10 9 1	0 0 1 9	10 9 1	0 0 1 9	10 9 2	0 0 1 8
0 100 150 250 300	site 10 10 10	- 10 10 9	0 0 1	10 9	0 0 1	10 9	0 0 1
0 100 150 250 300	site 10 10 10 10 10	- 10 10 9 1 0	0 0 1 9 10	10 9 1 0	0 0 1 9 10	10 9 2 0	0 0 1 8 10
0 100 150 250 300 TININE (COT 100)	site 10 10 10 10 10 10	- 10 10 9 1	0 0 1 9 10 e A	10 9 1	0 0 1 9 10	10 9 2	0 0 1 8 10 e C
0 100 150 250 300 DTININE (COT 100) Cotinine conc. (ng/mL)	site 10 10 10 10 10 10 n per site	- 10 10 9 1 0 Situ	0 0 1 9 10 e A +	10 9 1 0 Site	0 0 1 9 10 * B +	10 9 2 0 Site	0 0 1 8 10 e C +
0 100 150 250 300 DTININE (COT 100) Cotinine conc. (ng/mL) 0	site 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 9 1 0 Site - 10	0 0 1 9 10 e A + 0	10 9 1 0 Site	0 0 1 9 10 • B + 0	10 9 2 0 Site -	0 0 1 8 10 e C + 0
0 100 150 250 300 DTININE (COT 100) Cotinine conc. (ng/mL) 0 50	site 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 9 1 0 Situ - 10 10	0 0 1 9 10 e A + 0 0	10 9 1 0 Site - 10 10	0 0 1 9 10 0 0	10 9 2 0 Site - 10 10	0 0 1 8 10 e C + 0 0
0 100 150 250 300 DTININE (COT 100) Cotinine conc. (ng/mL) 0 50 75	site 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 9 1 0 Site - 10 10 9	0 0 1 9 10 e A + 0 0 1	10 9 1 0 Sitt 10 10 9	0 0 1 9 10 0 8 + 0 0 1	10 9 2 0 Site - 10 10 9	0 0 1 8 10 e C + 0 0 1
0 100 150 250 300 DTININE (COT 100) Cotinine conc. (ng/mL) 0 50 75 125	site 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 9 1 0 Site - 10 10 9 1	0 0 1 9 10 e A + 0 0 1 9	10 9 1 0 Site - 10 10 9 1	0 0 1 9 10 • B + 0 0 0 1 9	10 9 2 0 Site 10 10 9 1	0 0 1 8 10 e C + 0 0 1 9
0 100 150 250 300 DTININE (COT 100) Cotinine conc. (ng/mL) 0 50 75 125 150	site 10	- 10 9 1 0 Situ - 10 10 9 1 0	0 0 1 9 10 e A + 0 0 1 9 10	10 9 1 0 Situ - 10 10 9 1 0	0 0 1 9 10 * B + 0 0 1 9 10	10 9 2 0 Site - 10 10 9	0 0 1 8 10 e C + 0 0 1
0 100 150 250 300 DTININE (COT 100) Cotinine conc. (ng/mL) 0 50 75 125 125 150 ETHYLIDENE-1,5-DIMETHYL-3,3-DIPH	site 10	- 10 9 1 0	0 0 1 9 10 e A + 0 1 9 10 NE (ED	10 9 1 0 5itu - 10 10 9 1 0 0 DP 300	0 0 1 9 10 • B + 0 0 1 9 10	10 9 2 0	0 0 1 8 10 e C + 0 0 1 9 10
0 100 150 250 300 DTININE (COT 100) Cotinine conc. (ng/mL) 0 50 75 125 150	site 10 10 10 10 10 10 10 10 10 10	- 10 9 1 0 Situ - 10 10 9 1 0	0 0 1 9 10 e A + 0 1 9 10 NE (ED	10 9 1 0 5itu - 10 10 9 1 0 0 DP 300	0 0 1 9 10 * B + 0 0 1 9 10	10 9 2 0	0 0 1 8 10 e C + 0 0 1 9
0 100 150 250 300 DTININE (COT 100) Cotinine conc. (ng/mL) 0 50 75 125 150 ETHYLIDENE-1,5-DIMETHYL-3,3-DIPH EDDP conc. (ng/mL)	site 10	- 10 9 1 0 Situ - 10 10 9 1 0 ROLIDI Situ -	0 0 1 9 10 e A + 0 1 9 10 NE (ED e A + +	10 9 1 0 5 10 10 9 1 0 DP 300 Site	0 0 1 9 10 → B + 0 0 1 9 10 → 9 10 → 9 + + 0 0 1 0 + + 0 0 1 0 + + 0 0 + + 0 0 + + 0 0 + + 0 0 + + 0 0 + + 0 - - - - - - - - - - - - -	10 9 2 0 - 10 10 9 1 0 Site	0 0 1 8 10 e C + 0 0 1 9 10 e C + 10 e C + 0 0 1 - - - - - - - - - - - - -
0 100 150 250 300 DTININE (COT 100) Cotinine conc. (ng/mL) 0 50 75 125 150 ETHYLIDENE-1,5-DIMETHYL-3,3-DIPH EDDP conc. (ng/mL) 0	site 10 10 10 10 10 10 10 10 10 10	- 10 9 1 0 Situ - 10 10 9 1 0 ROLIDI Situ - 10	0 0 1 9 10 + 0 1 9 10 NE (ED e A + 0 NE (ED e A	10 9 1 0 - 10 10 9 1 0 DP 300 Site - 10	0 0 1 9 10 • B + 0 0 1 9 10 • 9 10 • • • • • • • • • • • • •	10 9 2 0 - 10 10 9 1 0 Sitte - 10	0 0 1 8 10 e C + 0 0 1 9 10 e C + 0 0 1 9 10 0 0 1 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0
0 100 150 250 300 DTININE (COT 100) Cotinine conc. (ng/mL) 0 50 75 125 150 ETHYLIDENE-1,5-DIMETHYL-3,3-DIPH EDDP conc. (ng/mL) 0 150	site 10 10 10 10 10 10 10 10 10 10	- 10 9 1 0 5 it - 10 10 9 1 0 8 0 8 0 10 5 10 10	0 0 1 9 10 + 0 1 9 10 NE (ED e A + 0 0 0 1 9 10 0 1 9 10 10 10 10 10 10 10 10 10 10	10 9 1 0 - 10 10 9 1 0 DP 300 Situ - 10 10	0 0 1 9 10 ⇒ B + 0 10 9 10 9 10 0 1 9 10 0 0 1 9 10 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0	10 9 2 0 5 10 10 9 1 0 5 10 0 5 10 10	0 0 1 8 10 e C + 0 0 1 9 10 e C + 0 0 0 0 0 0 0
0 100 150 250 300 DTININE (COT 100) Cotinine conc. (ng/mL) 0 50 75 125 150 ETHYLIDENE-1,5-DIMETHYL-3,3-DIPH EDDP conc. (ng/mL) 0 150 225	site 10	- 10 10 9 1 0 5 10 10 9 1 0 0 10 5 10 10 10 9 10 10 9 10 10 9 10 10 9 10 10 9 10 10 10 10 10 10 10 10 10 10	0 0 1 9 10 + 0 1 9 10 NE (ED • A + 0 10 • A • + 0 10 • 1 • 1 • • • • • • • • • • • • • • • • • • •	10 9 1 0 10 10 10 9 1 0 DP 300 Sitt - 10 10 9 9	0 0 1 9 10 → B + 0 10 9 10 → 9 10 → 9 10 → 1 → 10 → 1 → 10 → 10 → 10 → 10 → 10 → 10 →	10 9 2 0 10 10 10 9 1 0 0 Sitte - 10 10 9 9	0 0 1 8 10 e C + 0 0 10 e C + 0 0 10 e C + 0 0 10 10 10 10 10 10 10 10
0 100 150 250 300 DTININE (COT 100) Cotinine conc. (ng/mL) 0 50 75 125 125 ETHYLIDENE-1,5-DIMETHYL-3,3-DIPH EDDP conc. (ng/mL) 0 150 225 375	site 10	- 10 9 1 0 Situ - 10 10 9 1 0 ROLIDI Situ - 10 9 1 0 ROLIDI 9 1 0 ROLIDI 9 1 1 0 ROLIDI 1 1 0 ROLIDI 1 0 ROLIDI 10 9 1 0 ROLIDI 10 9 1 0 ROLIDI 10 9 1 0 ROLIDI 10 9 1 0 ROLIDI 10 9 1 0 ROLIDI 10 9 1 0 ROLIDI 10 9 10 10 0 ROLIDI 10 10 10 10 10 10 10 10 10 10	0 0 1 9 10 e A + 0 1 9 10 NE (ED e A + 0 0 1 9 10 10 9 10 10 9 10 10 9 10 10 10 10 10 10 10 10 10 10	10 9 1 0 10 10 9 1 0 DP 300 Sitt - 10 10 9 2	$ \begin{array}{c} 0 \\ 0 \\ 1 \\ 9 \\ 10 \\ \hline 9 \\ 10 \\ 0 \\ 1 \\ 9 \\ 10 \\ \hline 9 \\ 10 \\ \hline 9 \\ 10 \\ \hline 0 \\ 1 \\ 8 \\ \hline 8 \\ \end{array} $	10 9 2 0 5 10 10 9 1 0 5 10 10 9 1 10 9 1	0 0 1 8 10 + 0 0 1 9 10 • C + + 0 0 1 9 10 • C + 0 0 1 9 10 • C • C • C • C • C • C • C • C
0 100 150 250 300 DTININE (COT 100) Cotinine conc. (ng/mL) 0 50 75 125 150 ETHYLIDENE-1,5-DIMETHYL-3,3-DIPH EDDP conc. (ng/mL) 0 150 225	site 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 9 1 0 5 10 10 10 9 1 0 ROLIDI 5 10 10 9 1 0 10 9 1 0 10 10 9 1 0 10 10 10 10 10 10 10 10	0 0 1 9 10 • A + 0 0 10 • A • + 0 0 • A • + 0 0 • 0 • 1 • 0 • 0 • 1 • 0 • 0 • 1 • 0 • 0 • 0 • 0 • 0 • 0 • 0 • 0	10 9 1 0 5 10 10 9 1 0 DP 300 DP 300 5 10 10 10 9 2 0	0 0 1 9 10 0 1 0 1 0 1 0 1 0 1 0 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 0 1 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 1 0 0 0 1 0 0 0 1 0 0 0 1 0 0 0 1 0 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0	10 9 2 0 10 10 10 9 1 0 0 Sitte - 10 10 9 9	0 0 1 8 10 e C + 0 0 10 e C + 0 0 10 e C + 0 0 10 10 10 10 10 10 10 10

0	10	10	0	10	0	10	0
50	10	10	0	10	0	10	0
75	10	9	1	9	1	9	1
125	10	1	9	1	9	1	9
150	10	0	10	0	10	0	10
	10	U	10	U	10	0	10
FENTANYL (FYL20)							
FYL conc. (ng/mL)	n per	Site	eΑ	Site	эB	Site	эC
FTL CONC. (Ig/IIL)	site	-	+	-	+	-	+
0	10	10		10		10	
	10	10	0	10	0	10	0
10	10	10	0	10	0	10	0
15	10	9	1	9	1	9	1
25	10	1	9	1	9	1	9
30	10	0	10	0	10	0	10
	10	0	10	0	10	0	10
FENTANYL (FYL10)							
	n per	Site	eΑ	Site	эB	Site	эC
FYL conc. (ng/mL)	site						
		-	+	-	+	-	+
0	10	10	0	10	0	10	0
5	10	10	0	10	0	10	0
7.5	10	9	1	9	1	9	1
12.5	10	1	9	1	9	1	9
15	10	0	10	0	10	0	10
K2 50							
	n nor	Site	Α	Site	∍ B	Site	а С
K2 conc. (ng/mL)	n per	0110				Unit	
	site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
25	10	10	0	10	0	10	0
37.5	10	8	2	8	2	9	1
62.5	10	1	9	2	8	2	8
75	10	0	10	0	10	0	10
K2 30			-				
1/2 50	1				-		<u> </u>
K2 conc. (ng/mL)	n per	Site	эA	Site	эB	Site	эC
KZ CONC. (Ng/INL)	site	-	+	-	+	-	+
0							
0	10	10	0	10	0	10	0
15	10	10	0	10	0	10	0
22.5	10	0	2		1		1
	10	8	2	9		9	
37.5	10	1	9	1	9	1	9
45	10	0	10	0	10	0	10
	10	0	10	0	10	0	10
K2 25							
	n per	Site	θA	Site	эB	Site	еC
K2 25 K2 conc. (ng/mL)	n per site	Site				Site	
K2 conc. (ng/mL)	site	-	+	-	+	-	+
		Site - 10				Site - 10	
K2 conc. (ng/mL)	site 10	- 10	+ 0	- 10	+ 0	- 10	+ 0
K2 conc. (ng/mL) 0 12.5	site 10 10	- 10 10	+ 0 0	- 10 10	+ 0 0	- 10 10	+ 0 0
K2 conc. (ng/mL)	site 10	- 10	+ 0	- 10	+ 0	- 10	+ 0
K2 conc. (ng/mL) 0 12.5 18.75	site 10 10 10	- 10 10 7	+ 0 0 3	- 10 10 8	+ 0 0 2	- 10 10 8	+ 0 0 2
K2 conc. (ng/mL) 0 12.5 18.75 31.25	site 10 10 10 10	- 10 10 7 1	+ 0 0 3 9	- 10 10 8 1	+ 0 2 9	- 10 10 8 2	+ 0 2 8
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5	site 10 10 10	- 10 10 7	+ 0 0 3	- 10 10 8	+ 0 0 2	- 10 10 8	+ 0 0 2
K2 conc. (ng/mL) 0 12.5 18.75 31.25	site 10 10 10 10	- 10 10 7 1	+ 0 0 3 9	- 10 10 8 1	+ 0 2 9	- 10 10 8 2	+ 0 2 8
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM	site 10 10 10 10 10	- 10 10 7 1 0	+ 0 3 9 10	- 10 10 8 1 0	+ 0 2 9 10	- 10 10 8 2 0	+ 0 2 8 10
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5	site 10 10 10 10 10 10	- 10 10 7 1 0 Site	+ 0 3 9 10	- 10 10 8 1 0 Site	+ 0 2 9 10	- 10 10 8 2 0 Site	+ 0 2 8 10
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL)	site 10 10 10 10 10 10 10 10 10 10	- 10 10 7 1 0 Site	+ 0 3 9 10 • A +	- 10 10 8 1 0 Site	+ 0 2 9 10 • B +	- 10 10 8 2 0 Site	+ 0 2 8 10 • C +
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM	site 10 10 10 10 10 10	- 10 10 7 1 0 Site	+ 0 3 9 10	- 10 10 8 1 0 Site	+ 0 2 9 10	- 10 10 8 2 0 Site	+ 0 2 8 10
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0	site 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 10 7 1 0 Site - 10	+ 0 3 9 10 • A + 0	- 10 10 8 1 0 Site - 10	+ 0 2 9 10 • B + 0	- 10 10 8 2 0 Sitt - 10	+ 0 2 8 10 • C + 0
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5	site 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 10 7 1 0 Site - 10 10	+ 0 3 9 10 • • • • • • •	- 10 10 8 1 0 Site - 10 10	+ 0 2 9 10 • B + 0 0	- 10 10 8 2 0 Site - 10 10	+ 0 2 8 10 • C + 0 0
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5	site 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 10 7 1 0 Site - 10	+ 0 3 9 10 • A + 0	- 10 10 8 1 0 Site - 10	+ 0 2 9 10 • B + 0 0 1	- 10 10 8 2 0 Sitt - 10	+ 0 2 8 10 • C + 0 0 1
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5	site 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 10 7 1 0 Site - 10 10	+ 0 3 9 10 • • • • • • •	- 10 10 8 1 0 Site - 10 10	+ 0 2 9 10 • B + 0 0	- 10 10 8 2 0 Site - 10 10	+ 0 2 8 10 • C + 0 0
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5	site 10	- 10 10 7 1 0 Site - 10 10 9 9	+ 0 3 9 10 • A + 0 0 1 9	- 10 10 8 1 0 Sitt 10 10 9 1	+ 0 2 9 10 • B + 0 0 1 9	- 10 10 8 2 0 Site - 10 10 9 9	+ 0 2 8 10 • C + 0 0 0 1 9
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 12.5 15	site 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 7 1 0 Site - 10 10 9	+ 0 3 9 10 • A + 0 0 1	- 10 10 8 1 0 Sitt 10 - 10 9	+ 0 2 9 10 • B + 0 0 1	- 10 10 8 2 0 Sitte - 10 10 9	+ 0 2 8 10 • C + 0 0 1
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5	site 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 10 7 1 0 Site - 10 10 9 9 1 0	+ 0 3 9 10 • A + 0 0 1 9 10	- 10 10 8 1 0 Site - 10 10 9 1 0	+ 0 2 9 10 • B + 0 0 1 9 10	- 10 10 8 2 0	+ 0 2 8 10 • C + 0 0 1 9 10
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 12.5 15 MDA 500	site 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 10 7 1 0 Site - 10 10 9 9	+ 0 3 9 10 • • • • • • • • • • • • • • • • • •	- 10 10 8 1 0 Sitt 10 10 9 1	+ 0 2 9 10 • B + 0 0 1 9 10	- 10 10 8 2 0 Site - 10 10 9 9	+ 0 2 8 10 • C + 0 0 1 9 10
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 12.5 15	site 10 10 10 10 10 10 10 10 10 10	- 10 10 7 1 0 Site - 10 10 9 1 0 Site	+ 0 3 9 10 • A + 0 0 1 9 10 • A	- 10 10 8 1 0 Sitte - 10 10 9 1 0 Sitte	+ 0 2 9 10 * 0 0 1 9 10 *	- 10 10 8 2 0 Sitte - 10 10 9 1 0 Sitte	+ 0 2 8 10 • C + 0 0 1 9 10 • C
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 12.5 15 MDA 500 MDA conc. (ng/mL)	site 10	- 10 10 7 1 0 Site - 10 10 9 1 0 Site - - - - - - - - - - - - -	+ 0 3 9 10 • A + 0 0 1 9 10 • A + 10 • • A +	- 10 10 8 1 0 Sitte - 10 10 9 1 0 Sitte - - - - - - - - - - - - -	+ 0 2 9 10 • • • • • • • • • • • • • • • • • •	- 10 10 8 2 0 Sitte - 10 10 9 1 0 0 Sitte -	+ 0 2 8 10 • • • • • • • • • • • • • • • • • •
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 12.5 15 MDA 500	site 10 10 10 10 10 10 10 10 10 10	- 10 10 7 1 0 Site - 10 10 9 1 0 Site	+ 0 3 9 10 • A + 0 0 1 9 10 • A	- 10 10 8 1 0 Sitte - 10 10 9 1 0 Sitte	+ 0 2 9 10 * 0 0 1 9 10 *	- 10 10 8 2 0 Sitte - 10 10 9 1 0 Sitte	+ 0 2 8 10 • C + 0 0 1 9 10 • C
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 12.5 15 MDA 500 MDA conc. (ng/mL) 0	site 10	- 10 10 7 1 0 Site - 10 10 9 1 0 Site - 10 10 10 10 10 10 10 10 10 10	+ 0 3 9 10 • • • • • • • • • • • • • • • • • •	- 10 10 8 1 0 Sitt 0 10 10 9 1 0 0 Sitt - 10	+ 0 2 9 10 • • • • • • • • • • • • • • • • • •	- 10 10 8 2 0	+ 0 2 8 10 + 0 0 1 9 10 0 0 10 0 0 0 10 0 0 0
K2 conc. (ng/mL) 0 12.5 18.75 31.25 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 15 MDA 500 MDA conc. (ng/mL) 0 250	site 10 10 10 10 10 10 10 10 10 10	- 10 10 7 1 0 Sitte - 10 10 9 1 0 Sitte - 10 10 10 10 10 10 10 10 10 10	+ 0 3 9 10 • A + 0 0 1 9 10 • A + 0 0 10 • 0 • 0 • 0 • 0	- 10 10 8 1 0 Sitt - 10 10 9 1 0 Sitt - 10 10 10 10 10 10 10 10 10 10	+ 0 2 9 10 • • • • • • • • • • • • • • • • • •	- 10 10 8 2 0 - 10 10 9 1 0 Sitte - 10 10 10 - 10 10 10 10 10 10 10 10 10 10	+ 0 2 8 10 • • • • • • • • • • • • • • • • • •
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 12.5 15 MDA 500 MDA conc. (ng/mL) 0	site 10	- 10 10 7 1 0 Site - 10 10 9 1 0 Site - 10 10 10 10 10 10 10 10 10 10	+ 0 3 9 10 • • • • • • • • • • • • • • • • • •	- 10 10 8 1 0 Sitt 0 10 10 9 1 0 0 Sitt - 10	+ 0 2 9 10 • • • • • • • • • • • • • • • • • •	- 10 10 8 2 0	+ 0 2 8 10 + 0 0 1 9 10 0 0 10 0 0 0 10 0 0 0
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 15 MDA 500 MDA conc. (ng/mL) 0 250 375	site 10 10 10 10 10 10 10 10 10 10	- 10 10 7 1 0 Sitte - 10 10 9 1 0 Sitte - 10 10 10 10 10 10 10 10 10 10	+ 0 3 9 10 • A + 0 0 1 9 10 • A + 0 0 10 • 0 • 0 • 0 • 0	- 10 10 8 1 0 Sitt - 10 10 9 1 0 Sitt - 10 10 10 10 10 10 10 10 10 10	+ 0 2 9 10 • • • • • • • • • • • • • • • • • •	- 10 10 8 2 0 - 10 10 9 1 0 Sitte - 10 10 10 - 10 10 10 10 10 10 10 10 10 10	+ 0 2 8 10 • • • • • • • • • • • • • • • • • •
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 15 MDA 500 MDA conc. (ng/mL) 0 250 375 625	site 10	- 10 10 7 1 0 Site - 10 10 10 0 Site - 10 10 9 1 0 9 1 10 10 10 10 10 10 10 10 10	+ 0 3 9 10 0 4 + 0 0 1 9 10 9 10 0 0 1 9 10 0 0 10 9 10	- 10 10 8 1 0 - 10 10 9 1 0 Sitte - 10 10 9 1 0 9 1 0 10 9 1 0 10 10 9 1 10 10 10 10 10 10 10 10 10	+ 0 2 9 10 - - - - - - - - - - - - - - - - - -	- 10 10 8 2 0 - 10 10 9 1 0 Sitte - 10 10 9 1 0 9 1 0 10 10 9 1 0 10 10 10 10 10 10 10 10	+ 0 2 8 10 - - - - - - - - - - - - - - - - - -
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 15 MDA 500 MDA conc. (ng/mL) 0 250 375 625 750	site 10	- 10 10 7 1 0 Site - 10 10 9 1 0 Site - 10 10 9 1 0 9 1 0 9 1 0 9 1 0 9 1 0 0 1 0 1 0 1 0 1 0 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1	+ 0 3 9 10 • A + 0 10 • A + 0 10 • A + 0 0 10 • 0 • 10 • •	- 10 10 8 1 0 Sitt - 10 10 9 1 0 Sitt - 10 10 9 1 0 9 1 0 9 1 0 9 1 0 9 1 0 9 1 0 9 1 0 9 1 0 1 0 1 1 0 1 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1	+ 0 2 9 10 • • • • • • • • • • • • • • • • • •	- 10 10 8 2 0 - 10 10 9 1 0 Sitte - 10 10 10 - 10 10 10 10 10 10 10 10 10 10	+ 0 2 8 10 2 8 10 0 0 1 9 10 0 10 0 0 10 0 0 1
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 15 MDA 500 MDA conc. (ng/mL) 0 250 375 625	site 10	- 10 10 7 1 0 Site - 10 10 10 0 Site - 10 10 9 1 0 9 1 10 10 10 10 10 10 10 10 10	+ 0 3 9 10 0 4 + 0 0 1 9 10 9 10 0 0 1 9 10 0 0 10 9 10	- 10 10 8 1 0 - 10 10 9 1 0 Sitte - 10 10 9 1 0 9 1 0 10 9 1 0 10 10 9 1 10 10 10 10 10 10 10 10 10	+ 0 2 9 10 - - - - - - - - - - - - - - - - - -	- 10 10 8 2 0 - 10 10 9 1 0 Sitte - 10 10 9 1 0 9 1 0 10 10 9 1 0 10 10 10 10 10 10 10 10	+ 0 2 8 10 - - - - - - - - - - - - - - - - - -
K2 conc. (ng/mL) 0 12.5 18.75 31.25 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 15 MDA 500 MDA conc. (ng/mL) 0 250 375 625 750 ETG500	site 10	- 10 10 7 1 0 Sitti - 10 10 9 1 0 Sitti - 10 10 9 1 0 0 - - 10 0 0 0 0 0 0 0 0 0 0 0 0 0	+ 0 3 9 10 9 4 + 0 0 1 1 9 10 9 4 + 0 0 1 1 9 10 9 10	- 10 10 8 1 0 Sitt - 10 10 9 1 0 Sitt - 10 10 9 1 0 0 0 0 0 0 0 0 0 0 0 0 0	+ 0 2 9 10 • B + 0 0 1 1 9 10 • 9 10 • 9 10 • • 9 10	- 10 10 8 2 0 Sitte - 10 10 9 1 0 Sitte - 10 10 9 1 0 0 - - 10 0 0 0 0 0 0 0 0 0 0 0 0 0	+ 0 2 8 10 9 C + 0 0 1 1 9 10 9 0 0 1 1 9 10 0 0 1 1 9 10
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K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 15 MDA 500 MDA conc. (ng/mL) 0 250 375 625 750 ETC500 Ethyl Glucuronide Concentration (ng/mL) 0	site 10		+ 0 3 9 10 9 4 + 0 0 4 + 0 0 1 9 10 9 10 9 10 0 9 10 0 9 10 0 9 10 0 9 10 0 9 9 10 0 9 9 10 0 9 9 10 0 9 9 10 9 9 9 10 9 9 9 9		+ 0 2 9 10 2 9 10 + 0 0 1 9 10 0 1 9 10 0 0 1 9 10 0 0 1 9 9 10 0 0 0		+ 0 2 8 10 2 8 10 9 0 0 1 9 10 0 0 0 1 9 10 0 0 0 1 9 10 0 0 0
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 15 MDA 500 MDA conc. (ng/mL) 0 250 375 625 750 ETG500 Ethyl Glucuronide Concentration (ng/mL)	site 10		+ 0 3 9 10 2 2 4 + 0 0 1 1 9 10 2 0 1 9 10 0 1 9 10 0 1 9 9 10 0 0 1 9 10 0 2 4 + + 0 0 0 10 10 10 10 10 10 10 10 10 10 10	- 10 10 8 1 0 - 10 10 9 1 0 Sitte - - 0 10 9 1 0 Sitte - - - - - - - - - - - - -	+ 0 2 9 9 10 0 1 1 9 0 0 1 1 9 10 0 0 1 1 9 10 0 0 1 1 9 0 0 10 0 0 10 0 0 10 0 0 0	- 10 10 8 2 0 - 10 10 9 1 0 Sitte - - - - - - - - - - - - -	+ 0 2 8 10 - - - - - - - - - - - - - - - - - -
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 0 5 7.5 12.5 12.5 12.5 15 MDA 500 MDA conc. (ng/mL) 0 250 375 625 750 Ethyl Glucuronide Concentration (ng/mL) 0 250	site 10	- 10 10 7 1 0 Sitti - - 0 10 0 9 1 0 Sitti - - - - - - - - - - - - -	+ 0 0 3 9 10 0 0 + 0 0 10 0 0 10 0 0 10 0 0 10 0 0 0 10 0 0 0 0 10 0 0 0 0 0 0 0 0 0 0 0 0 0		+ 0 2 9 10 9 + 0 0 1 9 9 10 0 1 9 9 10 0 0 1 9 9 10 0 0 1 9 9 10 0 0 10 0 9 9 10 0 9 9 9 9		+ 0 2 8 10 9 C + 0 0 10 9 9 0 10 10 9 0 10 10 9 0 0 10 0 0 10 0 0 0
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K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 0 5 7.5 12.5 12.5 12.5 15 MDA 500 MDA conc. (ng/mL) 0 250 375 625 750 Ethyl Glucuronide Concentration (ng/mL) 0 250	site 10	- 10 10 7 1 0 Sitti - - 0 10 0 9 1 0 Sitti - - - - - - - - - - - - -	+ 0 0 3 9 10 0 0 + 0 0 10 0 0 10 0 0 10 0 0 10 0 0 0 10 0 0 0 0 10 0 0 0 0 0 0 0 0 0 0 0 0 0		+ 0 2 9 10 9 + 0 0 1 9 9 10 0 1 9 9 10 0 0 1 9 9 10 0 0 1 9 9 10 0 0 10 0 9 9 10 0 9 9 9 9		+ 0 2 8 10 9 C + 0 0 10 9 9 0 10 10 9 0 10 10 9 0 0 10 0 0 10 0 0 0
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K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 0 5 7.5 12.5 13 12.5 15 MDA 500 MDA conc. (ng/mL) 0 250 375 625 750 Ethyl Glucuronide Concentration (ng/mL) 0 250 375 625 750	site 10		+ 0 0 3 9 9 10 9 A + 0 0 0 1 9 9 10 0 0 1 9 10 0 0 10 0 0 0		+ 0 2 9 10 9 8 8 + 0 0 0 1 9 10 10 9 10 10 10 9 10 10 10 2		+ 0 2 8 10 9 C + 0 0 0 1 9 10 0 0 0 1 9 10 0 0 0 1 1 9 10 0 0 1 1
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 15 MDA 500 MDA conc. (ng/mL) 0 250 375 625 750 Ethyl Glucuronide Concentration (ng/mL) 0 250 375 625 750 Ethyl Glucuronide Concentration (ng/mL) 0 250 375 625 750 Ettel 1,000	site 10	- 10 10 7 1 0 Sitt - 10 10 9 1 0 Sitt - - 10 10 9 1 0 Sitt - - - - - - - - - - - - -	+ 0 0 3 9 10 0 2 4 4 + 0 0 10 10 9 10 0 0 1 1 9 0 0 10 0 0 2 9 9 10		+ 0 2 9 10 • • • • • • • • • • • • • • • • • •	- 10 10 8 2 0 5 5 10 10 9 1 0 5 10 10 9 1 0 5 10 10 9 1 0 5 10 10 9 1 0 10 9 1 0 10 9 10 10 10 10 10 10 10 10 10 10	+ 0 2 8 10 • C + 0 0 10 • C + 0 0 0 1 1 9 0 0 1 1 9 0 0 1 0 0 0 1 8 0 0 0 1 9 10
K2 conc. (ng/mL) 0 12.5 18.75 31.25 37.5 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 15 MDA 500 MDA conc. (ng/mL) 0 250 375 625 750 Ethyl Glucuronide Concentration (ng/mL) 0 250 375 625 750 Ethyl Glucuronide Concentration (ng/mL) 0 250 375 625 750 Ettel 1,000	site 10	- 10 10 7 1 0 Sitt - 10 10 9 1 0 Sitt - - 10 10 9 1 0 Sitt - - - - - - - - - - - - -	+ 0 0 3 9 9 10 9 A + 0 0 1 1 9 10 9 4 + 0 0 1 1 9 10 9 10 9 10 9 10 9 9 10 9 9 10 9 9 10 9 9 10 9 9 9 10 9 9 9 10 9 9 9 9		+ 0 2 9 10 9 8 8 + 0 0 1 9 10 9 10 9 10 9 10 9 10 9 10 9	- 10 10 8 2 0 5 5 10 10 9 1 0 5 10 10 9 1 0 5 10 10 9 1 0 5 10 10 9 1 0 10 9 1 0 10 9 10 10 10 10 10 10 10 10 10 10	+ 0 2 8 10 9 C + 0 0 0 1 9 10 9 10 9 10 9 10 10 10 10 10 10 10 10 10 10 10 10 10
K2 conc. (ng/mL) 0 12.5 18.75 31.25 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 15 MDA conc. (ng/mL) 0 250 375 625 750 ETG500 Ethyl Glucuronide Concentration (ng/mL) 0 250 375 625 750 ETG500 Ethyl Glucuronide Concentration (ng/mL) 0 Ethyl Glucuronide 750 ETG500 Ethyl Glucuronide 750 ETG50 Ethyl Glucuronide 750 ETG50 Ethyl Glucuronide 750 Ethyl Glucuronide 750 Ethyl Glucuronide 750 Ethyl Glucuronide 750 625 750 Ethyl Glucuronide 750 625 750 Ethyl Glucuronide 750 625 750 750 Ethyl Glucuronide 750 625 750 625 750 625 750 625 750 625 750 625 750 625 750 750 625 750 750 750 750 750 750 750 75	site 10 10 10 10 10 10 10 10 10 10	- 10 10 7 1 0 Sitter - 10 0 9 1 0 Sitter - 0 0 9 1 0 0 Sitter - 0 0 9 1 0 0 - - - - - - - - - - - - -	+ 0 0 3 9 10 9 A + 0 10 10 9 10 0 11 9 0 10 0 0 1 1 9 10 0 0 2 9 9 10	- 10 10 8 1 0 5 10 10 9 1 0 5 10 10 9 1 0 5 10 10 9 1 0 5 10 10 9 1 0 5 10 10 10 10 10 10 10 10 10 10	+ 0 2 9 10 9 + 0 1 1 9 10 10 1 9 10 10 10 10 10 10 10 2 8 8 10 2 8 8	- 10 10 8 2 0 5 10 10 9 1 0 5 10 0 9 1 0 5 10 0 9 1 0 5 10 10 9 1 0 5 10 10 10 10 10 10 10 10 10 10	+ 0 2 8 10 9 C + 0 0 1 9 9 10 9 9 0 1 1 9 9 10 0 0 1 1 9 9 10 0 0 1 1 9 10 0 0 1 1 9 10 0 0 10 10 10 10 10 10 10 10 10 10 10
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K2 conc. (ng/mL) 0 12.5 18.75 31.25 6-MAM 6-MAM conc. (ng/mL) 0 5 7.5 12.5 15 MDA conc. (ng/mL) 0 250 375 625 750 ETG500 Ethyl Glucuronide Concentration (ng/mL) 0 250 375 625 750 ETG500 Ethyl Glucuronide Concentration (ng/mL) 0 Ethyl Glucuronide 750 ETG500 Ethyl Glucuronide Concentration (ng/mL) 0 Ethyl Glucuronide 750 ETG500 Ethyl Glucuronide 750 Ethyl Glucuronide 750 ETG500 Ethyl Glucuronide 750 Ethyl Glucuronide 750 625 750 Ethyl Glucuronide 750 Ethyl Glucuronide 750 625 750 Ethyl Glucuronide 750 Ethyl Glucuronide	site 10 10 10 10 10 10 10 10 10 10	- 10 10 7 1 0 Sitter - 10 0 9 1 0 Sitter - 0 0 9 1 0 0 Sitter - 0 0 9 1 0 0 - - - - - - - - - - - - -	+ 0 0 3 9 10 9 A + 0 10 10 9 10 0 11 9 0 10 0 0 1 1 9 10 0 0 2 9 9 10	- 10 10 8 1 0 5 10 10 9 1 0 5 10 10 9 1 0 5 10 10 9 1 0 5 10 10 9 1 0 5 10 10 10 10 10 10 10 10 10 10	+ 0 2 9 10 9 + 0 1 1 9 10 10 1 9 10 10 10 10 10 10 10 2 8 8 10 2 8 8	- 10 10 8 2 0 5 10 10 9 1 0 5 10 0 9 1 0 5 10 0 9 1 0 5 10 10 9 1 0 5 10 10 10 10 10 10 10 10 10 10	+ 0 2 8 10 2 2 8 7 10 9 10 10 9 9 10 10 9 10 10 9 10 10 10 10 10 10 10 10 10 10 10 10 10
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	-								
750	10		8	2	8		2	9	1
1250	10		1	9 10	2		8 10	2	8
CLO 400	10		0	10		, _	10	Ŭ	
Clonazepam	n pe		Si	te A		Sit	e B	S	Site C
Concentration (ng/mL)	Sit		-	+	-		+	-	+
0	10		10	0	1		0	10	0
200 300	10		10 9	0	1		0	10	1
500	10	_	9	9	2	_	8	9	g
600	10		0	10	-		10		1
LO 150								-	
Clonazepam	n pe		Site	e A		Site		Si	te C
Concentration (ng/mL)	Site	•	-	+	-		+	-	+
0 75	10 10		10 10	0	10		0	10	0
112	10		9	1	8	,	2	9	1
187	10		1	9	2		8	1	9
225	10		0	10	0		10	0	10
SD 20					1				
Clonazepam	n pe		Site	1	-	Site		Si	te C
Concentration (ng/mL) 0	Site 10	,	- 10	+	- 10	,	+	- 10	+
10	10	_	10	0	10	_	0	10	0
15	10		9	1	9		1	9	1
25	10		1	9	1		9	1	9
30	10		0	10	0		10	0	10
SD 50	1				-		_		
Clonazepam Concentration (ng/mL)	n pe Site		Site	e A +	-	Site	•В +	- 5	te C
0	10	,	- 10	+ 0	10)	+ 0	10	+
25	10		10	0	10		0	10	0
37.5	10		9	1	9		1	9	1
62.5	10		1	9	1		9	1	9
75	10		0	10	0		10	0	10
IPD Mathulahanialata (Ditalia)		_	Site	e A	1	Site	B	Si	te C
Methylphenidate (Ritalin) Concentration (ng/mL)	n pe Site		-	+	-	One	+	-	+
0	10		10	0	10)	0	10	0
150	10		10	0	10)	0	10	0
225	10		9	1	8		2	9	1
375	10		1	9	2		8	1	9
450 OL	10		0	10	0		10	0	10
Zolpidem	n pe	r	Site	e A		Site	B	Si	te C
Concentration (ng/mL)	Site		-	+	-		+	-	+
0	10		10	0	10)	0	10	0
25	10		9	1	10)	0	10	0
75	10		0	10	1		9	0	10
IEPHEDRONE (MEP 100)			Q#	e A		Site	B	¢;	te C
Mephedrone HCI Concentration. (ng/mL)	n pe site		-	е А +	-	Jit	; D +	-	+
0	10		10	0	10)	0	10	0
50	10		10	0	10)	0	10	0
75	10		9	1	8		2	9	1
125	10		2	8	2		8	2	8
150 , 4-METHYLENEDIOXYPYROVALERO	10	21/2	0	10	0		10	0	10
3,		-v)	Site A		Site	e B		Sit	еC
	per			+	-		+	-	+
4-methylenedioxypyrovalerone		1		0	10		0	10	0
	site				10	_	0	10	0
4-methylenedioxypyrovalerone Concentration (ng/mL)			0	0		_		8	2
4-methylenedioxypyrovalerone Concentration (ng/mL) 0	site 10			1	9		1	0	
4-methylenedioxypyrovalerone Concentration (ng/mL) 0 500	site 10 10	1			9 1	_	1 9	1	9
4-methylenedioxypyrovalerone Concentration (ng/mL) 0 500 750 1250 1500	site 10 10 10	1 9) !	1					9 10
4-methylenedioxypyrovalerone Concentration (ng/mL) 0 500 750 1250 1500	site 10 10 10 10 10 10	1 9 1) !) 1	1 9	1 0	1	9 10	1 0	10
4-methylenedioxypyrovalerone Concentration (ng/mL) 0 500 750 1250 1500	site 10 10 10 10	1 9 1 () !	1 9 10	1 0 Si		9 10 3	1 0 Si	10 te C
4-methylenedioxypyrovalerone Concentration (ng/mL) 0 500 750 1250 1500 IAZEPAM (DIA 300)	site 10 10 10 10 10 10 10	1 9 1 (9 1 9 1 Site A	1 9	1 0	1	9 10	1 0	10
4-methylenedioxypyrovalerone Concentration (ng/mL) 0 500 750 1250 1500 HAZEPAM (DIA 300) Diazepam Concentration (ng/mL)	site 10 10 10 10 10 10 10 N per Site	1 9 1 0) 1 Site A 0	1 9 10 +	1 0 Si	1	9 10 3 +	1 0 Si	10 te C +

375	10	1	9	1	9	1	9
450 DIAZEPAM (DIA 200)	10	0	10	0	10	0	10
	n per	Site	Α	Site	эB	Site	e C
Diazepam Concentration (ng/mL)	Site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
100	10	10	0	10	0	10	0
150	10	9	1	9	1	9	1
250 300	10 10	1	9 10	1	9 10	1	9 10
OPICLONE (ZOP 50)	10	0	10	0	10	0	10
Zopiclone	n per	Site	θA	Site	θB	Site	e C
Concentration (ng/mL)	Site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
25	10	10	0	10	0	10	0
37.5	10	9	1	8	2	9	1
62.5 75	10 10	2	8 10	2	8 10	2	8 10
METHCATHINONE (MCAT 500)	10	0	10	0	10	0	10
Methcathinone	n per	Site	θA	Site	эB	Site	еC
Concentration (ng/mL)	Site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
250	10	10	0	10	0	10	0
375	10	9	1	8	2	9	1
625	10	2	8	2	8	2	8
750 7-ACL(300)	10	0	10	0	10	0	10
7- Aminoclonazepam Concentratio	n n per	Sit	еA	Site	эB	Site	e C
(ng/mL)	Site	-	+	-	+	-	+
0	10	10	0	10	0	10	0
150	10	10	0	10	0	10	0
225	10	8	2	9	1	9	1
375	10	2	8	2	8	3	7
450	10	0	10	0	10	0	10
7-ACL(200)							
7- Aminoclonazepam Concentratio	n n per Site	Sit	e A	Site		Site	
(ng/mL)		-	+	-	+	-	+
0 100	10 10	10 10	0	10 10	0	10 10	0
150	10	8	2	9	1	8	2
250	10	2	8	2	8	2	8
300	10	0	10	0	10	0	10
-ACL(100)	_				-		
		Sit	еA	0.11	∘B	Cite	
7- Aminoclonazepam Concentratio	n n per	0.		Site		SILE	θC
7- Aminoclonazepam Concentratio (ng/mL)	n per Site	-	+	- Site	+	-	e C +
						-	
(ng/mL) 0 50	Site 10 10	-	+ 0 0	-	+ 0 0	-	+ 0 0
(ng/mL) 0 50 75	Site 10 10 10	- 10 10 7	+ 0 0 3	- 10 10 7	+ 0 0 3	- 10 10 9	+ 0 0 1
(ng/mL) 0 50 75 125	Site 10 10 10 10 10	- 10 10 7 2	+ 0 0 3 8	- 10 10 7 1	+ 0 3 9	- 10 10 9 2	+ 0 0 1 8
(ng/mL) 0 50 75 125 150	Site 10 10 10	- 10 10 7	+ 0 0 3	- 10 10 7	+ 0 0 3	- 10 10 9	+ 0 0 1
(ng/mL) 0 50 75 125 150 CARFENTANYL(CFYL500) Carfentanyl	Site 10 10 10 10 10	- 10 10 7 2 0	+ 0 0 3 8	- 10 10 7 1 0	+ 0 3 9	- 10 10 9 2 0	+ 0 0 1 8
(ng/mL) 0 50 75 125 150 CarFENTANYL(CFYL500) Carfentanyl Concentration (ng/mL)	Site 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 10 7 2 0 Sit	+ 0 3 8 10 e A +	- 10 10 7 1 0 Sit	+ 0 3 9 10	- 10 10 9 2 0 5 it	+ 0 1 8 10 te C +
(ng/mL) 0 50 75 125 150 CARFENTANYL(CFYL500) Carfentanyl Concentration (ng/mL) 0	Site 10 10 10 10 10 10 10 10 10 10	- 10 10 7 2 0 Sitt - 10 10	+ 0 3 8 10 e A	- 10 10 7 1 0 Sitt - 10 40	+ 0 3 9 10	- 10 9 2 0 Sit - 10 40	+ 0 1 8 10 te C
(ng/mL) 0 50 75 125 150 CARFENTANYL(CFYL500) Carfentanyl Concentration (ng/mL) 0 250 375	Site 10	- 10 10 7 2 0 Sit - 10 10 7	+ 0 3 8 10 e A + 0 0 3	- 10 10 7 1 0 Sitt - 10 10 9	+ 0 3 9 10 e B + 0 0 1	- 10 9 2 0 5i - 10 10 8	+ 0 1 8 10 te C + 0 0 2
(ng/mL) 0 50 75 125 150 CARFENTANYL(CFYL500) Carfentanyl Concentration (ng/mL) 0 250 375 625	Site 10	- 10 10 7 2 0 Sit 10 10 7 2	+ 0 3 8 10 e A + 0 0 3 8	- 10 10 7 1 0 Silt - 10 10 9 9	+ 0 3 9 10 e B + 0 0 0 1 9	- 10 9 2 0 Sii - 10 10 8 2	+ 0 1 8 10 te C + 0 0 0 2 8
(ng/mL) 0 50 75 125 125 Carfentanyl Concentration (ng/mL) 0 250 375 625 750	Site 10	- 10 10 7 2 0 Sit - 10 10 7	+ 0 3 8 10 e A + 0 0 3	- 10 10 7 1 0 Sitt - 10 10 9	+ 0 3 9 10 e B + 0 0 1	- 10 9 2 0 5i - 10 10 8	+ 0 1 8 10 te C + 0 0 2
(ng/mL) 0 50 75 125 150 CARFENTANYL(CFYL500) Carfentanyl Concentration (ng/mL) 0 250 375 625 750 CAFFEINE (CAF 1000) Caffeine	Site 10	- 10 10 7 2 0 Sitt - 10 10 7 2 0	+ 0 3 8 10 e A + 0 0 3 8	- 10 10 7 1 0 Siti - 10 10 10 9 1 0	+ 0 3 9 10 e B + 0 0 0 1 9	- 10 10 9 2 0 Sit - 10 10 10 8 8 2 0	+ 0 1 8 10 te C + 0 0 0 2 8
(ng/mL) 0 50 75 125 150 CAFFENTANYL(CFYL500) Carfentanyl Concentration (ng/mL) 0 250 375 625 750 CAFFEINE (CAF 1000) Caffeine Concentration (ng/mL)	Site 10	- 10 10 7 2 0 Sit - 10 10 7 2 0 Sit - - - - - - - - - - - - -	+ 0 3 8 10 e A + 0 0 3 8 10 e A +	- 10 10 7 1 0 Sitt - - - - - - - - - - - - -	+ 0 3 9 10 e B + 0 0 0 10 9 10 e B +	- 10 10 9 2 0 Sit - - - - - - - - - - - - -	+ 0 1 8 10 te C + 0 0 0 2 2 8 8 10 e C +
(ng/mL) 0 50 75 125 150 Carfentanyl Concentration (ng/mL) 0 250 375 625 750 Caffeine Caffeine Concentration (ng/mL) 0 0 0 0 0 0 0 0 0 0 0 0 0	Site 10	- 10 10 7 2 0 Sitt - 10 7 2 0 Sitt - 10 10 7 2 0 Sitt - 10 10 10 - - - - - - - - - - - - -	+ 0 3 8 10 e A + 0 0 3 8 10 0 3 8 10 0 9 4 0 0 10 9 6 4 10	- 10 10 7 1 0 Sitt - 10 9 1 0 Sitt - 10 10 10 10 10 10 10 10 10 10	+ 0 3 9 10 e B + 0 0 0 1 1 9 9 10 e B + 0 0	- 10 9 2 0 Sit - - - - - - - - - - - - -	+ 0 1 8 10 te C + 0 0 2 8 8 10 2 8 8 10 0 0 0 2 8 8 10
(ng/mL) 0 50 75 125 150 CarFENTANYL(CFYL500) Carfentanyl Concentration (ng/mL) 0 250 375 625 750 Caffeine Caffeine Concentration (ng/mL) 0 0 0 0 0 0 0 0 0 0 0 0 0	Site 10	- 10 10 7 2 0 Sitt - 10 10 7 2 0 Sitt - 10 10 10 10 10 10 10 10 10 10	+ 0 3 8 10 e A + 0 3 8 10 3 8 10 e A + 0 0	- 10 10 7 1 0 Silt 10 10 9 1 0 Sitt - 10 10 0 Sitt 10 10 10 10 10 10 10 10 10 10	+ 0 3 9 10 e B + 0 0 10 9 10 e B + 0 0 0 0 0	- 10 9 2 0 - 10 10 10 8 2 0 -	+ 0 1 8 10 te C + 0 0 0 2 2 8 8 10 e C +
(ng/mL) 0 50 75 125 150 CarFENTANYL(CFYL500) Carfentanyl Concentration (ng/mL) 0 250 375 625 750 Caffeine Concentration (ng/mL) 0 Caffeine Concentration (ng/mL) 0 0 750 Caffeine Concentration (ng/mL) 0 750 1250	Site 10	- 10 10 7 2 0 Sitt - 10 10 7 2 0 Sitt - 10 10 10 7 2 0 Sitt - 2 0 - - - - - - - - - - - - -	+ 0 3 8 10 e A + 0 0 3 8 10 e A + 0 0 0 0 1 8	- 10 10 7 1 0 5 10 10 10 9 9 1 0 5 11 0 10 10 10 10 10 10 10 10	+ 0 3 9 10 e B + 0 0 1 1 9 10 e B + 0 0 0 10 8	- 10 10 9 2 0 5it - 10 10 10 8 8 2 0 Sit - 10 10 10 10 10 10 10 10 10 10	+ 0 1 8 10 te C - 2 8 8 10 0 0 2 8 8 10 0 0 2 8 8 10 0 0 0 1 1 8 8 10
(ng/mL) 0 50 75 125 150 CARFENTANYL(CFYL500) Carfentanyl Concentration (ng/mL) 0 250 375 625 750 CAFFEINE (CAF 1000) Caffeine Concentration (ng/mL) 0 500 750 1250 1250 1250	Site 10	- 10 10 7 2 0 Sitt - 10 10 7 2 0 Sitt - 10 10 7 2 0 Sitt - 10 10 9	+ 0 3 8 10 e A + 0 0 3 3 8 10 e A + 10 e A 10 0 1	- 10 10 7 1 0 5it - 10 10 9 9 1 0 Sit - 10 10 9 5 10 10 10 9 5 10 10 10 10 10 10 10 10 10 10	+ 0 3 9 10 • e B + 0 0 0 10 • e B + 0 0 2	- 10 9 2 0 - 10 10 10 8 2 0 - - 10 10 8 2 0 - - - 10 10 10 9 9 - - - - - - - - - - - - -	+ 0 1 8 10 te C 4 0 0 2 8 8 0 0 0 0 1 0
(ng/mL) 0 50 75 125 150 CARFENTANYL(CFYL500) Carfentanyl Concentration (ng/mL) 0 250 375 625 750 CAFFEINE (CAF 1000) Caffeine Concentration (ng/mL) 0 500 750 1250 1500 CATHINE (CAT 150)	Site 10	- 10 10 7 2 0 Sitt - 10 10 7 2 0 Sitt - 10 9 2 0 0 - - - - - - - - - - - - -	+ 0 3 8 10 e A + 0 3 8 0 10 e A + 0 10 e A 10 8 10	- 10 10 7 1 0 5 10 10 9 1 0 5 10 10 10 10 8 2 0 0	+ 0 3 9 10 e B + 0 0 1 9 0 0 1 9 0 0 0 2 8 8 10	- 10 10 9 2 0 - 10 10 8 2 0 0 Sit - 10 9 2 0 - - - - - - - - - - - - -	+ 0 1 8 10 te C 2 8 10 2 8 10 e C + 0 0 0 2 8 10 e C 1 8 10 0 0 1 1 8 10
(ng/mL) 0 50 75 125 150 CARFENTANYL(CFYL500) Carfentanyl Concentration (ng/mL) 0 250 375 625 750 CAFFEINE (CAF 1000) Caffeine Concentration (ng/mL) 0 500 750 1250 1250 1250	Site 10	- 10 10 7 2 0 Sitt - 10 10 7 2 0 Sitt - 10 9 2 0 0 - - - - - - - - - - - - -	+ 0 3 8 10 e A + 0 0 3 8 10 e A + 0 0 1 1 8 10 e A + 0 0 0 0 0 8 10 0 0 8 10 0 0 0 8 10 0 0 8 10 0 0 9 10 10 10 10 10 10 10 10 10 10 10 10 10	- 10 10 7 1 0 5 10 10 9 1 0 5 10 10 10 10 8 2 0 0	+ 0 3 9 10 e B + 0 0 0 10 e B + 0 0 2 8 0 10 e B e B	- 10 10 9 2 0 - 10 10 8 2 0 0 Sit - 10 9 2 0 - - - - - - - - - - - - -	+ 0 1 8 10 10 te C - 2 8 8 10 10 e C + - 0 0 11 8 8 10 10 10 10 10 10 10 10 10 10 10 10 10
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A drug-free urine pool below.	was	spike	ed wi	th dru	ugs a	t the	listec	l con	centra	ations	s. The	e res	ults a	re su	Imma	aı
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Cut-off	15	15	14	16	15	15	14	16	15	15	16	14	16	14	15	I
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+50% Cut-off	0	_	30	0	30	0	30	0	30	0	30	0	30	0	3	30	0	3
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+50% Cut-off	0	3	30	1	29	0	30	0	30	0	30	0	30	0	30	_	0	3
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Drug Concentration Cut-off Range 0% Cut-off -50% Cut-off -25% Cut-off +25% Cut-off +50% Cut-off +50% Cut-off +300% Cut-off The following table li py the Multi-Drug Ra Analytes Analytes Acetaminophen D_L-Amphetamine si -Amphetamine ±) 3.4-Methylenedic amphetamine ±) 3.4-Methylenedic amphetamine ±) 3.4-Methylenedic	7-A30 30 26 14 5 0 0 sts th 14 5 0 0 0 sts th 14 5 0 0 0 0 0 0 14 5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	CL 00 + 0 0 4 16 25 30 30 30 Fest	7 30 30 27 14 30 0 0 0	-ACL200 	- 7 - 7 - 3(- 22 - 2 - 6 - 12 - 2 - 7 	D	0 +	30 CFYL 500 CFYL 500 000 000 000 000 000 000 00	0 (1 1 + 0 30 0 30 5 27 6 17 4 5 1 7 4 5 1 7 1 7 4 5 1 7 1 7 4 5 1 7 1 7 1 7 1 7 1 7 1 7 1 7 1 7	30 CAF 000 1 4 0 0 0 0 1 3 2 55 30 30 30 30 30 30 30 30 30 30	0 - 300 27 17 4 0 0 0 mat ar ine ine	30 CAT 150 + 0 0 3 13 26 30 30	0 0 T 30 30 27 15 3 0 0	RO 350 + 0 0 1 1 2 30 30 30	-) 5 7 0 0	AL - 30 30 28 17 3 0 0 17 3 0 0 0 17 50 25 3,(0 50 15 30 15	P + 0 2 13 27 30 30 30 30 30 30 30 30 30 30	
Drug Concentration Cut-off Range 0% Cut-off -50% Cut-off -25% Cut-off +25% Cut-off +300% Cut-off +300% Cut-off +300% Cut-off -300% Cut-off -300% Cut-off -300% Cut-off -300% Cut-off -300% Cut-off -300% Cut-off -300% Cut-off +300% Cut-off -300% Cut-off -30	7-A30 30 26 14 5 0 0 sts th 14 5 0 0 0 sts th 14 5 0 0 0 0 0 0 14 5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	CL 00 + 0 0 4 16 25 30 30 30 Fest	7 30 30 27 14 30 0 0 0	-ACL2200 ++ 0 0 0 7 3 3 4 10 3 3 4 10 3 3 4 10 5 6 7 7 7 7 7 7 7 7 7 7 7 7 7	- 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7	D	0 +	30 CFYL CFYL 500 	O O	30 CAF 000 1 4 0 0 0 0 1 3 2 55 30 30 30 30 30 30 30 30 30 30	0 - 300 27 17 4 0 0 0 mat ar ine ine	30 CAT 150 + 0 0 3 13 26 30 30	0 0 T 30 30 27 15 3 0 0	RO 350 + 0 0 1 1 2 30 30 30	-) 5 7 0 0	AL - 30 30 28 17 3 0 0 0 1,0 50 6,0 1,0 50 50 50 1,0 50 50 50 50 50 50 50 50 50 5	P + 0 0 2 13 277 300 300 300 0 0 0 0 0 0 0 0 0 0 0 0	
Drug Concentration Cut-off Range 0% Cut-off -50% Cut-off -25% Cut-off +25% Cut-off +50% Cut-off +300% Cut-off +300% Cut-off The following table i py the Multi-Drug Ra Analytes Analytes Acetaminophen D_L-Amphetamine si -Amphetamine ±) 3.4-Methylenedic amphetamine ±) 3.4-Methylenedic amphetamine ±) 3.4-Methylenedic amphetamine ±) 3.4-Methylenedic amphetamine si -Amphetamine si	7-A 30 - 30 26 14 5 0 0 0 0 sts tt 1 ppid 1 - - - - - - - - - - - - - - - - - - -	CL 00 + 0 0 4 16 25 30 30 30 Fest	7 30 30 27 14 30 0 0 0	-ACL200 2000 + 0 0 0 7 3 4 10 20 7 3 4 10 30 30 20 50 50 51 20 51 11 11 12 21 21 21 55 51 55 55 55 55 55 55 55 55 55 55 55	7 30 33 25 34 25 35 12 36 12 36 12 37 4 30 12 36 12 37 4 39 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0	D	0 +	30 CFYL 500 500 500 500 500 500 500 50		30 CAF 000 1 + 0 0 0 0 0 1 33 255 300 300 1 33 300 1 33 300 1 33 300 1 33 300 1 33 300 1 33 300 1 33 300 1 33 300 1 33 300 1 33 1 35 1 35 1 30 1 30	0 - 300 27 17 4 0 0 0 mat ar ine ine	30 CAT 150 + 0 0 3 13 26 30 30	0 0 T 30 30 27 15 3 0 0	RO 350 + 0 0 1 1 2 30 30 30	-) 5 7 0 0	AL - 30 30 28 17 3 0 0 0 1,0 50 25,0 3,0 50 15 2,0 30 15 2,0 30 60 60	P + 0 0 2 13 27 30 30 30 30 30 30 30 30 30 30 30 30 30	
Drug Concentration Cut-off Range 0% Cut-off -50% Cut-off -25% Cut-off +25% Cut-off +300% Cut-off +300% Cut-off +300% Cut-off The following table li yo the Multi-Drug Ra Analytes Acetaminophen D,L-Amphetamine su -Amphetamine (±) 3.4-Methylenedic amphetamine (±) 3.4-Methylenedic amphetamine (±) 3.4-Methylenedic amphetamine D,L-Amphetamine su -Amphetamine (±) 3.4-Methylenedic amphetamine D,L-Amphetamine su -Amphetamine D,L-Amphetamine su -Amphetamine D,L-Amphetamine su -Amphetamine	7-A 30 - 30 26 14 5 0 0 0 0 sts tt 1 ppid 1 - - - - - - - - - - - - - - - - - - -	CL 00 + 0 0 4 16 25 30 30 30 Fest	7 30 30 27 14 30 0 0 0	-ACL200 200 0 0 0 7 3 4 114 2 2 3 4 14 3 3 4 14 3 3 4 14 3 3 4 14 3 3 4 14 3 3 4 14 3 3 4 14 3 3 4 14 3 3 4 14 1 2 2 5 5 5 5 5 5 5 5 5 5 5 8 8 5 5 5 8 8 5 5 5 5 5 8 8 5	- 7 - 30 - 30 - 29 - 30 - 29 - 30 -	D	0	30 CFYL CF		30 CAF 000 1 30 7 13 25 300 30 7 33 7 13 25 300 300 7 33 7 13 30 300 7 33 300 7 33 300 7 13 300 9 00 1 10 1	0 - 300 27 17 4 0 0 0 mat ar ine ine	30 CAT 150 + 0 0 3 13 26 30 30	0 0 T 30 30 27 15 3 0 0	RO 350 + 0 0 1 1 2 30 30 30	-) 5 7 0 0	AL - 30 30 28 17 3 0 0 0 0 0 0 0 0 0 0 0 0 0	P + 0 0 2 13 27 30 30 30 30 0 0 0 0 0 0 0 0 0 0 0 0 0	
Drug Concentration Cut-off Range 0% Cut-off -50% Cut-off -25% Cut-off +25% Cut-off +50% Cut-off +300% Cut-off +300% Cut-off The following table i py the Multi-Drug Ra Analytes Analytes Acetaminophen D_L-Amphetamine si -Amphetamine ±) 3.4-Methylenedic amphetamine ±) 3.4-Methylenedic amphetamine ±) 3.4-Methylenedic amphetamine ±) 3.4-Methylenedic amphetamine si -Amphetamine si	7-A 30 - 30 26 14 5 0 0 0 0 sts tt 1 ppid 1 - - - - - - - - - - - - - - - - - - -	CL 00 + 0 0 4 16 25 30 30 30 Fest	7 30 30 27 14 30 0 0 0	-ACL2 200 + 0 0 0 7 3 4 10 22 30 30 4 10 30 30 4 10 30 30 50 50 51 51 22 51 51 22 51 51 11 11 11 11 11 15 58 86 66	7 30 33 25 34 25 35 12 36 12 36 12 37 4 30 12 36 12 37 4 39 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0 30 0	D	0	30 CFYL CF		30 CAF 000 1 30 7 13 25 300 30 7 33 7 13 25 300 300 7 33 7 13 30 300 7 33 300 7 33 300 7 13 300 9 00 1 10 1	0 - 300 27 17 4 0 0 0 mat ar ine ine	30 CAT 150 + 0 0 3 13 26 30 30	0 0 T 30 30 27 15 3 0 0	RO 350 + 0 0 1 1 2 30 30 30	-) 5 7 0 0	AL - 30 30 28 17 3 0 0 0 0 0 0 0 0 0 0 0 0 0	P + 0 0 2 13 27 30 30 30 30 0 0 0 0 0 0 0 0 0 0 0 0 0	

Pentobarbital	30,000 8,000	Phenobarbital Secobarbital	300 300
entopalpilai		ATES (BAR 200)	300
Amobarbital	3.000	Alphenol	400
5,5-Diphenylhydantoin	5,000	Aprobarbital	300
Allobarbital	400	Butabarbital	150
Barbital	5,000	Butalbital	5,000
Falbutal	150 20,000	Butethal	300 200
Cyclopentobarbital Pentobarbital	5,000	Phenobarbital Secobarbital	200
Chiobarbitar		EPINES (BZO 500)	200
Alprazolam	200	Bromazepam	1,500
a-hydroxyalprazolam	2,500	Chlordiazepoxide	1,500
Clobazam	300	Nitrazepam	300
Clonazepam	800	Norchlordiazepoxide	200
Clorazepatedipotassium	800	Nordiazepam	1,500
Delorazepam Desalkylflurazepam	1,500 300	Oxazepam Temazepam	500 300
Flunitrazepam	300	Diazepam	500
±) Lorazepam	5,000	Estazolam	10,000
RS-Lorazepamglucuronide	300	Triazolam	5,000
Midazolam	10,000		
		EPINES (BZO 300)	
Alprazolam	100	Bromazepam	900
a-hydroxyalprazolam	1,500	Chlordiazepoxide	900
Clobazam Clonazepam	200 500	Nitrazepam Norchlordiazepoxide	200
Clorazepatedipotassium	500	Nordiazepam	900
Delorazepan	900	Oxazepam	300
Desalkylflurazepam	200	Temazepam	100
Flunitrazepam	200	Diazepam	300
±) Lorazepam	3,000	Estazolam	6,000
RS-Lorazepamglucuronide	200	Triazolam	3,000
Vidazolam	6,000	EPINES (BZO 200)	
Alprazolam	70	Bromazepam	600
a-hydroxyalprazolam	1,000	Chlordiazepoxide	600
Clobazam	120	Nitrazepam	120
Clonazepam	300	Norchlordiazepoxide	70
Clorazepatedipotassium	300	Nordiazepam	600
Delorazepam	600	Oxazepam	200
Desalkylflurazepam	120	Temazepam	70
Flunitrazepam	120 2,000	Diazepam Estazolam	200
(±) Lorazepam RS-Lorazepamglucuronide	120	Triazolam	2,000
Vidazolam	4,000	Thazolam	2,000
inddebidini		EPINES (BZO 100)	
Alprazolam	40	Bromazepam	300
a-hydroxyalprazolam	500	Chlordiazepoxide	300
Clobazam	60	Nitrazepam	60
Clonazepam	150	Norchlordiazepoxide	40
Clorazepatedipotassium	150	Nordiazepam	300
Delorazepam Desalkylflurazepam	300 60	Oxazepam Temazepam	100 40
Flunitrazepam	60	Diazepam	100
(±) Lorazepam	1,000	Estazolam	2,000
	60	Triazolam	1,000
RS-Lorazepamglucuronide			1,000
	2,000		1,000
Midazolam	BUPRENO	RPHINE (BUP 10)	
Midazolam	BUPRENOR 10	RPHINE (BUP 10) Norbuprenorphine	50
Midazolam	BUPRENO 10 50	RPHINE (BUP 10) Norbuprenorphine Norbuprenorphine 3-D-Glucuronide	
Vidazolam Buprenorphine Buprenorphine 3-D-Glucuronide	BUPRENO 10 50	RPHINE (BUP 10) Norbuprenorphine Norbuprenorphine 3-D-Glucuronide RPHINE (BUP 5)	50 100
Vidazolam Buprenorphine Buprenorphine 3-D-Glucuronide Buprenorphine	BUPRENOR 10 50 BUPRENO 5	RPHINE (BUP 10) Norbuprenorphine Norbuprenorphine 3-D-Glucuronide	50
Vidazolam Buprenorphine Buprenorphine 3-D-Glucuronide Buprenorphine	BUPRENO 10 50 BUPRENO 5 25	RPHINE (BUP 10) Norbuprenorphine Norbuprenorphine 3-D-Glucuronide RPHINE (BUP 5) Norbuprenorphine Norbuprenorphine 3-D-Glucuronide	50 100 25
Vidazolam Buprenorphine Buprenorphine 3-D-Glucuronide Buprenorphine Buprenorphine 3-D-Glucuronide	BUPRENO 10 50 BUPRENO 5 25 COCAI 300	RPHINE (BUP 10) RPHINE (BUP 10) Norbuprenorphine 3-D-Glucuronide IRPHINE (BUP 5) Norbuprenorphine Norbuprenorphine 3-D-Glucuronide NE (COC 300) Cocaethylene	50 100 25
Vlidazolam Suprenorphine Suprenorphine 3-D-Glucuronide Suprenorphine Suprenorphine 3-D-Glucuronide Senzoylecgonine	BUPRENO 10 50 BUPRENO 5 25 COCAI 300 200	RPHINE (BUP 10) Norbuprenorphine Norbuprenorphine 3-D-Glucuronide RPHINE (BUP 5) Norbuprenorphine Norbuprenorphine 3-D-Glucuronide NorCoc 300) Cocaethylene Ecgonine	50 100 25 50
Vlidazolam Buprenorphine Buprenorphine Buprenorphine Buprenorphine Benzoylecgonine Cocaine HCI	BUPRENOI 10 50 BUPRENO 5 25 COCAII 300 200 COCAII	RPHINE (BUP 10) RPHINE (BUP 10) Norbuprenorphine 3-D-Glucuronide RPHINE (BUP 5) Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide RE (COC 300) Cacaethylene Ecgonine NE (COC 200)	50 100 25 50 20,000 30,000
Viidazolam Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Senzoylecgonine Cocaine HCl Senzoylecgonine	BUPRENOI 10 50 BUPRENO 5 25 COCAII 300 200 COCAII 200	RPHINE (BUP 10) RPHINE (BUP 10) Norbuprenorphine 3-D-Glucuronide IRPHINE (BUP 5) Norbuprenorphine 3-D-Glucuronide Net (COC 300) Cocaethylene Ecgonine Net (COC 200) Cocaethylene	50 100 25 50 20,000 30,000 13,500
Viidazolam Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Senzoylecgonine Cocaine HCl Senzoylecgonine	BUPRENOI 10 50 BUPRENO 5 25 COCAII 300 200 COCAII 200 135	RPHINE (BUP 10) RPHINE (BUP 5) Norbuprenorphine 3-D-Glucuronide RPHINE (BUP 5) Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide ECCC 300) Cocaethylene Ecgonine Net (COC 200) Cocaethylene Ecgonine	50 100 25 50 20,000 30,000
Vidazolam Buprenorphine Buprenorphine Buprenorphine Buprenorphine Buprenorphine Benzoylecgonine Decaine HCl Benzoylecgonine Docaine HCl	BUPRENOI 10 50 BUPRENO 5 25 COCAII 300 200 200 COCAII 200 135 COCAII COCAII	RPHINE (BUP 10) RPHINE (BUP 10) Norbuprenorphine 3-D-Glucuronide IRPHINE (BUP 5) Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide Net (COC 300) Cocaethylene Ecgonine Net (COC 200) Cocaethylene Ecgonine Net (COC 150)	50 100 25 50 20,000 30,000 13,500 20,000
Vidazolam Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Senzoylecgonine Cocaine HCl Senzoylecgonine Cocaine HCl Sanzoylecgonine	BUPRENOI 10 50 BUPRENO 5 25 COCAII 300 200 200 135 COCAII 150	RPHINE (BUP 10) RPHINE (BUP 10) Norbuprenorphine 3-D-Glucuronide IRPHINE (BUP 5) Norbuprenorphine 3-D-Glucuronide Net (COC 300) Cocaethylene Ecgonine Net (COC 200) Cocaethylene Ecgonine Net (COC 150) Cocaethylene	50 100 25 50 20,000 30,000 13,500 20,000 1,0000
Vidazolam Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Senzoylecgonine Cocaine HCI Senzoylecgonine Cocaine HCI Senzoylecgonine	BUPRENOI 10 50 50 BUPRENO 52 COCAII 300 200 200 COCAII 200 135 COCAII 150 120 120	RPHINE (BUP 10) RPHINE (BUP 10) Norbuprenorphine 3-D-Glucuronide IRPHINE (BUP 5) Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide Net (COC 300) Cocaethylene Ecgonine Net (COC 200) Cocaethylene Ecgonine Net (COC 150)	50 100 25 50 20,000 30,000 13,500 20,000
Viidazolam Buprenorphine Buprenorphine 3-D-Glucuronide Buprenorphine 3-D-Glucuronide Banzoylecgonine Cocaine HCl Benzoylecgonine Cocaine HCl Benzoylecgonine Cocaine HCl	BUPRENOI 10 50 50 BUPRENO 52 COCAII 300 200 200 COCAII 200 135 COCAII 150 120 120	RPHINE (BUP 10) RPHINE (BUP 10) Norbuprenorphine 3-D-Glucuronide IRPHINE (BUP 5) Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide NE (COC 300) Cocaethylene Ecgonine NE (COC 200) Cocaethylene Ecgonine NE (COC 150) Cocaethylene Ecgonine NE (COC 100) Cocaethylene Ecgonine NE (COC 100) Cocaethylene	50 100 25 50 20,000 30,000 13,500 20,000 1,0000
Vidazolam Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Senzoylecgonine Cocaine HCI Senzoylecgonine Cocaine HCI Senzoylecgonine Cocaine HCI Senzoylecgonine	BUPRENOI 10 50 BUPRENO β 25 COCAII 300 200 COCAII 200 135 COCAII 150 120 120 100 80	RPHINE (BUP 10) RPHINE (BUP 10) Norbuprenorphine 3-D-Glucuronide Worbuprenorphine 3-D-Glucuronide Norbuprenorphine Norbuprenorphine 3-	50 100 25 50 20,000 30,000 13,500 20,000 1,0000 15,000
RS-Lorazepamglucuronide Widazolam Buprenorphine 3-D-Glucuronide Buprenorphine 3-D-Glucuronide Buprenorphine 3-D-Glucuronide Banzoylecgonine Cocaine HCI Benzoylecgonine Cocaine HCI Benzoylecgonine Cocaine HCI Benzoylecgonine Cocaine HCI	BUPRENOI 10 50 50 BUPRENO 5 COCAII 300 200 200 COCAII 135 COCAII 150 120 120 COCAII 150 120 0 80 80 MARIJU.	RPHINE (BUP 10) RPHINE (BUP 10) Norbuprenorphine 3-D-Glucuronide RPHINE (BUP 5) Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide NE (COC 300) Cocaethylene Ecgonine NE (COC 200) Cocaethylene Ecgonine NE (COC 150) Cocaethylene Ecgonine NE (COC 100) Cocaethylene Ecgonine NE (COC 100) Cocaethylene Ecgonine ANA (THC300)	50 100 25 50 20,000 30,000 13,500 20,000 1,0000 15,000 7,000 10,000
Viidazolam Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Senzoylecgonine Cocaine HCI Senzoylecgonine Cocaine HCI Senzoylecgonine Cocaine HCI Cocaine HCI Cocaine HCI Cocaine HCI Cocaine HCI Cocaine HCI Cocaine HCI Cocaine HCI	BUPRENOI 10 50 BUPRENO 51 25 COCAII 300 200 COCAII 200 135 COCAII 150 120 COCAII 150 120 COCAII 150 120 COCAII 100 80 MARIJU, 200,000	RPHINE (BUP 10) RPHINE (BUP 10) Norbuprenorphine 3-D-Glucuronide IRPHINE (BUP 5) Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide NE (COC 300) Cocaethylene Ecgonine NE (COC 200) Cocaethylene Ecgonine NE (COC 150) Cocaethylene Ecgonine NE (COC 150) Cocaethylene Ecgonine NE (COC 100) Cocaethylene ANA (THC300) La&-THC	50 100 25 50 20,000 30,000 13,500 20,000 1,0000 1,0000 10,000 100,000
Viidazolam 3uprenorphine 3-D-Glucuronide 3uprenorphine 3-D-Glucuronide 3uprenorphine 3-D-Glucuronide 3uprenorphine 3-D-Glucuronide 3enzoylecgonine Cocaine HCl 3enzoylecgonine Cocaine HCl 3enzoylecgonine Cocaine HCl 3enzoylecgonine Cocaine HCl Cocaine HCl Cocaine HCl 1-nor-A8-THC-9 COOH	BUPRENOI 10 50 50 BUPRENO 52 COCAII 200 COCAII 200 COCAII 130 COCAII 150 I20 1200 COCAII 150 COCAII 120 COCAII 120 COCAII 100 B0 MARIJU 200,000 200 200	RPHINE (BUP 10) RPHINE (BUP 10) Norbuprenorphine 3-D-Glucuronide RPHINE (BUP 5) Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide NE (COC 300) Cocaethylene Ecgonine NE (COC 200) Cocaethylene Ecgonine NE (COC 150) Cocaethylene Ecgonine NE (COC 100) Cocaethylene Ecgonine NE (COC 100) Cocaethylene Ecgonine ANA (THC300)	50 100 25 50 20,000 30,000 13,500 20,000 1,0000 15,000 7,000 10,000
Viidazolam Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-Glucuronide Senzoylecgonine Cocaine HCI Senzoylecgonine Cocaine HCI Senzoylecgonine Cocaine HCI Cocaine HCI Cocaine HCI Cocaine HCI Cocaine HCI Cocaine HCI Cocaine HCI Cocaine HCI	BUPRENOI 10 50 50 BUPRENO 25 COCAII 300 200 200 COCAII 200 135 COCAII 150 120 COCAII 150 120 00 300 300 300	RPHINE (BUP 10) RPHINE (BUP 10) Norbuprenorphine 3-D-Glucuronide IRPHINE (BUP 5) Norbuprenorphine Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide Net (COC 300) Cocaethylene Ecgonine NE (COC 100) Cocaethylene Ecgonine Net (COC 100) Cocaethylene Ecqonine ANA (THC300) A8-THC A9-THC	50 100 25 50 20,000 30,000 13,500 20,000 1,0000 1,0000 10,000 100,000
Vidazolam Suprenorphine 3-D-Glucuronide Suprenorphine 3-D-G	BUPRENOI 10 50 50 BUPRENO 25 COCAII 200 200 135 COCAII 150 120 COCAII 50 150 120 COCAII 150 120 COCAII 150 120 000 300 80 MARIJU, 200 300	RPHINE (BUP 10) RPHINE (BUP 10) Norbuprenorphine 3-D-Glucuronide IRPHINE (BUP 5) Norbuprenorphine 3-D-Glucuronide Net (COC 300) Cocaethylene Ecgonine NE (COC 190) Cocaethylene Ecgonine NE (COC 150) Cocaethylene Ecgonine NE (COC 100) Cocaethylene Ecgonine NE (COC 100) Cocaethylene Ecgonine ANA (THC300) AA-(THC200)	50 100 25 50 20,000 30,000 13,500 20,000 1,0000 1,0000 10,000 100,000
Alidazolam Buprenorphine 3-D-Glucuronide Buprenorphine 3-D-Glucuronide Buprenorphine 3-D-Glucuronide Benzoylecgonine Cocaine HCI Benzoylecgonine Cocaine HCI Benzoylecgonine Cocaine HCI Benzoylecgonine Cocaine HCI Cocaine HCI	BUPRENOI 10 50 50 BUPRENO 51 25 COCAII 200 135 COCAII 150 120 120 COCAII 150 120 120 COCAII 100 80 80 MARIJU 2000 300 MARIJU 140,000	RPHINE (BUP 10) RPHINE (BUP 10) Norbuprenorphine 3-D-Glucuronide RPHINE (BUP 5) Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide Norbuprenorphine 3-D-Glucuronide Net (COC 300) Cocaethylene Ecgonine NE (COC 150) Cocaethylene Ecgonine NE (COC 100) Cocaethylene Ecgonine NE (COC 100) Cocaethylene Ecgonine NA (THC300) AS-THC ANA (THC200) AS-THC	50 100 25 50 20,000 30,000 13,500 20,000 13,500 10,000 15,000 10,000 100,000 100,000 100,000
Vildazolam 3uprenorphine 3-D-Glucuronide 3uprenorphine 3-D-Glucuronide 3uprenorphine 3-D-Glucuronide 3uprenorphine 3-D-Glucuronide 3enzoylecgonine Cocaine HCl 3enzoylecgonine Cocaine HCl 3enzoylecgonine Cocaine HCl 3enzoylecgonine Cocaine HCl Cocaine HCl Cocaine HCl 1-nor-A8-THC-9 COOH	BUPRENOI 10 50 50 BUPRENO 25 COCAII 200 200 135 COCAII 150 120 COCAII 50 150 120 COCAII 150 120 COCAII 150 120 000 300 80 MARIJU, 200 300	RPHINE (BUP 10) RPHINE (BUP 10) Norbuprenorphine 3-D-Glucuronide IRPHINE (BUP 5) Norbuprenorphine 3-D-Glucuronide Net (COC 300) Cocaethylene Ecgonine NE (COC 190) Cocaethylene Ecgonine NE (COC 150) Cocaethylene Ecgonine NE (COC 100) Cocaethylene Ecgonine NE (COC 100) Cocaethylene Ecgonine ANA (THC300) AA-(THC200)	50 100 25 50 20,000 30,000 13,500 20,000 1,0000 1,0000 10,000 100,000

11-nor-∆8-THC-9 COOH 11-nor-∆9-THC-9 COOH	100 150	∆9-THC	50,000
11-101-29-1110-9 00011	MARIJUAN	A (THC50)	
Cannabinol	35,000	∆8-THC	17,000
Cannabinol 11-nor-∆8-THC-9 COOH	30	∆9-THC	17,000
11-nor-∆9-THC-9 COOH	50		
	MARIJUAN		
Cannabinol	20,000	∆8-THC	10,000
11-nor-∆8-THC-9 COOH 11-nor-∆9-THC-9 COOH	20 30	∆9-THC	10,000
11-101-29-1110-9 00011		IA (THC25)	
Cannabinol	17,500	∆8-THC	8,500
Cannabinol 11-nor-∆8-THC-9 COOH	15	∆9-THC	8,500
11-nor-∆9-THC-9 COOH	25		
	METHADON		
Methadone	300	Doxylamine	100,000
Methadone	200	IE (MTD200) Doxylamine	65,000
		MINE (MET1, 000)	05,000
ρ-Hydroxymethamphetamine	25,000	(±)-3,4-Methylenedioxy-	12,500
D-Methamphetamine	1,000	methamphetamine	,
L-Methamphetamine	20,000	Mephentermine	50,000
		AMINE (MET500)	
p-Hydroxymethamphetamine	12,500	(±)-3,4-Methylenedioxy-	6,250
D-Methamphetamine	500	methamphetamine	05.000
L-Methamphetamine		Mephentermine AMINE (MET300)	25,000
ρ-Hydroxymethamphetamine	7,500	(±)-3,4-Methylenedioxy-	3,750
D-Methamphetamine	300	methamphetamine	5,100
L-Methamphetamine	6,000	Mephentermine	15,000
		ETAMINE (MDMA1, 000) Ecstasy	
(±) 3,4-Methylenedioxy	1,000	3,4-Methylenedioxyethyl-amphetamine	600
methamphetamine HCI	.,		
(±) 3,4-Methylenedioxyamphetami	6,000		
ne HCI METHYI ENEDIC	- T	IETAMINE (MDMA500) Ecstasy	L
(±) 3,4-Methylenedioxy			
methamphetamine HCl	500	3,4-Methylenedioxyethyl-amphetamine	300
(±) 3,4-Methylenedioxyamphetami	3.000		
ne HCI			
	DXYMETHAMPI	HETAMINE (MDMA300) Ecstasy	
(±) 3,4-Methylenedioxy	300	3,4-Methylenedioxyethyl-amphetamine	180
methamphetamine HCl (±) 3,4-Methylenedioxyamphetami			
ne HCl	1,800		
	MORPHINE	(MOP 300)	
Codeine	200	Norcodeine	6,000
Levorphanol	1,500	Normorphone	50,000
Morphine-3-β-D-Glucuronide	800	Oxycodone	30,000
Ethylmorphine	6,000	Oxymorphone	50,000
Hydrocodone	50,000	Procaine	15,000
Hydromorphone 6-Monoacethylmorphine	3,000 300	Thebaine Morphine	6,000
6-wonoacethyimorphine		Morphine (MOP 200)	300
Codeine	160	Norcodeine	4,000
Codeine Levorphanol	1,000	Normorphone	40,000
Morphine-3-β-D-Glucuronide	600	Oxycodone	20,000
Ethylmorphine	4,000	Oxymorphone	40,000
Hydrocodone	40,000	Procaine	10,000
Hydromorphone	2,000	Thebaine	4,000
6-Monoacethylmorphine	200	Morphine	200
<u> </u>	MORPHINE		0.000
Codeine	80	Norcodeine	2,000
Levorphanol Morphine-3-β-D-Glucuronide	500 300	Normorphone Oxycodone	20,000 10,000
Ethylmorphine	2,000	Oxymorphone	20,000
Hydrocodone	2,000	Procaine	5,000
Hydromorphone	1,000	Thebaine	2,000
6-Monoacethylmorphine		Morphine	100
	Methaqualor		
Methaqualone	300		
Cadaiaa	MORPHINE/OPI		
Codeine	DORPHINE/OPI 2,000	Morphine	2,000
Codeine Ethylmorphine	MORPHINE/OPI 2,000 3,000	Morphine Norcodeine	25,000
Codeine Ethylmorphine Hydrocodone	IORPHINE/OPI 2,000 3,000 50,000	Morphine Norcodeine Normorphone	25,000 50,000
Codeine Ethylmorphine Hydrocodone Hydromorphone	MORPHINE/OPI 2,000 3,000 50,000 15,000	Morphine Norcodeine Normorphone Oxycodone	25,000 50,000 25,000
Codeine Ethylmorphine Hydrocodone Hydromorphone	MORPHINE/OPI 2,000 3,000 50,000 15,000 25,000	Morphine Norcodeine Normorphone	25,000 50,000 25,000 25,000
Codeine Ethylmorphine Hydrocodone Hydromorphone Levorphanol 6-Monoacetylmorphine	VORPHINE/OPI 2,000 3,000 50,000 15,000 25,000 3,000 2,000 2,000	Morphine Norcodeine Normorphone Oxycodone Oxymorphone Procaine Thebaine	25,000 50,000 25,000
Codeine Ethylmorphine Hydrocodone Hydromorphone Levorphanol 6-Monoacetylmorphine Morphine 3-β-D-glucuronide	VORPHINE/OPI 2,000 3,000 50,000 15,000 25,000 3,000 2,000 2,000 PHENCYCL	Morphine Norcodeine Normorphone Oxymorphone Procaine Thebaine DINE (PCP)	25,000 50,000 25,000 25,000 50,000 25,000
Codeine Ethylmorphine Hydrocodone Hydromorphone Levorphanol 6-Monoacetylmorphine Morphine 3-β-D-glucuronide	MORPHINE/OPI 2,000 3,000 50,000 15,000 25,000 3,000 25,000 2,000 2,000 2,000 2,000 2,000 2,000 2,000 2,000 2,000 2,000	Morphine Norrcodeine Normorphone Öxycodone Öxymorphone Procaine Thebaine DINE (PCP) 4-Hydroxyphencyclidine	25,000 50,000 25,000 25,000 50,000
Codeine Ethylmorphine Hydrocodone Hydromorphone Levorphanol 6-Monoacetylmorphine Morphine 3-β-D-glucuronide Phencyclidine	MORPHINE/OPI 2,000 3,000 50,000 15,000 25,000 2,000 2,000 2,000 2,000 2,000 2,000 2,000 PHENCYCL 25 PROPOXYP	Morphine Norrcodeine Normorphone Öxycodone Oxymorphone Procaine Thebaine DINE (PCP) 4-Hydroxyphencyclidine HENE (PPX)	25,000 50,000 25,000 25,000 50,000 25,000 12,500
Codeine Ethylmorphine Hydrocodone Hydromorphone Levorphanol 6-Monoacetylmorphine Morphine 3-β-D-glucuronide Phencyclidine D-Propoxyphene	MORPHINE/OPI 2,000 3,000 50,000 15,000 25,000 3,000 2000 2,000 PHENCYCL 25 PROPOXYP 300	Morphine Norcodeine Normorphone Oxycodone Oxymorphone Procaine Thebaine DINE (PCP) 4-Hydroxyphencyclidine HENE (PPX) D-Norpropoxyphene	25,000 50,000 25,000 25,000 50,000 25,000
Codeine Ethylmorphine Hydrocodone Hydromorphone Levorphanol 6-Monoacetylmorphine Morphine 3-β-D-glucuronide Phencyclidine D-Propoxyphene TRIC	ORPHINE/OPI 2,000 3,000 50,000 15,000 25,000 3,000 2,000 2,000 2,000 2,000 2,000 2,000 PHENCYCL 25 PROPOXYP 300 YCLIC ANTIDE	Morphine Norracybione Oxycodone Oxymorphone Procaine Thebaine DINE (PCP) 4-Hydroxybnencyclidine HENE (PPX) D-Norpropoxyphene PRESSANTS (TCA)	25,000 50,000 25,000 25,000 50,000 25,000 12,500 300
Codeine Ethylmorphine Hydrocodone Hydromorphone Levorphanol 6-Monoacetylmorphine Morphine 3-β-D-glucuronide Phencyclidine D-Propoxyphene	MORPHINE/OPI 2,000 3,000 50,000 15,000 25,000 3,000 2000 2,000 PHENCYCL 25 PROPOXYP 300	Morphine Norcodeine Normorphone Oxycodone Oxymorphone Procaine Thebaine DINE (PCP) 4-Hydroxyphencyclidine HENE (PPX) D-Norpropoxyphene	25,000 50,000 25,000 25,000 50,000 25,000 12,500

T .:	0.000	Devezia	0.000
Trimipramine Amitriptyline	3,000 1,500	Doxepine Maprotiline	2,000 2,000
Promazine	3,000	Promethazine	50,000
Desipramine	200	Perphenazine	50,000
Cyclobenzaprine	2,000	Dithiaden L (TML 100)	10,000
n-Desmethyl-cis-tramadol	200	b-Desmethyl-cis-tramadol	10,000
n-Desmethyl-cis-tramadol Cis-tramadol	100	Phencyclidine	100,000
Procyclidine	100,000	d,I-O-Desmethyl venlafaxine	50,000
		L (TML 200)	00.000
n-Desmethyl-cis-tramadol	400 200	o-Desmethyl-cis-tramadol	20,000 200,000
Cis-tramadol Procyclidine	200,000	Phencyclidine d.I-O-Desmethyl venlafaxine	100,000
reeyenane	TRAMADO	L (TML 300)	100,000
n-Desmethyl-cis-tramadol	600	o-Desmethyl-cis-tramadol	30,000
Cis-tramadol	300	Phencyclidine	300,000
Procyclidine	300,000	d,I-O-Desmethyl venlafaxine (KET1, 000)	150,000
Ketamine	1,000	Benzphetamine	25,000
Dextromethorphan	2,000	(+) Chlorpheniramine	25,000
Methoxyphenamine	25,000	Clonidine	100,000
d-Norpropoxyphene	25,000	EDDP	50,000
Promazine	25,000	4-Hydroxyphencyclidine	50,000
Pentazocine	25,000 25,000	Levorphanol MDE	50,000 50,000
Promethazine Pentazocine Phencyclidine	25,000	Meperidine	25,000
Tetrahydrozoline	500	d-Methamphetamine	50,000
Mephentermine	25,000	-Methamphetamine	50,000
(1R, 2S) - (-)-Ephedrine	100,000	3,4-Methylendioxymethamphetamine (MDMA)	100,000
Disopyramide	25,000	Thioridazine	50,000
2.00pyramido		E (KET500)	30,000
Ketamine	500	Benzphetamine	12,500
Dextromethorphan	1,000	(+) Chlorpheniramine	12,500
Methoxyphenamine	12,500	Clonidine	50,000
d-Norpropoxyphene	12,500	EDDP	25,000
Promazine Promethazine Pentazocine	12,500 12,500	4-Hydroxyphencyclidine Levorphanol	25,000 25,000
Pentazocine	12,500	MDE	25,000
Phencyclidine	12,500	Meperidine	12,500
Tetrahydrozoline	250	d-Methamphetamine	25,000
Mephentermine	12,500	-Methamphetamine	25,000
(1R, 2S) - (-)-Ephedrine	50,000	3,4-Methylendioxymethamphetamine	50,000
Disopyramide	12,500	(MDMA) Thioridazine	25,000
Disopyramide		E (KET300)	20,000
Ketamine	300	Benzphetamine	6,250
Dextromethorphan	600	(+) Chlorpheniramine	6,250
Methoxyphenamine	6,250	Clonidine	30,000
d-Norpropoxypnene	6,250 6,250	EDDP	15,000 15,000
d-Norpropoxyphene Promazine Promethazine	6,250	4-Hydroxyphencyclidine Levorphanol	15,000
Pentazocine	6,250	MDE	15,000
Phencyclidine	6,250	Meperidine	6,250
Tetrahydrozoline	150	d-Methamphetamine	15,000
Mephentermine	6,250	-Methamphetamine	15,000
(1R, 2S) - (-)-Ephedrine	30,000	3,4-Methylendioxymethamphetamine (MDMA)	30,000
Disopyramide	6,250	Thioridazine	15,000
		E (KET100)	
Ketamine	100	Benzphetamine	2,000
Dextromethorphan	200	(+) Chlorpheniramine	2,000
Methoxyphenamine d-Norpropoxyphene Promazine	2,000 2,000	Clonidine EDDP	10,000 5,000
Promazine	2,000	EDDP 4-Hydroxyphencyclidine	5,000
Promethazine	2,000	Levorphanol	5,000
Pentazocine	2,000	MDE	5,000
Phencyclidine	2,000	Meperidine	2,000
Tetrahydrozoline	50	d-Methamphetamine	5,000
Mephentermine (1R, 2S) - (-)-Ephedrine	2,000	-Methamphetamine Thioridazine	5,000 5,000
Disopyramide	10,000 2,000	3,4-Methylendioxymethamphetamine	10,000
		(MDMA)	
		e (OXY100)	
Oxycodone Oxymorphone Levorphanol	100	Hydromorphone	50,000
	300	Naloxone Naltrexone	25,000
Hydrocodone	50,000 25,000	NatureAUTE	25,000
		(COT 200)	
(-)-Cotinine	200	(-)-Nicotine	5,000
	Cotinine	(COT 100)	
(-)-Cotinine	100	(-)-Nicotine	2,500
2-Ethylidene-	1,5-dimethyl-3,3-	diphenylpyrrolidine (EDDP300)	200
2-Ethylidene-1,5-dimethyl-3,3-dip 2-Ethylidene-		LDDP) diphenylpyrrolidine (EDDP100)	300
2-Ethylidene-1,5-dimethyl-3,3-dip			100
		1 (FYL20)	
	,		

Alfentanyl	600,000	Buspirone	15,000
Fenfluramine	50,000	Fentanyl	100
Norfentanyl	20 Fenta	Sufentanyl Inyl (FYL10)	50,000
Alfentanyl	300,000	Buspirone	8,000
enfluramine	25,000	Fentanyl	50
Norfentanyl	10	Sufentanyl	25.000
	Synthetic M	Marijuana (K2-50)	
WH-018 5-Pentanoic acid	50	JWH-073 4-butanoic acid	50
WH-018 4-Hydroxypentyl	400	JWH-018 5-Hydroxypentyl	500
IWH-073 4-Hydroxybuty	500		
		Marijuana (K2-30)	
JWH-018 5-Pentanoic acid	30	JWH-073 4-butanoic acid	30
WH-018 4-Hydroxypentyl	250	JWH-018 5-Hydroxypentyl	300
WH-073 4-Hydroxybuty	300	Marijuana (K2 25)	
JWH-018 5-Pentanoic acid	25	Marijuana (K2-25) JWH-073 4-butanoic acid	25
JWH-018 4-Hydroxypentyl	200	JWH-018 5-Hydroxypentyl	250
JWH-073 4-Hydroxybuty	250	SWIT-010 S-Hydroxypentyl	2.50
Will bro 4 Hydroxybuty		-morphine (6-MAM)	
S-Monoacethylmorphine	10	Morphine	100.000
		xyamphetamine (MDA 500)	,
±) 3,4-Methylenedioxy		Methoxyphenamine	5,000
amphetamine	500	D-Amphetamine	2,000
D,L-Amphetamine sulfate	400	Phentermine	2,000
-Amphetamine	30,000	Maprotiline	100,000
		ucuronide(ETG500)	
Ethyl- β -D-Glucuronide	500	Propyl β-D-glucuronide	50,000
Morphine 3β-glucuronide	100,000	Morphine 6β-glucuronide	100,000
Glucuronic Acid	100,000	Ethanol	>100,000
Vlethanol	>100,000	europido(ETC1.000)	
thul & D Churcheride		curonide(ETG1,000)	100.000
Ethyl- β -D-Glucuronide	1,000	Propyl β-D-glucuronide	100,000
Morphine 3β-glucuronide Glucuronic Acid	>100,000 >100,000	Morphine 6β-glucuronide Ethanol	>100,000
Methanol	>100,000		-100,000
Vietriario		EPAM(CLO 400)	
Clonazepam	400	Flunitrazepam	300
Alprazolam	200	(±) Lorazepam	1,250
a-hydroxyalprazolam	2.000	RS-Lorazepamglucuronide	250
Bromazepam	1,000	Midazolam	5,000
Chlordiazepoxide	1,000	Nitrazepam	200
Clobazam	250	Norchlordiazepoxide	200
Clorazepatedipotassium	600	Nordiazepam	1,000
Delorazepam	1,000	Oxazepam	350
Desalkylflurazepam	250	Temazepam	150
Diazepam	300	Triazolam	5,000
Estazolam	1,250		
		EPAM(CLO 150)	100
Clonazepam	150	Flunitrazepam	120
Alprazolam	75	(±) Lorazepam	500
a-hydroxyalprazolam	750	RS-Lorazepamglucuronide	100
Bromazepam	400	Midazolam	2,000 75
Chlordiazepoxide Clobazam	400	Nitrazepam Norchlordiazepoxide	75
Clorazepatedipotassium	250	Nordiazepam	400
Delorazepan	400	Oxazepam	130
Desalkylflurazepam	100	Temazepam	60
Diazepam	120	Triazolam	2,000
Estazolam	500		_,000
		DIETHYLAMIDE (LSD 20)	
_ysergic Acid Diethylamide	20		
	SERGIC ACID D	DIETHYLAMIDE (LSD 50)	•
ysergic Acid Diethylamide	50		
• • •		NIDATE (RITALIN)	
Methylphenidate (Ritalin)	300	Ritalinic Acid	1,000
		DLPIDEM	
Zolpidem	50		
		rone(MEP100)	14
Mephedrone HCI	100	R(+)-Methcathinone HCl	1500
S(-)-Methcathinone HCI	500	3-Fluoromethcathinone HCl	1500
I-Fluoromethcathinone HCl	300 4 methylonedia	Methoxyphenamine	100,000
		xypyrovalerone (MDPV)	
3, 4-methylenedioxypyrovaleror		am (DIA 300)	
Jiazanam	300	Midazolam	6 000
Diazepam Clobazam	200	Nitrazepam	6,000 200
Clonazepam	500	Norchlordiazepoxide	100
Clorazepate dipotassium	500	Nordiazepam	900
Alprazolam	100	Flunitrazepam	200
a-hydroxyalprazolam	1,500	(±) Lorazepam	3,000
Bromazepam	900	RS-Lorazepam glucuronide	200
Chlordiazepoxide	900	Triazolam	3,000
	6,000	Temazepam	100
Estazolam	0,000		
Estazolam Delorazepam	900	Oxazepam	300

	Diazonar	n (DIA 200)	
Diazepam	200	Midazolam	4000
Clobazam	120	Nitrazepam	120
Clonazepam	300	Norchlordiazepoxide	70
Clorazepate dipotassium	300	Nordiazepam	600
Alprazolam	70	Flunitrazepam	120
a-hydroxyalprazolam	1000	(±) Lorazepam	2000
Bromazepam	600	RS-Lorazepam glucuronide	120
Chlordiazepoxide	600	Triazolam	2000
Estazolam	4000	Temazepam	70
Delorazepam	600	Oxazepam	200
Desalkylflurazepam	120		
	Zopiclone	e (ZOP 50)	
Zopiclone-x-oxide		Zopiclone	50
	Methcathinor	ne (MCAT 500)	
S(-)-Methcathinone HCI	500	R(+)-Methcathinone HCI	1500
Methoxyphenamine	100000	3-Fluoromethcathinone HCl	1500
7-	AMINOCLONAZ	EPAM(7-ACL300)	
a-hydroxyalprazolam	6,000	Flunitrazepam	3,000
Bromazepam	6,000	RS-Lorazepam glucuronide	2,700
Chlordiazepoxide	6,000	Norchlordiazepoxide	4,500
Clobazam	9,000	Nordiazepam	15,000
Clonazepam	2,400	Temazepam	9,000
Delorazepam	6,000	7-Aminoclonazepam	300
Desalkylflurazepam	6,000		
		EPAM(7-ACL200)	
a-hydroxyalprazolam	4,000	Flunitrazepam	2,000
Bromazepam	4,000	RS-Lorazepam glucuronide	1,800
Chlordiazepoxide	4,000	Norchlordiazepoxide	3,000
Clobazam	6,000	Nordiazepam	10,000
Clonazepam	1,600	Temazepam	6,000
Delorazepam	4,000	7-Aminoclonazepam	200
Desalkylflurazepam	4,000		
		EPAM(7-ACL100)	4 000
a-hydroxyalprazolam	2,000	Flunitrazepam	1,000 900
Bromazepam	2,000 2,000	RS-Lorazepam glucuronide Norchlordiazepoxide	1,500
Chlordiazepoxide Clobazam	3,000	Nordiazepam	5,000
Clonazepam	800	Temazepam	3,000
Delorazepam	2,000	7-Aminoclonazepam	100
Desalkylflurazepam	2,000	7-Aminocionazepam	100
Desaikyillulazepaili		IYL(CFYL500)	
Carfentanyl	500	Fentanyl	100
Callentariyi		CAF 1000)	100
Caffeine	1000		
Cancine		CAT 150)	.1
(+)-Norpseudoephedrine HCI		(+)3,4-Methylenedioxyamphetamine	1
(Cathine)	150	(MDA)	100
d/I-Amphetamine	100	p-Hydroxyamphetamine	100
Tryptamine	12.500	Methoxyphenamine	12.500
71	Tropicamid	e (TRO 350)	
Tropicamide	350		
	Alprazolar	n(ALP 100)	
Benzodiazepines	300	Flunitrazepam	200
a-hydroxyalprazolam	1,500	(±) Lorazepam	3,000
Bromazepam	900	RS-Lorazepamglucuronide	200
Chlordiazepoxide	900	Midazolam	6,000
Clobazam	200 500	Nitrazepam	200 100
Clonazepam Clorazepatedipotassium	500 500	Norchlordiazepoxide Nordiazepam	900
Delorazepam	900	Oxazepam	300
Desalkylflurazepam	200	Temazepam	100
Diazepam	300	Triazolam	3,000
Estazolam	6000		
			-

 Estazolam
 6000

 Effect of Uinary Specific Gravity

 Fifteen (15) urine samples of normal, high, and low specific gravity ranges (1.005-1.045) were spiked with drugs at 50% below and 50% above cut-off levels respectively. The Multi-Drug Rapid Test Panel was tested in duplicate using fifteen drug-free urine and spiked urine samples. The results demonstrate that varying ranges of urinary specific gravity do not affect the test results.

 Effect of Urinary PH

 The pH of an aliquoted negative urine pool was adjusted to a pH range of 5 to 9 in 1 pH unit increments and spiked with drugs at 50% below and 50% above cut-off levels. The spiked, pH-adjusted urine was tested with the Multi-Drug Rapid Test Panel. The results demonstrate that varying ranges of pH do not interfere with the performance of the test.

 Cross-Reactivity

interfere with the performance of the test. **Cross-Reactivity** A study was conducted to determine the cross-reactivity of the test with compounds in either drug-free urine or drug positive urine containing, Amphetamine, Barbiturates, Benzodiazepines, Buprenorphine, Cocaine, Marijuana, Methadone, Methamphetamine, Methylenedioxymethamphetamine, Morphine, Tramadol, Ketamine, Phencyclidine, Propoxyphene or Tricyclic Antidepressants, Oxycodone, Cotinine, EDDP, Fentanyl, Synthetic Marijuana,6-mono-aceto-morphine, 3, 4-Methylenedioxyamphetamine, Ethyl- β-D-Glucuronide, Clonazepam, Lysergic Acid Diethylamide, Methylphenidate, Zolpidem, 7-Aminoclonazepam,Carfentanyl Caffeine, Cathine and Tropicamide . The following compounds show no cross-reactivity when tested with the Multi-Drug Rapid Test Panel at a concentration of 100 µg/mL. Non Cross-Reacting Compounds

Non Cross-Reacting Compounds

Acetophenetidin	Cortisone	Zomepirac	d-Pseudoephedrine
N-Acetylprocainamide	Creatinine	Ketoprofen	Quinidine
Acetylsalicylic acid	Deoxycorticosterone	Labetalol	Quinine
Aminopyrine	Dextromethorphan	Loperamide	Salicylic acid
Amoxicillin	Diclofenac	Meprobamate	Serotonin

I-Ascorbic acid D Apomorphine D Aspartame E Atropine B Benzilic acid E Benzoic acid E Bilirubin F Calfeine C Cannabidiol H Chloral hydrate H Chloramphenical H Chloramphenical H Chlorampheniazide H d,I-Chlorpheniramine 3	Diffunisal Digoxin Diphenhydramine Ethyl-p-aminobenzoate I-Stradiol Estrone-3-sulfate Erythromycin enoprofen Furosemide Sentisic acid Hemoglobin Hydralazine Hydrochlorothiazide Hydrocortisone D-Hydroxyhippuric acid I-Hydroxytyramine I,I-Isoproterenol	Isoxsuprine d,I-Propanolol Nalidixic acid Naproxen Niacinamide Nifedipine Norethindrone Noscapine d,I-Octopamine Oxalic acid Oxolinic acid Oxolinic acid Oxymetazoline Papaverine Penicillin-G Perphenazine Phenelzine Prednisone	Sulfamethazine Sulindac Tetracycline Tetrahydrocortisone, 3-acetate Tetrahydrocortisone Tetrahydrocotisone Tetrahydrocoline Thiamine Thiotidazine d,I-Tyrosine Triobutamide Triamterene Trifluoperazine Trifluoperazine Trifluoperazine Trifluoperazine Uric acid Verapamil
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[ALCOHOL PERFORMANCE CHARACTERISTICS]

The detection limit on the Urine Alcohol Rapid Test is from 0.02% to 0.30% for approximate relative blood alcohol level. The cutoff level of the Urine Alcohol Rapid Test can vary based on local regulations and laws. Test results can be compared to reference levels with color chart on the foil

ALCOHOL ASSAY SPECIFICITY

The Urine Alcohol Rapid Test will react with methyl, ethyl and allyl alcohols.

[ALCOHOL INTERFERING SUBSTANCES] The following substances may interfere with the Urine Alcohol Rapid Test when using samples other than urine. The named substances do not normally appear in sufficient quantity in urine to interfere with the test

A. Agents which enhance color development B. Agents which inhibit color development

Peroxidases

Strong oxidizers

Reducing agents: Ascorbic acid, Tannic acid, Pyrogallol, Mercaptans and tosylates, Oxalic acid. Uric Acid

Bilirubin L-dopa L-methyldopa Methampyrone

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